

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION FOR
THE PURPOSE OF CONSIDERING:

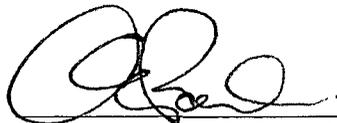
APPLICATION OF NEARBURG EXPLORATION
COMPANY, LLC FOR A NON-STANDARD SPACING
AND PRORATION UNIT AND COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO

CASE NO. 14826

AFFIDAVIT

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

Adam G. Rankin, attorney in fact and authorized representative of Nearburg Exploration Company, LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.

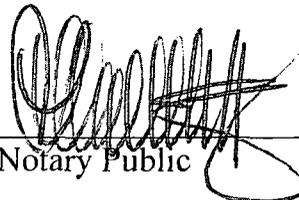


Adam G. Rankin

SUBSCRIBED AND SWORN to before me this 6th day of June 2012 by Adam G. Rankin.



OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/15



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 4
Submitted by:
NEARBURG EXPLORATION COMPANY, LLC
Hearing Date: June 7, 2012

Affidavit of Publication

STATE OF NEW MEXICO)
) ss.
 COUNTY OF LEA)

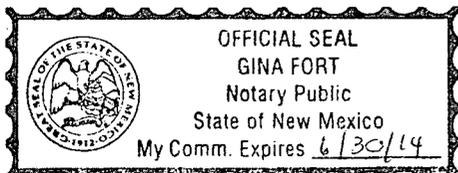
Joyce Clemens being first duly sworn on oath deposes and says that she is Advertising Director of THE LOVINGTON LEADER, a thrice a week newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

That the notice which is hereto attached, entitled Legal Notice was published in a regular and entire issue of THE LOVINGTON LEADER and not in any supplement thereof, for one (1) day(s), beginning with the issue of April 5, 2012 and ending with the issue of April 5, 2012.

And that the cost of publishing said notice is the sum of \$ 84.16 which sum has been (Paid) as Court Costs.

Joyce Clemens
 Joyce Clemens, Advertising Manager
 Subscribed and sworn to before me this 6th day of April, 2012.

Gina Fort
 Gina Fort
 Notary Public, Lea County, New Mexico
 My Commission Expires June 30, 2014



Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by April 16, 2012. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

drilled from a surface location 330 feet from the South line and 660 feet from the West line (Unit M) to a bottom hole location 330 feet from the North line and 660 feet from the West line (Unit D) of Section 23. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of Nearburg Exploration Company, LLC as operator of the well and unit and a 200% charge for risk involved in drilling said well. Said area is approximately 30 miles southwest of Hobbs, New Mexico.

STATE OF NEW MEXICO TO:
 All named parties and persons having any right, title, interest or claim in the following cases and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

CASE NO: 14826:
 Application of Nearburg Exploration Company, LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order (1) creating a non-standard 160-acre spacing and proration unit comprised of the W/2 W/2 of Section 23, Township 20 South, Range 34 East, NMPM, and (2) pooling all mineral interests in all producing reservoirs within the Lisa Bone Spring formation underlying this acreage. Said non-standard unit is to be dedicated to applicant's proposed Laguna 23 Fed Com Well No. 2H, to be horizontally

Given under the Seal of the State of New Mexico Oil Conservation Division at Santa Fe, New Mexico on this 3rd day of April 2012.

STATE OF NEW MEXICO OIL CONSERVATION DIVISION
 Jami Bailey, Division Director
 Published in the Lovington Leader April 5, 2012.

LEGAL NOTICE
 STATE OF NEW MEXICO
 ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
 OIL CONSERVATION DIVISION
 SANTA FE, NEW MEXICO

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on April 26, 2012, in the Oil



April 20, 2012

CERTIFIED MAIL
RETURN RECEIPT REQUESTED**TO AFFECTED INTEREST OWNERS****Re: Application of Nearburg Exploration Company, LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.**

This letter is to advise you that Nearburg Exploration Company, LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application has been set for hearing before a Division Examiner at 8:15 a.m. on May 10, 2012. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions regarding the application please contact Russell Wickman at (432) 818-2912.

Sincerely,

Adam G. Rankin
Associate

EXHIBIT A
NEARBURG EXPLORATION, LLC
LAGUNA 23 FED COM WELL NO. 2H

Nearburg Exploration Company
Post Office Box 823085
Dallas, Texas 75382-3085

Cimarex Energy Co.
600 N. Marienfeld Street
Suite 600
Midland, Texas 79701

Read & Stevens, Inc.
Post Office Box 1518
Roswell, New Mexico 88202

Rottman Oil Partners
308 East Carrillo Street
Santa Barbara, CA 93101

Bean Family Limited Co.
Post Office Box 1738
Roswell, New Mexico 88202

HHB Limited Partnership
6823 S. Florence Avenue
Tulsa, OK 74136

Westway Petro Two
4514 Cole Ave., Suite 600
Dallas, Texas 75205

CBR Oil Properties, LLC
Post Office Box 1518
Roswell, New Mexico 88202

H.W. Allen Co.
4835 Peoria Avenue #20
Tulsa, Oklahoma 74105

Betty Read Young
Post Office Box 811
Roswell, New Mexico 88202

Union Hill Oil & Gas
1201 Elm, Suite 3500
Dallas, Texas 75270

Watson Properties, LLC
3905 Futura Drive
Roswell, New Mexico 88201

Luna Resources, LLC
1006 Le Ann Dr.
Roswell, New Mexico 88202

William V. Palmer, LLC
3226 Anderson Drive
Lovington, New Mexico 88260

CLM Production Co.
Post Office Box 881
Roswell, New Mexico 88202

Elida Gas Group, LLC
Post Office Box 1213
Roswell, New Mexico 88202

Carolyn R. Beall
1414 Country Club Road
Midland, Texas 79702

Diamond Star Production Co.
Post Office Box 638
Ardmore, OK 73402

J&L Exploration, LLC
4221 Timberglen Place
Midland, Texas 79707
Attn. Jim Brannigan

Dr. Alfred J. Rodriquez
6200 W. Parker Road
Suite 215
Plano, Texas 75093

First Century Oil, Inc.
P.O. Box 1518
Roswell, NM 88202

Merry L. Christiansen
Post Office Box 856
Rogersville, Missouri 65742

CSA Petroleum Corp.
Post Office Box 318
Hunt, Texas 78024

Calvin C. Desmond Trust
c/o First American Bank
Post Office Box 1857
Roswell, New Mexico 88202

V.C. Desmond Trust
c/o First American Bank
Post Office Box 1857
Roswell, New Mexico 88202

DHB Partnership
8144 Walnut Hill Lane
Suite 982, LB51
Dallas, Texas 75231

Jack C. Holland
180 Mooring Buoy
Hilton Head Island, SC 29928

EXHIBIT A
NEARBURG EXPLORATION, LLC
LAGUNA 23 FED COM WELL NO. 2H

Phillip G. Huey
6330 E. University
Dallas, Texas 75214

M.P.S., Inc.
17103 Preston Road
LB112, Suite 185
Dallas, Texas 75248

N.M. Western Minerals, Inc.
Post Office Box 1738
Roswell, N.M. 88202

Ralph E. Peacock
4818 South Zunis Ave.
Tulsa, OK 74105

Reserve Management, Inc.
Post Office Box 4469
Longview, Texas 75606

Donald E. or Glenda L. Richter
#9 Willow Wood Street
Dallas, Texas 75205

The Sharon Stone Trolinger
Recovable Trust
6026 Meadowcreek Drive
Dallas, Texas 75248

Marion V. Turner, Trustee
31 Brass Horse Road
Santa Fe, New Mexico 78508

Mewbourne Oil Co./Mewbourne
Energy
Post Office box 7698
Tyler, Texas 75711

Read & Stevens, Inc.
400 N. Pennsylvania Ave.
Suite 1000
Roswell, New Mexico 88201

COG Operating, LLC
550 West Texas, Suite 100
Midland, Texas 79701

Burk Royalty Co., Ltd.
4245 Kemp Blvd., #600
Wichita Falls, TX 76308

Sundown Energy, LP
2 Galleria Tower
13455 Noel Road, Suite 2000
Dallas, Texas 75240

7006 0100 0005 0626 5035

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 DALLAS TEXAS

Sent To:
 Street, Apt or PO Box
 City, State

Nearburg Exploration Company
 Post Office Box 823085
 Dallas, Texas 75382-3085

PS Form 3800, June 2002 See Reverse for Instructions

U.S. POSTAL SERVICE™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 DALLAS TEXAS

Sent To:
 Street, Apt or PO Box
 City, State

Nearburg Exploration Company
 Post Office Box 823085
 Dallas, Texas 75382-3085

PS Form 3800, June 2002 See Reverse for Instructions

U.S. POSTAL SERVICE™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit **nearburg/laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 DALLAS TEXAS

Sent To:
 Street, Apt or PO Box
 City, State

Cimarex Energy Co.
 600 N. Marienfeld Street
 Suite 600
 Midland, Texas 79701

PS Form 3800, June 2002 See Reverse for Instructions

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nearburg Exploration Company
 Post Office Box 823085
 Dallas, Texas 75382-3085

2. Article Number (Transfer from service label) 7006 0100 0005 0626 5035

IN ON DELIVERY

A. Signature Agent Addressee

[Signature]

B. Received by (Printed Name) RICHARD CAMPBELL C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: CO

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cimarex Energy Co.
 600 N. Marienfeld Street
 Suite 600
 Midland, Texas 79701

2. Article Number (Transfer from service label) 7006 0100 0005 0626 5813

IN ON DELIVERY

A. Signature Agent Addressee

[Signature]

B. Received by (Printed Name) JANET BARNETT C. Date of Delivery 4-23-12

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

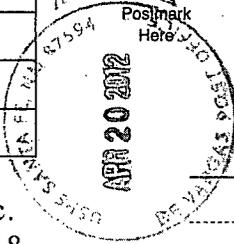
7006 0100 0005 0005 0626 5783

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: **Nearburg/Laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here


Send to:
 Recipient Name: **Read & Stevens, Inc.**
 Street or P.O. Box: **Post Office Box 1518**
 City: **Roswell, New Mexico 88202**

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: CC **CERTIFIED MAIL** **ON DELIVERY**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Read & Stevens, Inc.
Post Office Box 1518
Roswell, New Mexico 88202

2. Article Number: **7006 0100 0005 0626 5783**
(Transfer from service)

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature: **X [Signature]** Agent Addressee
 B. Received by (Printed Name): **A. THOMPSON**
 C. Date of Delivery: **4-23-12**

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

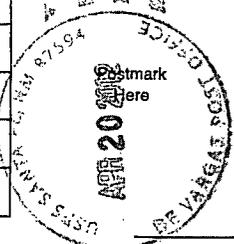
7006 0100 0005 0005 0626 5790

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: **Nearburg/Laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here


Send to:
 Recipient Name: **Rottman Oil Partners**
 Street or P.O. Box: **308 East Carrillo Street**
 City: **Santa Barbara, CA 93101**

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COM1 **CERTIFIED MAIL** **ON DELIVERY**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Rottman Oil Partners
308 East Carrillo Street
Santa Barbara, CA 93101

2. Article Number: **7006 0100 0005 0626 5790**
(Transfer from service)

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature: **X [Signature]** Agent Addressee
 B. Received by (Printed Name): **Loe Carter**
 C. Date of Delivery:

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

9095 9290 5000 0010 9000

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information via **Nearburg/Laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 ROSWELL, NM 88201

Sent To
 Street, or PO Box
 City, St.
Bean Family Limited Co.
Post Office Box 1738
Roswell, New Mexico 88202

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL ON-ON DELIVERY

SENDER: CC

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
Contra Arroyo
 Agent
 Addressee

B. Received by (Printed Name)
Contra Arroyo

C. Date of Delivery
 APR 25 2012
 88201

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

1. Article Addressed to:
Bean Family Limited Co.
Post Office Box 1738
Roswell, New Mexico 88202

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service) **7006 0100 0005 0626 5806**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

6925 9290 5000 0010 9000

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information via **Nearburg/Laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 TULSA, OK 74136

Sent To
 Street, or PO Box
 City, St.
HHB Limited Partnership
6823 S. Florence Avenue
Tulsa, OK 74136

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL ON-ON DELIVERY

SENDER: COMP

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
H.B. Bass
 Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 4-23-12

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

1. Article Addressed to:
HHB Limited Partnership
6823 S. Florence Avenue
Tulsa, OK 74136

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

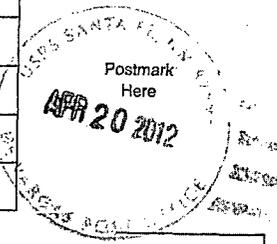
2. Article Number
 (Transfer from service) **7006 0100 0005 0626 5769**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

9275 9290 5000 0100 0100 5444

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit **Nearburg/Laguna 23**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



Westway Petro Two
4514 Cole Ave., Suite 600
Dallas, Texas 75205

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™ SENDER: CO ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Westway Petro Two
4514 Cole Ave., Suite 600
Dallas, Texas 75205

2. Article Number (Transfer from service label) 7006 0100 0005 0626 5776

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

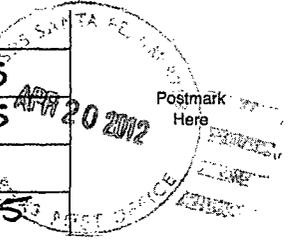
A. Signature Agent Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

2525 9290 5000 0100 0100 9002

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit **Nearburg/Laguna 23**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



CBR Oil Properties, LLC
Post Office Box 1518
Roswell, New Mexico 88202

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™ SENDER: CO ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
CBR Oil Properties, LLC
Post Office Box 1518
Roswell, New Mexico 88202

2. Article Number (Transfer from service label) 7006 0100 0005 0626 5752

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature Agent Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here: APR 20 2004

Sent To: H.W. Allen Co.
 Street, or P.O.: 4835 Peoria Avenue #20
 City, State: Tulsa, Oklahoma 74105

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 5745

CERTIFIED MAIL™

SENDER: COM
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

IN ON DELIVERY

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: *S. Denney* Agent Addressee

B. Received by (Printed Name): *S. DENNEY* C. Date of Delivery: *4/23/12*

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

1. Article Addressed to:
 H.W. Allen Co.
 4835 Peoria Avenue #20
 Tulsa, Oklahoma 74105

2. Article Number (Transfer from service label): **7006 0100 0005 0626 5745**

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here: APR 20 2004

Sent To: Betty Read Young
 Street, or P.O.: Post Office Box 811
 City, State: Roswell, New Mexico 88202

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 5721

CERTIFIED MAIL™

SENDER: CC
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

IN ON DELIVERY

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: *Betty Young* Agent Addressee

B. Received by (Printed Name): *Betty Young* C. Date of Delivery: *4/25/12*

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

1. Article Addressed to:
 Betty Read Young
 Post Office Box 811
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label): **7006 0100 0005 0626 5721**

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5738

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23**
OFFIC

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 DE VARGAS POST OFFICE

Sent Union Hill Oil & Gas
 Street or PO 1201 Elm, Suite 3500
 City Dallas, Texas 75270

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature Agent Addressee
 X *John...*

B. Received by (Printed Name) *LOUIS FERRER* C. Date of Delivery *4/23/12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3500

1. Article Addressed to:
 Union Hill Oil & Gas
 1201 Elm, Suite 3500
 Dallas, Texas 75270

2. Article Number *7006 0100 0005 0626 5738*
 (Transfer from service label)

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5707

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23**
OFFIC

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 DE VARGAS POST OFFICE

Sent Watson Properties, LLC
 Street 3905 Futura Drive
 City Roswell, New Mexico 88201

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature Agent Addressee
 X *Barbara...*

B. Received by (Printed Name) *B. WATSON* C. Date of Delivery *4/21/12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

Watson Properties, LLC
 3905 Futura Drive
 Roswell, New Mexico 88201

2. Article Number *7006 0100 0005 0626 5707*
 (Transfer from service label)

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5714

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23 OFFIC**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012

Sent To
 Luna Resources, LLC
 Street, or PO Box 1006 Le Ann Dr.
 City, State, ZIP+4® Roswell, New Mexico 88202

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION **THIS SECTION ON DELIVERY**

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Luna Resources, LLC
 1006 Le Ann Dr.
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5714**

A. Signature Agent Addressee
 X *David Luna*

B. Received by (Printed Name) *David Luna* C. Date of Delivery *4/23/12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:
 2205 SCR 1084
 MIDLAND TX 79706

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5684

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23 OFFIC**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012

Sent To
 William V. Palmer, LLC
 Street, or PO Box 3226 Anderson Drive
 City, State, ZIP+4® Lovington, New Mexico 88260

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION **THIS SECTION ON DELIVERY**

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 William V. Palmer, LLC
 3226 Anderson Drive
 Lovington, New Mexico 88260

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5684**

A. Signature Agent Addressee
 X *Will Palmer*

B. Received by (Printed Name) *Will Palmer* C. Date of Delivery *4/23/12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

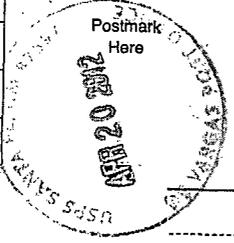
7006 0100 0005 0626 5691

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**

OFFIC

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here


Sent _____
 Street or PO Box _____
 City _____

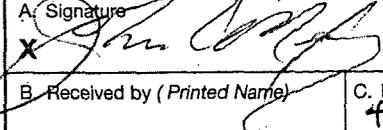
CLM Production Co.
 Post Office Box 881
 Roswell, New Mexico 88202

PS Form 3800, June 2002 See Reverse for Instructions

SEND PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

THIS SECTION ON DELIVERY

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature Agent Addressee
 X 

B. Received by (Printed Name) _____ C. Date of Delivery **4-23-12**

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

1. Article Addressed to:
 CLM Production Co.
 Post Office Box 881
 Roswell, New Mexico 88202

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number | 7006 0100 0005 0626 5691
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

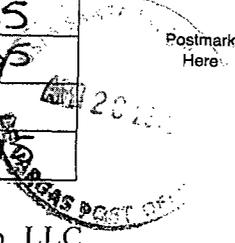
7006 0100 0005 0626 5660

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**

OFFIC

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here


Sent _____
 Street or PO Box _____
 City _____

Elida Gas Group, LLC
 Post Office Box 1213
 Roswell, New Mexico 88202

PS Form 3800, June 2002 See Reverse for Instructions

SEND PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

THIS SECTION ON DELIVERY

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature Agent Addressee
 X 

B. Received by (Printed Name) **Kory M. Mink** C. Date of Delivery **APR 24 2012**

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

1. Article Addressed to:
 Elida Gas Group, LLC
 Post Office Box 1213
 Roswell, New Mexico 88202

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number | 7006 0100 0005 0626 5660
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here: **APR 20 2012**

Ser. Carolyn R. Beall
 Str. or PO 1414 Country Club Road
 City Midland, Texas 79702

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 5677

SEN
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

HIS SECTION ON DELIVERY

1. Article Addressed to:
 Carolyn R. Beall
 1414 Country Club Road
 Midland, Texas 79702

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5677**

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature Agent Addressee
Carolyn R. Beall

B. Received by (Printed Name) **Carolyn R. Beall** C. Date of Delivery **4-24-12**

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here: **APR 20 2012**

Sent To Diamond Star Production Co.
 Street, or PO Post Office Box 638
 City, S Ardmore, OK 73402

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 5646

SENDER: COMPLETE
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SECTION ON DELIVERY

1. Article Addressed to:
 Diamond Star Production Co.
 Post Office Box 638
 Ardmore, OK 73402

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5646**

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature Agent Addressee
[Signature]

B. Received by (Printed Name) **[Name]** C. Date of Delivery **4-24-12**

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5653

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**
OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here

Sent To: J&L Exploration, LLC
 Street, or PO: 4221 Timberglen Place
 City, St: Midland, Texas 79707
 Attn: Jim Brannigan

PS Form 3800, June 2002 See Reverse for Instructions

SENDER COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 J&L Exploration, LLC
 4221 Timberglen Place
 Midland, Texas 79707
 Attn: Jim Brannigan

2. Article Number
 (Transfer from service label) 7006 0100 0005 0626 5653

COMPLETE THIS SECTION ON DELIVERY

A. Signature

 Agent
 Addressee

B. Received by (Printed Name)
 Laurie Brannigan

C. Date of Delivery
 5-4-12

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5653

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **nearburg/laguna 23**
OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here

Sent To: Dr. Alfred J. Rodriguez
 Street, or PO: 6200 W. Parker Road
 City, St: Suite 215
 Plano, Texas 75093

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 5837

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **OFFICIAL WEBSITE** **nearburg/Laguna 23**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2002

Sent _____
 Street or P.O. _____
 City _____

First Century Oil, Inc.
 P.O. Box 1518
 Roswell, NM 88202

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™ **THIS SECTION ON DELIVERY**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS; FOLD AT DOTTED LINE

SENDER

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

First Century Oil, Inc.
 P.O. Box 1518
 Roswell, NM 88202

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5837**

ADDRESSEE

A. Signature Agent Addressee
 X *A. Thompson*

B. Received by: (Printed Name) **A. Thompson** C. Date of Delivery **4-23-12**

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5844

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **OFFICIAL WEBSITE** **nearburg/Laguna 23**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012

Sent _____
 Street or P.O. _____
 City _____

Merry L. Christiansen
 Post Office Box 856
 Rogersville, Missouri 65742

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™ **THIS SECTION ON DELIVERY**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS; FOLD AT DOTTED LINE

SENDER

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Merry L. Christiansen
 Post Office Box 856
 Rogersville, Missouri 65742

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5844**

ADDRESSEE

A. Signature Agent Addressee
Merry Christiansen

B. Received by: (Printed Name) **Merry Christiansen** C. Date of Delivery **4-24-12**

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5851

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information, visit **Nearburg/Laguna 23 OFFICE**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Sent To
 Street, A or PO B.
 City, Sta

CSA Petroleum Corp.
 Post Office Box 318
 Hunt, Texas 78024

Postmark Here
 APR 20 2012
 NEARBURG, TEXAS

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL

SE PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

THIS SECTION ON DELIVERY

1. Article Addressed to:
 CSA Petroleum Corp.
 Post Office Box 318
 Hunt, Texas 78024

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5851**

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) *Chris Campbell*

C. Date of Delivery
 APR 23 2012

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

USPS

7006 0100 0005 0626 5851

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information, visit **Nearburg/Laguna 23 OFFICE**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Sent To
 Street, A or PO B.
 City, Sta

Calvin C. Desmond Trust
 c/o First American Bank
 Post Office Box 1857
 Roswell, New Mexico 88202

Postmark Here
 APR 20 2012
 NEARBURG, TEXAS

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICE Nearburg/Laguna 23

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Sent To: V.C. Desmond Trust
 c/o First American Bank
 Post Office Box 1857
 Roswell, New Mexico 88202

PS Form 3800, June 2002

SENDER INFORMATION

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 V.C. Desmond Trust
 c/o First American Bank
 Post Office Box 1857
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label): 7006 0100 0005 0626 5875

THIS SECTION ON DELIVERY

A. Signature: [Signature] Agent Addressee

B. Received by (Printed Name): [Blank] C. Date of Delivery: [Blank]

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICE Nearburg/Laguna 23

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Sent To: DHB Partnership
 8144 Walnut Hill Lane
 Suite 982, LB51
 Dallas, Texas 75231

PS Form 3800, June 2002

SENDER INFORMATION

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 DHB Partnership
 8144 Walnut Hill Lane
 Suite 982, LB51
 Dallas, Texas 75231

2. Article Number (Transfer from service label): 7006 0100 0005 0626 5882

THIS SECTION ON DELIVERY

A. Signature: [Signature] Agent Addressee

B. Received by (Printed Name): JOHN GOBLE C. Date of Delivery: 9-23-10

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

79006 0100 0005 0626 5899

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **nearburg/Laguna 23 OFFICE**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 HILTON HEAD ISLAND, SC 29928

Sent To
 Street, A, or PO Bc
 City, State
 Jack C. Holland
 180 Mooring Buoy
 Hilton Head Island, SC 29928

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™ THIS SECTION ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS; FOLD AT DOTTED LINE

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

B. Received by (Printed Name) *X Cynthia Holland* Agent Addressee

C. Date of Delivery *4-23-12*

1. Article Addressed to:
 Jack C. Holland
 180 Mooring Buoy
 Hilton Head Island, SC 29928

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label) 7006 0100 0005 0626 5899

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

79006 0100 0005 0626 5899

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **nearburg/Laguna 23 OFFICE**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012
 HILTON HEAD ISLAND, SC 29928

Sent To
 Street, A, or PO Bc
 City, State
 Phillip G. Huey
 6330 E. University
 Dallas, Texas 75214

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 0626 5926

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit www.usps.com Nearburg/Laguna 23

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012

Sent To: M.P.S., Inc.
 Street, Apt. or PO Box: 17103 Preston Road
 City, State: LB112, Suite 185
 Dallas, Texas 75248

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: *Ron Guista* Agent Addressee

B. Received by (Printed Name): *Ron Guista* C. Date of Delivery: *4/23/12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

1. Article Addressed to:
 M.P.S., Inc.
 17103 Preston Road
 LB112, Suite 185
 Dallas, Texas 75248

2. Article Number: 7006 0100 0005 0626 5926
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5926

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit www.usps.com Nearburg/Laguna 23

OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 APR 20 2012

Sent To: N.M. Western Minerals, Inc.
 Street, Apt. or PO Box: Post Office Box 1738
 City, State: Roswell, N.M. 88202

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION **COMPLETE THIS SECTION ON DELIVERY**

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: *Sandra Carver* Agent Addressee

B. Received by (Printed Name): *Sandra Carver* C. Date of Delivery: *APR 23 2012*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

1. Article Addressed to:
 N.M. Western Minerals, Inc.
 Post Office Box 1738
 Roswell, N.M. 88202

2. Article Number: 7006 0100 0005 0626 5929
 (Transfer from service label)

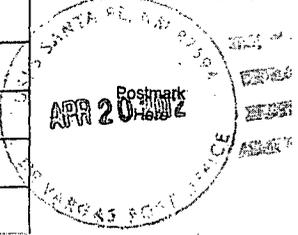
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5943

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23**
OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



Sent To
 Street, / or PO B
 City, St
 Ralph E. Peacock
 4818 South Zunis Ave.
 Tulsa, OK 74105

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 5943

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23**
OFFICE

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



Sent
 Street or PO
 City
 Reserve Management, Inc.
 Post Office Box 4469
 Longview, Texas 75606

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

LETE THIS SECTION ON DELIVERY

Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Reserve Management, Inc.
 Post Office Box 4469
 Longview, Texas 75606

2. Article Number:
 (Transfer from service label) 7006 0100 0005 0626 5943

A. Signature
 X [Signature] Agent Addressee

B. Received by (Printed Name)
 [Signature] C. Date of Delivery
 4/23

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

LONGVIEW, TEXAS 75606
 APR 23 2012
 USPS

0626 5950
9290 5000
0100 0005
7006

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **Nearburg/Laguna 23 OFFICE**

Postage	\$.65	
Certified Fee	2.95	
Return Receipt Fee (Endorsement Required)	2.35	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 5.95	

Sent To
 Donald E. or Glenda L. Richter
 #9 Willow Wood Street
 Dallas, Texas 75205

PS Form 3800, June 2002 See Reverse for Instructions

SEN PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

THIS SECTION ON DELIVERY

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Donald E. or Glenda L. Richter
 #9 Willow Wood Street
 Dallas, Texas 75205

2. Article Number (Transfer from service label): 7006 0100 0005 0626 5950

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature: *Glenda L. Richter*
 Agent Addressee
 B. Received by (Printed Name): *Glenda L. Richter*
 C. Date of Delivery: *4-15-12*
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

0626 5967
9290 5000
0100 0005
7006

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **Nearburg/Laguna 23 OFFICE**

Postage	\$.65	
Certified Fee	2.95	
Return Receipt Fee (Endorsement Required)	2.35	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 5.95	

Sent To
 The Sharon Stone Trolinger
 Recovable Trust
 6026 Meadowcreek Drive
 Dallas, Texas 75248

PS Form 3800, June 2002 See Reverse for Instructions

SEN PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

THIS SECTION ON DELIVERY

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 The Sharon Stone Trolinger
 Recovable Trust
 6026 Meadowcreek Drive
 Dallas, Texas 75248

2. Article Number (Transfer from service label): 7006 0100 0005 0626 5967

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

A. Signature: *Sharon Trolinger*
 Agent Addressee
 B. Received by (Printed Name): *SHARON TROLINGER*
 C. Date of Delivery: *APR 20 2012*
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5974

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **Nearburg/Laguna 23 OFFICE**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 SANTA FE, NM APR 20 2012

Sent _____
 Street or PO _____
 City, _____
 Marion V. Turner, Trustee
 31 Brass Horse Road
 Santa Fe, New Mexico 78508

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Marion V. Turner, Trustee
 31 Brass Horse Road
 Santa Fe, New Mexico 78508

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5974**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *Marion Turner*

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below: _____

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5981

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **Nearburg/Laguna 23 OFFICE**

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here
 SANTA FE, NM APR 20 2012

Sent _____
 Street or PO _____
 City, _____
 Mewbourne Oil Co./Mewbourne Energy
 Post Office box 7698
 Tyler, Texas 75711

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Mewbourne Oil Co./Mewbourne Energy
 Post Office box 7698
 Tyler, Texas 75711

2. Article Number (Transfer from service label) **7006 0100 0005 0626 5981**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *Henry Granville*

B. Received by (Printed Name) **HENRY GRANVILLE** C. Date of Delivery **4-28-12**

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below: _____

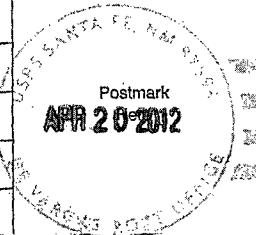
3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23 OFFICE**

Postage	\$.65	
Certified Fee	2.95	
Return Receipt Fee (Endorsement Required)	2.35	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 5.95	

Sent To: **Read & Stevens, Inc.**
 Street, or P.O. or City: **400 N. Pennsylvania Ave. Suite 1000 Roswell, New Mexico 88201**

PS Form 3800, June 2002 See Reverse for Instructions

9466 5998 0626 5000 0005 0010 7006

CERTIFIED MAIL™

SE THIS SECTION ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
**Read & Stevens, Inc.
 400 N. Pennsylvania Ave.
 Suite 1000
 Roswell, New Mexico 88201**

A. Signature: **x A. Thompson** Agent Addressee

B. Received by (Printed Name): **A. THOMPSON** C. Date of Delivery: **5-3-12**

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

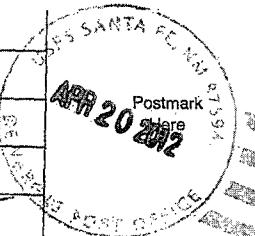
4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label): **7006 0100 0005 0626 5998**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **Nearburg/Laguna 23 OFFICE**

Postage	\$.65	
Certified Fee	2.95	
Return Receipt Fee (Endorsement Required)	2.35	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 5.95	

Sent To: **COG Operating, LLC**
 Street, or P.O. or City, St: **550 West Texas, Suite 100 Midland, Texas 79701**

PS Form 3800, June 2002 See Reverse for Instructions

9466 5220 0625 5000 0005 0010 7006

CERTIFIED MAIL™

SEN THIS SECTION ON DELIVERY

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
**COG Operating, LLC
 550 West Texas, Suite 100
 Midland, Texas 79701**

A. Signature: **x mmccall** Agent Addressee

B. Received by (Printed Name): C. Date of Delivery: **4-23-12**

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label): **7006 0100 0005 0625 9348**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0625 9355

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **Post Office** Nearburg/Laguna 23

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.95

Postmark Here: APR 20 2012

Sent To: **Burk Royalty Co., Ltd.**
 4245 Kemp Blvd., #600
 Wichita Falls, TX 76308

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Burk Royalty Co., Ltd.
 4245 Kemp Blvd., #600
 Wichita Falls, TX 76308

2. Article Number (Transfer from service label): 7006 0100 0005 0625 9355

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *T. Walker* Agent Addressee

B. Received by (Printed Name): *T. Walker* C. Date of Delivery: *4-23-12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type:
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 0626 5028

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our **Post Office** Nearburg/Laguna 23

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.95

Postmark Here: APR 20 2012

Sent To: **Sundown Energy, LP**
 2 Galleria Tower
 13455 Noel Road, Suite 2000
 Dallas, Texas 75240

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Sundown Energy, LP
 2 Galleria Tower
 13455 Noel Road, Suite 2000
 Dallas, Texas 75240

2. Article Number (Transfer from service label): 7006 0100 0005 0626 5028

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *R. Thurman* Agent Addressee

B. Received by (Printed Name): *R. Thurman* C. Date of Delivery: *4-23-12*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type:
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540