

East Blinbry-Drinkard Unit Waterflood Project
Revised 6/10/2005

Sent out packages 3/18/05
Follow Up Letters sent 4/5/05
BLM Letters sent 4/7/05
Sent out Hearing Notices 5/10/05

Working Interest Owners	Green Card Rec'd	Hearing Notice GC Rec'd	Unit WI %	Received Signature Pages for:			PHONE #	Date Contacted	Comments
				Unit Agreement	Unit Oper. Agree				
BP America	3/21/05	5/23/05	8.4231%						4/7/05 Sent BLM letter. Sent Hearing Notices 5/10/05.
Chevron	3/21/05	5/12/05	9.4242%						4/7/05 Sent BLM letter. Sent Hearing Notices 5/10/05.
Christopher Wilkinson	3/25/05		0.0027%	X	X				4/7/05 Sent BLM letter.
Elliott Industries	3/22/05		2.4891%	X	X		(505) 622-5840		Contact Steve Elliott. They sent signature pages 3/30/05.
Elliott-Hall Company	3/23/05		2.4891%	X	X		(801) 399-5871		Contact George Hall
Exxon Mobil	3/21/05	5/12/05	0.0962%						Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. Sent Hearing Notice 5/10/05.
Frank Glispin	3/22/05	5/19/05	0.0016%				(214) 373-8487		Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. Sent Hearing Notices 5/10/05.
J.L. and Jessie M. Reynolds			0.0201%						Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. Everything returned Unclaimed.
Ken McPeters	3/22/05		0.0006%	X	X				WRONG ADDRESS. Sent Hearing Notices 5/10/05.
Letunich Oil	3/22/05	5/13/05	0.1834%				(915) 764-2365	5/6/05	4/7/05 Sent BLM letter.
McElvain			7.4684%	X	X				Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. 5/5/05 - Called and left message with Martin Letunich. 5/6/05 - Spoke to Martin - said he will look at package. Sent Hearing Notice 5/10/05.
Tierra Exploration	3/31/05	5/13/05	0.0162%	X	X		(505) 391-8503	5/3/05	Address change - resent package 3/29/05. Was told they are will sign pages. 4/7/05 Sent BLM letter. Called 5/3/05 - Said they are sending pages. Sent Hearing Notices 5/10/05.
Triple H. Resources	3/30/05		0.0016%	X	X		(432) 685-3001		Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter.
Watson Truck & Supply	3/22/05		0.0038%	X	X		(505) 397-2411	4/14/05	4/7/05 Sent BLM letter. 4/14/05 - Called to get UOA pgs - Resent UOA uncertified Attn: Lynetta Pape. She said she never got the original UOA.

14 NUMBER OF WORKING INTEREST OWNERS

BEFORE THE
OIL CONSERVATION DIVISION
Case No. Exhibit No. — **11**
Submitted By:
Apache Corporation
Hearing Date: June 16, 2005

East Blaineby-Drinkard Unit Waterflood Project Revised 6/10/2005										
Sent out 3/18/05										
Follow Up Letters sent 4/5/05										
BLM Letters sent 4/7/05										
Sent out Hearing Notices 5/10/05										
Unleased Mineral Owners	Green Card	Hearing Notice GC	Unit WI %	Unit RI %	Received UA UOA	PHONE #	Date Contacted:	Comments		
Baynard Malone	3/21/05	5/13/05	0.0119%	0.0017%		(505) 622-5747	4/8/05	Blocked calls. Larry also tried and blocked his calls. Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. Got new phone # from Earl Malone and spoke with Baynard 4/8/05. Will call him back 4/11/05. 4/12/05 - Per Larry, Contact Lucille Wolf @ 505-626-5864. May Lease. 4/21/05 Called Lucille - said she is still talking with him. Sent Hearing Notices 5/10/05. Called Lucille 5/24/05 - no answer or voicemail.		
David Arrington	3/22/05	5/16/05	0.0045%	0.0006%		(432) 682-6685		Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. 4/7/05 SENT OGL & RATIF. (JAMIE LUCAS TRYING TO PERSUADE DAVID INTO LEASING). Sent Hearing Notices 5/10/05.		
Donald Long	3/28/05	5/19/05	0.0004%	0.0001%		(505) 330-6954	3/30/05	Called Jo Ann Long for phone number. Called 4/5/05 and left message. Called 4/7/05, no message. Sent BLM letter 4/7/05. Called and left message, Sent Follow-Up Letter 4/8/05. 4/12/05 - Larry is to call him and he will then decide what he wants to do. Larry sent OGL & Ratif. 4/22/05. Sent Hearing Notices 5/10/05. Called 5/24/05 - left follow up message.		
Earl Malone	4/4/05	No date, but was rec'd	0.0119%	0.0017%		(505) 622-1383	3/30/05	Resent to new address 3/30/05. Called 4/5/05 - he rec'd pkg 4/4/05. Will call again 4/7/05. 4/7/05 -Spoke to caretaker and left message. Did not send BLM letter yet. 4/12/05 - Per Larry, Contact Lucille Wolf @ 505-626-5864. May Lease. 4/21/05 -Called Lucille - said she is still talking with him. Sent Hearing Notices 5/10/05.		
Elizabeth Eaton	3/21/05	5/12/05	0.0104%	0.0015%	X X	(505) 626-5864	4/14/05	Sent Follow-Up Letter 4/5/05. 4/7/05 Sent BLM letter. 4/12/05 - Per Larry, Contact Lucille Wolf @ 505-626-5864. May Lease. Rec'd signature pgs. 4/14/05 - Called Lucille to confirm decision to stay WI - no answer, no voicemail. 4/21/05 - Spoke with Lucille - she has not spoken with Elizabeth yet but will and will tell her to lease. May disregard signature pages. Sent Hearing Notices 5/10/05.		
Kenneth Long			0.0004%	0.0001%		(702) 250-5312	3/30/05	Called Jo Ann Long for phone number. Called 4/5/05 - P.O. closes before he gets off work. Resent pkg uncertified 4/5/05. Did not send BLM letter yet. Called 4/8/05 - Kenneth hung up on me, sent him Follow-Up Letter. 4/12/05 - Said he will lease. Notified Larry by e-mail. Larry sent OGL 4/13/05. Sent Hearing Notices 5/10/05. Called 5/24/05 - couldn't leave voicemail, but left call back #.		

East Blinbry-Drinkard Unit Waterflood Project											
Revised 6/10/2005											
Sent out 3/18/05											
Follow Up Letters sent 4/5/05											
BLM Letters sent 4/7/05											
Sent out Hearing Notices 5/10/05											
Unleased Mineral Owners	Green Card	Hearing Notice GC	Unit WI % 87.5%	Unit RI% 12.5%	Received		PHONE #	Date Contacted:	Comments		
					UA	UOA					
Marsha Cockrell	-		0.0004%	0.0001%			(505) 486-6039	4/28/05	No address available. Package cannot be sent. 4/27/05 - Jo Ann Long called to give Marsha's address and phone number. 4/28/05 - Spoke to Marsha to confirm information. She will probably lease so Larry is to call her to discuss details of lease. Sent Hearing Notices 5/10/05. Called 5/24/05 - She said Larry has not sent OGL or Ratif. b/c they haven't been able to contact each other.		
Ora Lee Jones	3/22/05	5/12/05	0.0014%	0.0002%			(806) 296-9326	3/30/05	Leasing. SENT OGL & RATIF. 3/30/05. Sent Hearing Notices 5/10/05. Called 5/24/05 - She can't hear me on the phone. Tried to call Ruth Brown, but couldn't contact.		
P. L. Lawrence Estate	4/4/05	5/17/05	0.1425%	0.0204%				3/30/05	(318) 783-0616 is the wrong phone number. E-mailed Larry 4/5/05 for Maura Smyrl Jennings phone number. She may have the number of whoever inherited P.L.'s interest. Got phone # of Maura and Lynn Lawrence, both are wrong #'s - 4/7/05. 4/7/05 Sent BLM letter. Sent Follow-Up Letter 4/8/05. Sent Hearing Notices 5/10/05.		
Rosser Schwarz (deceased)	3/28/05	5/12/05	0.0060%	0.0009%				3/30/05	(relative) will speak to his wife and advise her to sign agreement pages. 4/7/05 Sent BLM letter. Leasing. 4/12/05 - Spoke to Anne and clarified details of agreements - Anne then decided to lease. Anne will e-mail me Rosser's attorney's name, address and phone number so Larry can send lease & ratification. Anne will advise Rosser's wife to sign lease. Sent Hearing Notices 5/10/05. As of 5/16/05 - Have not received attorney's mailing info. Called Anne for his wife's phone number.		
								10 NUMBER OF UNLEASED MINERAL OWNERS			

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Exxon Mobil Corporation
 P.O. Box 4697
 Houston, TX 77210-4697
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002

See Re

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:

Exxon Mobil Corporation
 P.O. Box 4697
 Houston, TX 77210-4697
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service i

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delive

C. Signature **GEE**
X

MAY 16 2005
☐ Agent
☐ Addres

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

MAY 16 2005

TULSA

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandis
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 8550

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095:

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Chevron USA Inc.
 11111 South Wilcrest
 Houston, TX 77099
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002

See Re

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:

Chevron USA Inc.
 11111 South Wilcrest
 Houston, TX 77099
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service lab

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delive

C. Signature **Chris Farley**
X Chris Farley

☐ Agent
☐ Addres

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

RECEIVED

MAY 18 2005

TULSA

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandis
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 8543

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Domestic Return Receipt

102595-00-M-0952

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Earl Malone MD
 2801 N. Kentucky, Apt. 122
 Roswell, NM 88201-0607
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002

See Re

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:

Earl Malone MD
 2801 N. Kentucky, Apt. 122
 Roswell, NM 88201-0607
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service lat

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Deliver

C. Signature

X

☐ Agent
☐ Addres

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

RECEIVED

MAY 16 2005

TULSA

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandis
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 8574

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7002 2410 0004 2680 9496

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ICIAL U

Donald Long
 1514 Martin Ave.
 Aztec, NM 87410
 (MH-EB-DU Hearing Notice)

\$

PS Form 3800, June 2002 See Rev

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:

Donald Long
 1514 Martin Ave.
 Aztec, NM 87410
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) Chris Long B. Date of Delivery MAY 19 2005
- C. Signature X Chris Long ☐ Agent ☐ Address
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

MAY 19 2005

TULSA
LAND DEPT.

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9496

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 8505

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ICIAL U

Lettunich Oil Company
 P.O. Box 925
 Fabens, TX 79838
 (MH-EB-DU Hearing Notice)

\$

PS Form 3800, June 2002 See Rev

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:

Lettunich Oil Company
 P.O. Box 925
 Fabens, TX 79838
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) Bill Johnson B. Date of Delivery MAY 13 2005
- C. Signature X Bill Johnson ☐ Agent ☐ Address
- 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

7002 2410 0004 2680 8505

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Domestic Return Receipt

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7002 2410 0004 2680 8536

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ICIAL U

Marsha Cockrell
 313 County Road 2900
 Aztec, NM 87410
 (MH-EB-DU Hearing Notice)

\$

PS Form 3800, June 2002 See Rev

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:

Marsha Cockrell
 313 County Road 2900
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) unclaimed B. Date of Delivery unclaimed
- C. Signature X ☐ Agent ☐ Address
- 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

7002 2410 0004 2680 8536

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Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9465

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ICIAL

Duce Bivins
 c/o William Bivins
 8479 Sexton Rd
 Pasadena, MD 21122-2913
 (MH-EB-DU Hearing Notice)

PS Form 3800, June 2002 See F

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:

Duce Bivins
 c/o William Bivins
 8479 Sexton Rd
 Pasadena, MD 21122-2913
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9465

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Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *MARY K. BIVINS* B. Date of Delivery *5/13*

C. Signature *X Mary K. Bivins* ☐ Agent ☐ Addressee

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

RECEIVED

MAY 16 2005

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LAND DEPT.

7002 2410 0004 2680 9472

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ICIAL

P.L. Lawrence Jr. Estate
 P.O. Box L
 Crowley, LA 70526
 (MH-EB-DU Hearing Notice)

City, State, ZIP+4

PS Form 3800, June 2002 See F

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:

P.L. Lawrence Jr. Estate
 P.O. Box L
 Crowley, LA 70526
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9472

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Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *Way Hayes* B. Date of Delivery *5-17-05*

C. Signature *X Way Hayes* ☐ Agent ☐ Addressee

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

RECEIVED

MAY 20 2005

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ICIAL

Baynard W. Malone, Trustee of
 the Andersen-Malone Trust
 P.O. Box 87
 Roswell, NM 88202-0087
 (MH-EB-DU Hearing Notice)

City, State, ZIP+4

PS Form 3800, June 2002 See F

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:

Baynard W. Malone, Trustee of
 the Andersen-Malone Trust
 P.O. Box 87
 Roswell, NM 88202-0087
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 8512

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *BW Malone* B. Date of Delivery *5-13-05*

C. Signature *X BW Malone* ☐ Agent ☐ Addressee

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

RECEIVED

MAY 19 2005

TULSA
LAND DEPT.

7002 2410 0004 2680 9434

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ICIAL US

Patricia D. Lee
176 Lee Ranch Road
Lovington, NM 88260
(MH-EB-DU Hearing Notice)

PS Form 3800, June 2002

See Reverse

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:

Patricia D. Lee
176 Lee Ranch Road
Lovington, NM 88260
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9434

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
C. Signature
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED

MAY 26 2005

TULSA
LAND DEPT.

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9441

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ICIAL US

Ruby Rodgers
816 Trailing Heart
Roswell, NM 88201
(MH-EB-DU Hearing Notice)

PS Form 3800, June 2002

See Reverse

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:

Ruby Rodgers
816 Trailing Heart
Roswell, NM 88201
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9441

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
C. Signature
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED

MAY 23 2005

TULSA
LAND DEPT.

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9450

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ICIAL US

David H. Arrington
P.O. Box 2071
Midland, TX 79702
(MH-EB-DU Hearing Notice)

PS Form 3800, June 2002

See Reverse

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:

David H. Arrington
P.O. Box 2071
Midland, TX 79702
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9450

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
C. Signature
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED

MAY 20 2005

TULSA
LAND DEPT.

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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OFFICIAL USE

Rosser Schwarz
324 W. Ramona Ave.
Colorado Springs, CO 80906
(MH-EB-DU Hearing Notice)

\$	
\$	
\$	

Postage
Here

SENDER: COMPLETE THIS SECTION

- 1. 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.

Article Addressed to:

Rosser Schwarz
324 W. Ramona Ave.
Colorado Springs, CO 80906
(MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) L. Schwarz B. Date of Delivery 5/12/05
- C. Signature Linda Schwarz ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

MAY 19 2005

**TULSA
LAND DEPT.**

- 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 (Copy from service label)

7002 2410 0004 2680 410

PS Form 3811, July 1999

Domestic Return Receipt

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Donna Rodgers Collins
816 Trailing Heart
Roswell, NM 88201
(MH-EB-DU Hearing Notice)

\$	
\$	
\$	

Postage
Here

SENDER: COMPLETE THIS SECTION

- 1. 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.

Article Addressed to:

Donna Rodgers Collins
816 Trailing Heart
Roswell, NM 88201
(MH-EB-DU Hearing Notice)

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MAY 17 2005

**TULSA
LAND DEPT.**

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature R. Rodgers Collins ☐ Agent ☐ Addressee
- 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 (Copy from service label)

7002 2410 0004 2680 9427

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

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OFFICIAL USE

Elizabeth Eaton
2121 East Biscayne Court
Highlands Ranch, CO 80126
(MH-EB-DU Hearing Notice)

\$	
\$	
\$	

Postage
Here

SENDER: COMPLETE THIS SECTION

- 1. 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.

Article Addressed to:

Elizabeth Eaton
2121 East Biscayne Court
Highlands Ranch, CO 80126
(MH-EB-DU Hearing Notice)

RECEIVED

MAY 17 2005

**TULSA
LAND DEPT.**

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) L. Gerkin B. Date of Delivery 5/12/05
- C. Signature [Signature] ☒ Agent ☐ Addressee
- 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 (Copy from service label)

7002 2410 0004 2680 9489

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9359

Boys Ranch Foundation
P.O. Box 1890
Amarillo, TX 79140-0001
(MH-EB-DU Hearing Notice)

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse

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:

Boys Ranch Foundation
P.O. Box 1890
Amarillo, TX 79140-0001
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9359

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

MAY 12 2005

C. Signature

X *Michelle*
☐ Agent
☐ Addressee

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes
☐ No

MAY 19 2005

TULSA
LAND DEPT.

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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:

Ann Elizabeth Romer
1616 Montmorency Dr.
Vienna, VA 22182
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9373

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

STAYAN ROMER

C. Signature

X

☐ Agent
☐ Addressee

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes
☐ No

RECEIVED

MAY 16 2005

TULSA
LAND DEPT.

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ YesU.S. Postal Service™
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\$
\$

Ann Elizabeth Romer
1616 Montmorency Dr.
Vienna, VA 22182
(MH-EB-DU Hearing Notice)

PS Form 3800, June 2002

See Reverse

U.S. Postal Service™
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OFFICIAL U.S. MAIL

\$
\$

Postage
Here

Mary J. McWhorter
769 Canyon RD
Logan, UT 84321-4316
(MH-EB-DU Hearing Notice)

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse

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:

Mary J. McWhorter
769 Canyon RD
Logan, UT 84321-4316
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

7002 2410 0004 2680 9380

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

J S McWhorter 5/2/2005

C. Signature

X *J S McWhorter*
☐ Agent
☐ Addressee

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes
☐ No

MAY 19 2005

TULSA
LAND DEPT.

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7002 2410 0004 2680 9328

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 ation visit our website at www.usp
ICIAL U

Ora Lee Jones
 P.O. Box 1993
 Plainview, TX 79072
 (MH-EB-DU Hearing Notice)

\$
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PS Form 3800, June 2002

See Revers

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:

Ora Lee Jones
 P.O. Box 1993
 Plainview, TX 79072
 (MH-EB-DU Hearing Notice)

RECEIVED

MAY 18 2005

TULSA
LAND DEPT.

2. Article Number (Copy from service label,

7002 2410 0004 2680 9328

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Mildred Stone* B. Date of Delivery *5/18/05*
- C. Signature *x Mildred Stone* ☐ Agent ☐ Address
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandis
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7002 2410 0004 2680 9335

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 ation visit our website at www.usp
ICIAL U

Estate of R.H. Fulton
 P.O. Box 16860
 Lubbock, TX 79490-6860
 (MH-EB-DU Hearing Notice)

\$
 \$
 \$
 \$

City, State, ZIP+4

PS Form 3800, June 2002

See Revers

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:

Estate of R.H. Fulton
 P.O. Box 16860
 Lubbock, TX 79490-6860
 (MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Stephanie Whitehead* B. Date of Delivery *5/19/05*
- C. Signature *x Stephanie Whitehead* ☐ Agent ☐ Address
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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TULSA

LAND DEPT.

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandis
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from service label)

7002 2410 0004 2680 9335

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9342

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 ation visit our website at www.usp
ICIAL U

M.H. McGrail Test. Trust
 P.O. Box 840738
 Dallas, TX 75284-0738
 (MH-EB-DU Hearing Notice)

\$
 \$
 \$
 \$

City, State, ZIP+4

PS Form 3800, June 2002

See Revers

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:

M.H. McGrail Test. Trust
 P.O. Box 840738
 Dallas, TX 75284-0738
 (MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *A. Vasquez* B. Date of Delivery *MAY 12 2005*
- C. Signature *x* ☐ Agent ☐ Address
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

RECEIVED

TULSA

LAND DEPT.

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandis
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from service label,

7002 2410 0004 2680 9342

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9298

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J.R. Cone et ux
 P.O. Box 10217
 Lubbock, TX 79408
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002 See Reverse

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:

RECEIVED
 MAY 18 2005
 TULSA
 LAND DEPT.

J.R. Cone et ux
 P.O. Box 10217
 Lubbock, TX 79408
 (MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **JANE CONE** B. Date of Delivery _____

C. Signature *Jane Cone* ☐ Agent ☐ Addressee

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 (Copy from service label)

7002 2410 0004 2680 9298

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9304

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OFFICIAL USE

Maura Smyrl Jennings
 1810 S. Breton PL
 Tucson, AZ 85748
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002 See Reverse

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:

RECEIVED
 MAY 16 2005
 TULSA
 LAND DEPT.

Maura Smyrl Jennings
 1810 S. Breton PL
 Tucson, AZ 85748
 (MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Maura Jennings** B. Date of Delivery **5-13-05**

C. Signature *Maura Jennings* ☐ Agent ☐ Addressee

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 (Copy from service label)

7002 2410 0004 2680 9304

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9311

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Fairway Oil & Gas Co.
 P.O. Box 845
 Sparta, NM 07871
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002 See Reverse

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:

RECEIVED
 MAY 20 2005
 TULSA
 LAND DEPT.

Fairway Oil & Gas Co.
 P.O. Box 845
 Sparta, NM 07871
 (MH-EB-DU Hearing Notice)

NJ

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **371810** B. Date of Delivery **5/18/05**

C. Signature *[Signature]* ☐ Agent ☐ Addressee

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 (Copy from service label)

7002 2410 0004 2680 9311

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2681 0003

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\$
\$

Jack Markham
 1500 Broadway, Suite 1212
 Lubbock, TX 79401
 (MH-EB-DU Hearing Notice)

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:

Jack Markham
 1500 Broadway, Suite 1212
 Lubbock, TX 79401
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Nancy Tharp B. Date of Delivery 5/13/05
 C. Signature Nancy Tharp ☐ Agent ☐ Addresser
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

RECEIVED
MAY 17 2005
TULSA LAND DEPT.

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 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0955

7002 2410 0004 2680 9274

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\$
\$

Ann Dennard Allison
 P.O. Box 64035
 Lubbock, TX 79464
 (MH-EB-DU Hearing Notice)

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:

Ann Dennard Allison
 P.O. Box 64035
 Lubbock, TX 79464
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Ann Allison B. Date of Delivery 5-14-05
 C. Signature Ann Allison ☐ Agent ☐ Addresser
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

RECEIVED
MAY 16 2005
TULSA LAND DEPT.

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9281

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\$
\$

Frank A. Glispin
 P.O. Box 12564
 Dallas, TX 75225
 (MH-EB-DU Hearing Notice)

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:

Frank A. Glispin
 P.O. Box 12564
 Dallas, TX 75225
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Frank A. Glispin B. Date of Delivery 19 MAY 2005
 C. Signature Frank A. Glispin ☐ Agent ☐ Addresser
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

RECEIVED
MAY 23 2005
TULSA LAND DEPT.

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 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9281

7002 2410 0004 2680 9960

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OFFICIAL USE

Tierra Exploration, Inc.
 P.O. Box 2188
 Hobbs, NM 88241
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002

See Reverse

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:

Tierra Exploration, Inc.
 P.O. Box 2188
 Hobbs, NM 88241
 (MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Joe Santa B. Date of Delivery 5/13/05
 C. Signature [Signature] ☐ Agent ☐ Addressee
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

RECEIVED
 MAY 18 2005
 TULSA LAND DEPT

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 (Copy from service label)

7002 2410 0004 2680 9960

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9977

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OFFICIAL USE

Waikiki Partners LP
 P.O. Box 2127
 Midland, TX 79702-2127
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002

See Reverse

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:

Waikiki Partners LP
 P.O. Box 2127
 Midland, TX 79702-2127
 (MH-EB-DU Hearing Notice)

RECEIVED
 MAY 23 2005
 TULSA LAND DEPT

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Virginia Bushnell B. Date of Delivery 5-16-05
 C. Signature [Signature] ☐ Agent ☐ Addressee
 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 (Copy from service label)

7002 2410 0004 2680 9977

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9984

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OFFICIAL USE

Edith Coppedge Wheeler
 P.O. Box 64035
 Lubbock, TX 79464
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

PS Form 3800, June 2002

See Reverse

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:

Edith Coppedge Wheeler
 P.O. Box 64035
 Lubbock, TX 79464
 (MH-EB-DU Hearing Notice)

RECEIVED
 MAY 16 2005
 TULSA LAND DEPT

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Edith Wheeler B. Date of Delivery 5-14-05
 C. Signature [Signature] ☐ Agent ☐ Addressee
 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 (Copy from service label)

7002 2410 0004 2680 9984

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9939

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OFFICIAL USE

Dorothy Scribner
6395 Quay Road AL
Tucumcari, NM 88401
(MH-EB-DU Hearing Notice)

\$
\$
\$
\$
\$

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:

Dorothy Scribner
6395 Quay Road AL
Tucumcari, NM 88401
(MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) DJ Scribner B. Date of Delivery 5/13/05

C. Signature [Signature] ☐ Agent ☐ Addressee

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

RECEIVED
MAY 16 2005
TULSA

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9939

7002 2410 0004 2680 9946

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OFFICIAL USE

Virginia Denalta Phillips
1460 E. 52nd St.
Tulsa, OK 74105
(MH-EB-DU Hearing Notice)

\$
\$
\$
\$
\$

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:

Virginia Denalta Phillips
1460 E. 52nd St.
Tulsa, OK 74105
(MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Virginia Denalta Phillips B. Date of Delivery 5/20/05

C. Signature [Signature] ☐ Agent ☒ Addressee

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

RECEIVED
MAY 23 2005
TULSA

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9946

7002 2410 0004 2680 9953

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OFFICIAL USE

Margie Pearl Patterson
P.O. Box 1966
Eunice, NM 88231
(MH-EB-DU Hearing Notice)

\$
\$
\$
\$
\$

deceased husband Paul Patterson

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:

Paul Patterson Sr.
Margie Pearl Patterson
P.O. Box 1966
Eunice, NM 88231
(MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) [Signature] B. Date of Delivery 5-12-05

C. Signature [Signature] ☐ Agent ☐ Addressee

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

RECEIVED
MAY 16 2005
TULSA

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9953

7002 2410 0004 2680 9892

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Official Use

The Black Trust
419 W. Cain
P.O. Box 278
Hobbs, NM 88241-0278
(MH-EB-DU Hearing Notice)

Postage

PS Form 3800, June 2002 See Reverse

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:

The Black Trust
419 W. Cain
P.O. Box 278
Hobbs, NM 88241-0278
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
C. Signature
X
Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

MAY 23 2005
TULSA LAND DEPT.

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9908

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Official Use

Shriners Hospitals for Children
c/o The Northern Trust Bank of TX
P.O. Box 226270
Dallas, TX 75222-6270
(MH-EB-DU Hearing Notice)

Postage

PS Form 3800, June 2002 See Reverse

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:

Shriners Hospitals for Children
c/o The Northern Trust Bank of TX
P.O. Box 226270
Dallas, TX 75222-6270
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
C. Signature
X
Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

MAY 17 2005
TULSA LAND DEPT.

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9922

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Official Use

Kenneth Noel Headley
P.O. Box 1q359
Tijeras, NM 87059
(MH-EB-DU Hearing Notice)

Postage

PS Form 3800, June 2002 See Reverse

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:

Kenneth Noel Headley
P.O. Box 1q359
Tijeras, NM 87059
(MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
C. Signature
X
Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

MAY 16 2005
TULSA LAND DEPT.

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9861

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National Finance Credit Corp.
 P.O. Box 1897
 Ft. Worth, TX 76101
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

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:

National Finance Credit Corp.
 P.O. Box 1897
 Ft. Worth, TX 76101
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) **MAY 13 2005** B. Date of Delivery
- C. Signature **Pat Simmons** ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

MAY 16 2005

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9861

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

7002 2410 0004 2680 9878

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J. Hiram Moore Trust
 P.O. Box 910833
 Dallas, TX 75391-0833
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

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. Hiram Moore Trust **MAY 16 2005**
 P.O. Box 910833
 Dallas, TX 75391-0833
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) **MAY 12 2005** B. Date of Delivery
- C. Signature **X [Signature]** ☐ Agent ☐ Addressee
- 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

7002 2410 0004 2680 9878

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 9885

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Margaret C. Lemaster
 1400 S. Sun Kist St, Space 43
 Anaheim, CA 92806-5616
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

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:

Margaret C. Lemaster
 1400 S. Sun Kist St, Space 43
 Anaheim, CA 92806-5616
 (MH-EB-DU Hearing Notice)

2. Article Number (Copy from service label)

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature **X [Signature]** ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

MAY 16 2005

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7002 2410 0004 2680 9885

PS Form 3800, June 2002

See Reverse

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7002 2410 0004 2680 8598

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OFFICIAL USE

Kelly H. Baxter
P.O. Box 1649
Austin, TX 78767-1649
(MH-EB-DU Hearing Notice)

Post
Hr
5/11/05

\$

\$

CETE convey
R1 to Kelly
Baxter

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:

Kelly H. Baxter
P.O. Box 1649
Austin, TX 78767-1649
(MH-EB-DU Hearing Notice)

RECEIVED
MAY 23 2005
TULSA
LAND DEPT

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Kelly H. Baxter
B. Date of Delivery 5-20-05
C. Signature [Signature]
X [Signature]
D. Is delivery address different from item 1? If YES, enter delivery address below:
☐ Agent
☐ Address
☐ Yes
☐ 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 (Copy from service label)

7002 2410 0004 2680 8598

7002 2410 0004 2680 9847

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Habell Trust dtd 11/15/84
6507 N. Lober Place
San Gabriel, CA 91775
(MH-EB-DU Hearing Notice)

\$

\$

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:

Habell Trust dtd 11/15/84
6507 N. Lober Place
San Gabriel, CA 91775
(MH-EB-DU Hearing Notice)

RECEIVED
MAY 17 2005
TULSA
LAND DEPT

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) [Signature]
B. Date of Delivery 5/12/05
C. Signature [Signature]
X [Signature]
D. Is delivery address different from item 1? If YES, enter delivery address below:
☐ Agent
☐ Address
☐ Yes
☐ 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 (Copy from service label)

7002 2410 0004 2680 9847

7002 2410 0004 2680 9854

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Robin G. Lemaster
P.O. Box 1281
Brawley, CA 92227
(MH-EB-DU Hearing Notice)

\$

\$

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:

Robin G. Lemaster
P.O. Box 1281
Brawley, CA 92227
(MH-EB-DU Hearing Notice)

RECEIVED
MAY 20 2005
TULSA
LAND DEPT

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) [Signature]
B. Date of Delivery 5/12/05
C. Signature [Signature]
X [Signature]
D. Is delivery address different from item 1? If YES, enter delivery address below:
☐ Agent
☐ Address
☐ Yes
☐ 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 (Copy from service label)

7002 2410 0004 2680 9854

7002 2410 0004 2680 8567

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BP America Production Co.
501 Westlake Park Blvd
Houston, TX 77079
(MH-EB-DU Hearing Notice)

\$ _____
\$ _____

Postmark Here

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:

BP America Production Co.
501 Westlake Park Blvd
Houston, TX 77079
(MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) E. Hernandez B. Date of Delivery MAY 25 2005

C. Signature X E. Hernandez ☐ Agent ☐ Addressed ☐ Yes ☐ No

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

7002 2410 0004 2680 8567

7002 2410 0004 2680 8581

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Freda Long
P.O. Box 1342
Lake Isabella, CA 93240
(MH-EB-DU Hearing Notice)

\$ _____
\$ _____

Postmark Here

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:

Freda Long
P.O. Box 1342
Lake Isabella, CA 93240
(MH-EB-DU Hearing Notice)

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Barbara Anderson B. Date of Delivery MAY 10 2005

C. Signature X Barbara Anderson ☐ Agent ☐ Addressed ☐ Yes ☐ No

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

7002 2410 0004 2680 8581

7002 2410 0004 2680 9915

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Gilbert J. Eaton
461 Rittenhouse Blvd.
Jeffersonville, PA 19403
(MH-EB-DU Hearing Notice)

\$ _____
\$ _____

Postmark Here

7002 2410 0004 2680 8529

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(No Insurance Coverage Provided)

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

OFFICIAL USE

Lawrence Dale Long
 11704 Piño Ave NE, NBU
 22004
 Albuquerque, NM 87122
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

Postmark Here

PS Form 3800, June 2002 See Reverse for Instructions

7002 2410 0004 2680 9991

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OFFICIAL USE

Francis R. Reeves
 2416 NW 111th St.
 Oklahoma City, OK 73120
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

Postmark Here

PS Form 3800, June 2002 See Reverse for Instructions

7002 2410 0004 2680 9366

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OFFICIAL USE

Benischek Properties LLC
 3600 N. Harvey Pkwy.
 Oklahoma City, OK 73118
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

Postmark Here

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7002 2410 0004 2680 9403

U.S. Postal Service™
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OFFICIAL USE

Kenneth Long
 1547 Ringe
 Las Vegas, NV 89110
 (MH-EB-DU Hearing Notice)

\$ _____
 \$ _____
 \$ _____
 \$ _____

Postmark Here

PS Form 3800, June 2002 See Reverse for Instructions