

EXHIBIT A
CHEVRON U.S.A. INC.
HERITAGE 2 15 NO. 2H WELL

BNSF Railway Company
c/o Farmers National Company
Attn: Jennifer Kindred
5110 S. Yale, Suite 400
Tulsa, OK 74135

Pogo Producing Company, LLC;
Plains Exploration & Production Co;
Plains Resources, Inc.; Pogo
Panhandle 2004 LP; Latigo

Investments, LLC; Latigo Gas
Services LP; Latigo Petroleum, Inc.;
Latigo Petroleum Texas
700 Milam, Suite 3100
Houston, Texas 77002

Oxy USA Inc.
10889 Wilshire Boulevard
Los Angeles, CA 90024

Occidental Oil & Gas Corp
Post Office Box 27570
Houston, Texas 77227-7570

David Petroleum Corporation
116 W 1st Street
Roswell, New Mexico 88203

Yates Petroleum Corporation
105 S. 4th Street
Artesia, New Mexico 88210

Exxon Corporation Exploration
and Producing
800 Bell Street
Houston, Texas 77002

Bird Creek Resources, Inc.
1437 South Boulder Ave
Tulsa, OK 74119

BK Exploration
10159 E. 11th Street
Suite 401
Tulsa, OK 74128-3028

Chesapeake Exploration
6100 N. Western Avenue
Oklahoma City, OK 73118

Broughton Petroleum
1205 Silliman St.
Sealy, Texas 77474

Stelaron, Inc.
Post Office Box 7787
Amarillo, Texas 79109

U.S. Bank as Trustee for the
Wilbur Leutwyler Trust, under
agreement dated 6/3/1996.

Post Office Box 3499
Tulsa, Oklahoma 74101

Bird 2000 Limited Partnership
PI Fort Worth Club Tower
777 Taylor Street, 4th Floor
Fort Worth, Texas 76102

Radler 2000 Limited
Partnership
3131 West 7th Street, 4th Floor
Fort Worth, Texas 76107

Razorback Petroleum, LLC
P.O. Box 8864
Pine Bluff, AR 71611

Randall R. Fort
9716 Admiral Emerson Ave.
Albuquerque, NM 87111

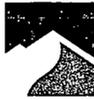
Tommy L. Fort
P.O. Box 5356
Midland, TX 79704-5356

Margie Fort Bruns
10316 Country Manor P1 NM
Albuquerque, NM 87114

Robert Mitchell Raindl
P.O. Box 853
Tahoka, TX 79373

Rash Energy, Inc.
1412 South Boston
Suite 500
Tulsa, OK 74119

Karen Lynn Luke
1206 E. College Blvd
Roswell, NM 88201



November 9, 2012

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**TO OFFSETS****RE: Chevron U.S.A. Inc. for a Non-Standard Spacing and Proration Unit,
Unorthodox Well Location, and Compulsory Pooling, Eddy County ,
New Mexico**

This letter is to advise you that Chevron U.S.A., Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking an order pooling all mineral interests in a non-standard 160-acre spacing and proration unit comprised of the W/2 W/2 of Section 15, Township 23 South, Range 28 East, NMPM, Eddy County, New Mexico, Bone Spring formation, South Culebra Bluff-Bone Spring Pool. Chevron also seeks an order approving an unorthodox well location. As an owner of an offsetting interest, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on November 29, 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 with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must 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.

Questions concerning this application should be directed to Kevin Stubbs, at (732) 372-1048.

Sincerely,

Adam G. Rankin



November 8, 2012

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**TO AFFECTED INTEREST OWNERS****RE: Chevron U.S.A. Inc. for a Non-Standard Spacing and Proration Unit,
Unorthodox Well Location, and Compulsory Pooling, Eddy County ,
New Mexico**

This letter is to advise you that Chevron U.S.A., Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking an order pooling all mineral interests in a non-standard 160-acre spacing and proration unit comprised of the W/2 W/2 of Section 15, Township 23 South, Range 28 East, NMPM, Eddy County, New Mexico, Bone Spring formation, South Culebra Bluff-Bone Spring Pool. Chevron also seeks an order approving an unorthodox well location. As an interest owner subject to this pooling application, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on November 29, 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.

Questions concerning this application should be directed to Kevin Stubbs at (713) 372-1048.

Sincerely,

Adam G. Rankin

7006 0100 0005 0626 9880

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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Postage	\$.65
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Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark Here **NOV 9 2012**

BNSF Railway Company
c/o Farmers National Company
Attn: Jennifer Kindred
5110 S. Yale, Suite 400
Tulsa, OK 74135

for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

BNSF Railway Company
c/o Farmers National Company
Attn: Jennifer Kindred
5110 S. Yale, Suite 400
Tulsa, OK 74135

2. Article Number (Transfer from service label) **7006 0100 0005 0626 9880**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) **John Pacelli**

C. Date of Delivery **11-13-12**

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

Postmark Here **NOV 13 2012**

7006 0100 0005 0626 9873

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Certified Fee	2.95
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Postmark Here **NOV 9 2012**

Pogo Producing Company, LLC;
Plains Exploration & Production Co;
Plains Resources, Inc.; Pogo
Panhandle 2004 LP; Latigo Gas
Services LP; Latigo Petroleum, Inc.;
Latigo Petroleum Texas
700 Milam, Suite 3100
Houston, Texas 77002

for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Pogo Producing Company, LLC;
Plains Exploration & Production Co;
Plains Resources, Inc.; Pogo
Panhandle 2004 LP; Latigo
Investments, LLC; Latigo Gas
Services LP; Latigo Petroleum, Inc.;
Latigo Petroleum Texas
700 Milam, Suite 3100
Houston, Texas 77002

2. Article Number (Transfer from service label) **7006 0100 0005 0626 9873**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) **John Pacelli**

C. Date of Delivery **NOV 14 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

7006 0100 0005 0626 9866

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

Postmark Here **NOV - 9 2012**

Oxy USA Inc.
 10889 Wilshire Boulevard
 Los Angeles, CA 90024

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 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:
 Oxy USA Inc.
 10889 Wilshire Boulevard
 Los Angeles, CA 90024

2. Article Number: 7006 0100 0005 0626 9866
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): **GENE FUNARO** C. Date of Delivery: **11/19/12**

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 0626 9859

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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 **NOV - 9 2012**

Occidental Oil & Gas Corp
 Post Office Box 27570
 Houston, Texas 77227-7570

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 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:
 Occidental Oil & Gas Corp
 Post Office Box 27570
 Houston, Texas 77227-7570

2. Article Number: 7006 0100 0005 0626 9859
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

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

7006 0100 0005 0626 9842

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

David Petroleum Corporation
 116 W 1st Street
 Roswell, New Mexico 88203

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:
 David Petroleum Corporation
 116 W 1st Street
 Roswell, New Mexico 88203

2. Article Number (Transfer from service label) **7006 0100 0005 0626 9842**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x Bari Bellicini

B. Received by (Printed Name) *Bari Bellicini* C. Date of Delivery *11-13-12*

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

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7006 0100 0005 0626 9835

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

Yates Petroleum Corporation
 105 S. 4th Street
 Artesia, New Mexico 88210

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:
 Yates Petroleum Corporation
 105 S. 4th Street
 Artesia, New Mexico 88210

2. Article Number (Transfer from service label) **7006 0100 0005 0626 9835**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x J. Delgado

B. Received by (Printed Name) *J. Delgado* C. Date of Delivery *11-13-12*

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 9828

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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
 NOV 9 2012

Exxon Corporation Exploration and Producing
 800 Bell Street
 Houston, Texas 77002

PS Form 3811, February 2004 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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- 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 Corporation Exploration and Producing
 800 Bell Street
 Houston, Texas 77002

2. Article Number (Transfer from service label): 7006 0100 0005 0626 9828

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *James Fisher* Agent Addressee

B. Received by (Printed Name): JAMES FISHER C. Date of Delivery: NOV 16 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

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

7006 0100 0005 0626 9811

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

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 NOV 9 2012

Bird Creek Resources, Inc.
 1437 South Boulder Ave
 Tulsa, OK 74119

PS Form 3811, June 2002 See Reverse for Instructions

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- 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:
 Bird Creek Resources, Inc.
 1437 South Boulder Ave
 Tulsa, OK 74119

2. Article Number (Transfer from service label): 7006 0100 0005 0626 9811

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Kim Abbott* Agent Addressee

B. Received by (Printed Name): KIM ABBOTT C. Date of Delivery: 11/13/12

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 9804

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

Postmark: NOV 9 2012

BK Exploration
 10159 E. 11th Street
 Suite 401
 Tulsa, OK 74128-3028

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:
 BK Exploration
 10159 E. 11th Street
 Suite 401
 Tulsa, OK 74128-3028

2. Article Number (Transfer from service label): 7006 0100 0005 0626 9804

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X *Bill B...* Agent Addressee

B. Received by (Printed Name): *Shawn Halp* C. Date of Delivery: *11/6/12*

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 9798

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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: NOV -9 2012

Chesapeake Exploration
 6100 N. Western Avenue
 Oklahoma City, OK 73118

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:
 Chesapeake Exploration
 6100 N. Western Avenue
 Oklahoma City, OK 73118

2. Article Number (Transfer from service label): 7006 0100 0005 0626 9798

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X *[Signature]* Agent Addressee

B. Received by (Printed Name): **RECEIVED** C. Date of Delivery: *NOV 13 2012*

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

MAILROOM 21

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 9781

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit **AGR/CHEVRON HERITAGE 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: SANTA FE, NM NOV 9 2012

Broughton Petroleum
 1205 Silliman St.
 Sealy, Texas 77474

PS Form 3800, June 2002 See Reverse for Instructions

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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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Lois Krenek* Agent Addressee

B. Received by (Printed Name): *Lois Krenek* C. Date of Delivery: *NOV 13 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:
 Broughton Petroleum
 1205 Silliman St.
 Sealy, Texas 77474

2. Article Number: **7006 0100 0005 0626 9781**
 (Transfer from service label)

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

7006 0100 0005 0626 9774

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only, N)

For delivery information visit **AGR/CHEVRON HERITAGE 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: SANTA FE, NM NOV 9 2012

Stelaron, Inc.
 Post Office Box 7787
 Amarillo, Texas 79109

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 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Linda J. Sherrin* Agent Addressee

B. Received by (Printed Name): *LINDA J. SHERRIN* C. Date of Delivery: *NOV 13 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:
 Stelaron, Inc.
 Post Office Box 7787
 Amarillo, Texas 79109

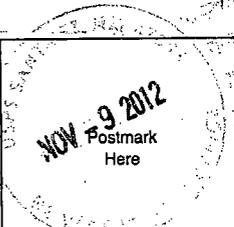
2. Article Number: **7006 0100 0005 0626 9774**
 (Transfer from service label)

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

7006 0100 0005 0626 9767

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

For delivery information visit **AGR/CHEVRON HERITAGE OFFICE**

Postage	\$.65	
Certified Fee	2.95	
Return Receipt Fee (Endorsement Required)	2.35	
Restricted Delivery Fee (Endorsement Required)		
U.S. Bank as Trustee for the Wilbur Leutwyler Trust, under agreement dated 6/3/1996. Post Office Box 3499 Tulsa, Oklahoma 74101		

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x W Moore

B. Received by (Printed Name) *D Moore* C. Date of Delivery *11-14-12*

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

2. Article Number (Transfer from service label) **7006 0100 0005 0626 9767**

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

7006 0100 0005 0626 9750

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

For delivery information visit **AGR/CHEVRON HERITAGE OFFICE**

Postage	\$.65	
Certified Fee	2.95	
Return Receipt Fee (Endorsement Required)	2.35	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 5.95	
Bird 2000 Limited Partnership PI Fort Worth Club Tower 777 Taylor Street, 4th Floor Fort Worth, Texas 76102		

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
x a anderson

B. Received by (Printed Name) C. Date of Delivery *11/13*

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

1. Article Addressed to:
 Bird 2000 Limited Partnership
 PI Fort Worth Club Tower
 777 Taylor Street, 4th Floor
 Fort Worth, Texas 76102

2. Article Number (Transfer from service label) **7006 0100 0005 0626 9750**

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

7006 0100 0005 0626 9743

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No International Mail)
 For delivery information visit www.usps.com

AGR/CHEVRON HERITAGE 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
NOV 8 2012

Radler 2000 Limited Partnership
 3131 West 7th Street, 4th Floor
 Fort Worth, Texas 76107

PS Form 3811, February 2004 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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:
 Radler 2000 Limited Partnership
 3131 West 7th Street, 4th Floor
 Fort Worth, Texas 76107

2. Article Number: 7006 0100 0005 0626 9743
 (Transfer from service label)

SECTION ON DELIVERY

A. Signature Agent Addressee
 B. Received by (Printed Name) C. Date of Delivery
 LITA ANTHONY
 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 0626 9736

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AGR/CHEVRON HERITAGE 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
NOV -9 2012

Razorback Petroleum, LLC
 P.O. Box 8864
 Pine Bluff, AR 71611

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 9729

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AGR/CHEVRON HERITAGE

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



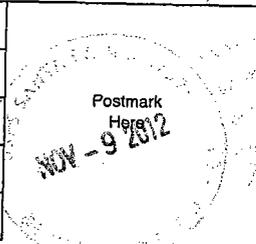
Randall R. Fort
 9716 Admiral Emerson Ave.
 Albuquerque, NM 87111

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0626 9712

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

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



Tommy L. Fort
 P.O. Box 5356
 Midland, TX 79704-5356

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
<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/> <i>Randall Fort</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>R. Fort</i> C. Date of Delivery <i>11/13/12</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:
1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; width: fit-content;"> Randall R. Fort 9716 Admiral Emerson Ave. Albuquerque, NM 87111 </div>	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label) 7006 0100 0005 0626 9729	

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

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
<ul style="list-style-type: none"> 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 <input checked="" type="checkbox"/> <i>Tommy L. Fort</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>T. Fort</i> C. Date of Delivery <i>11/16/12</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:
1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; width: fit-content;"> Tommy L. Fort P.O. Box 5356 Midland, TX 79704-5356 </div>	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label) 7006 0100 0005 0626 9712	

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

7006 0100 0005 0626 9705

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AGR/CHEVRON HERITAGE OFFICE

Postage	\$ 1.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark: SANTA FE, NM NOV 9 2012

Margie Fort Bruns
 10316 Country Manor P1 NM
 Albuquerque, NM 87114

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 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:
 Margie Fort Bruns
 10316 Country Manor P1 NM
 Albuquerque, NM 87114

2. Article Number (Transfer from service label): 7006 0100 0005 0626 9705

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: 11/10/12

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 No

7006 0100 0005 0626 9699

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AGR/CHEVRON HERITAGE OFFICE

Postage	\$ 1.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark: SANTA FE, NM NOV 9 2012

Robert Mitchell Raindl
 P.O. Box 853
 Tahoka, TX 79373

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 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:
 Robert Mitchell Raindl
 P.O. Box 853
 Tahoka, TX 79373

2. Article Number (Transfer from service label): 7006 0100 0005 0626 9699

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): Donna Raindl C. Date of Delivery: 11-14-12

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 No

7006 0100 0005 0626 9662

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**AGR/CHEVRON
HERITAGE**

OFFICIAL USE

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

Rash Energy, Inc.
 1412 South Boston
 Suite 500
 Tulsa, OK 74119

PS Form 3800, June 2002 See Reverse for Instructions

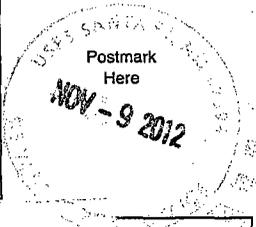
Returned

7006 0100 0005 0626 9675

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OFFICIAL USE

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

Karen Lynn Luke
 1206 E. College Blvd
 Roswell, NM 88201

PS Form 3800, June 2002 See Reverse for Instructions

Returned