

7011 3500 0002 4935 9434

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

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

OFFICIAL USE

Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$6.31

0702
 Postmark Here
 JUN 19 2013
 MALAGA NM

Sent To: **Heirs of Andres and Gavina Durate**
 c/o Carla Duarte
 P.O. Box 71
 Malaga, NM 88263

PS Form 3800, August 2006 See Reverse for Instructions

7011 3500 0002 4935 9441

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CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$6.31

0702
 Postmark Here
 JUN 19 2013
 HUTCHINSON KS

Sent To: **Sharla J. Elder**
 2509 E. 40th
 Hutchinson, KS 67502

PS Form 3800, August 2006 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.

Article Addressed to:
 Heirs of Andres and Gavina Durate
 c/o Carla Duarte
 P.O. Box 71
 Malaga, NM 88263

Article Number
 (Transfer from service label) 7011 3500 0002 4935 9434

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Tommy Duarte Jr. ☐ Agent ☒ Addressee

B. Received by (Printed Name)
Tommy Duarte Jr.

C. Date of Delivery
 7-3-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: 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:
 Sharla J. Elder
 2509 E. 40th
 Hutchinson, KS 67502

2. Article Number
 (Transfer from service label) 7011 3500 0002 4935 9441

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Sharla Elder ☐ Agent ☒ Addressee

B. Received by (Printed Name)
Sharla Elder

C. Date
 6-3

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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 Certified Fee \$3.10
 Return Receipt Fee (Endorsement Required) \$2.55
 Restricted Delivery Fee (Endorsement Required) \$0.00
 Total Postage & Fees \$ \$6.31

0702
 02 Postmark Here
 06/19/2013

Sent To Alma R. Elizondo
 Street, Apt. No., or PO Box No. 1115 E. Orchard
 City, State, ZIP+4 Carlsbad, NM 88220

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
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OFFICIAL USE

Postage \$ \$0.66
 Certified Fee \$3.10
 Return Receipt Fee (Endorsement Required) \$2.55
 Restricted Delivery Fee (Endorsement Required) \$0.00
 Total Postage & Fees \$ \$6.31

0702
 02 Postmark Here
 06/19/2013

Sent To Miss Cora Enderud
 c/o David A. Larson
 Street, Apt. No., or PO Box No. 822 N. Spring Ave
 City, State, ZIP+4 Sioux Falls, SD 57104

PS Form 3800, August 2006 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:

Alma R. Elizondo
 1115 E. Orchard
 Carlsbad, NM 88220

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Alma R. Elizondo* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Alma R. Elizondo* C. Date of Delivery

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) 7011 3500 0002 4935 9458

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:

Miss Cora Enderud
 c/o David A. Larson
 822 N. Spring Ave
 Sioux Falls, SD 57104

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *David Larson* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *David Larson* C. Date of Delivery

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) 7011 3500 0002 4935 9465

7011 3500 0002 4935 9472

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.31
Sent To: EOG Resources, Inc. P.O. Box 2267 Midland, TX 79702-2267	
PS Form 3800, August 2006 See Reverse for Instructions	

7011 3500 0002 4935 9489

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.31
Sent To: Jamie Marie and Terri Marie Evans P.O. Box 81 McKenna, WA 98558	
PS Form 3800, August 2006 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:

EOG Resources, Inc.
P.O. Box 2267
Midland, TX 79702-2267

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Robert Tana* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *R. Force* C. Date of Delivery: *6-26-13*

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

7011 3500 0002 4935 9472

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:

Jamie Marie and Terri Marie Evans
P.O. Box 81
McKenna, WA 98558

2. Article Number

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Terri Marie Evans* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *Terri Marie Evans* C. Date of Delivery: *6-24-13*

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

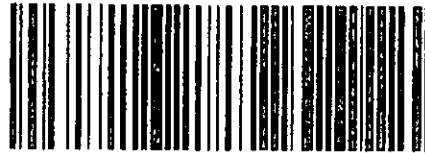
7011 3500 0002 4935 9489

PS Form 3811, February 2004

Domestic Return Receipt

102595

RSC Resources, LP
6824 Island Circle
Midland, TX 79707



7010 0290 0003 4457 9177

\$6.110
US POSTAGE
FIRST-CLASS
062S0007007473
79707

677894.03



NIXIE

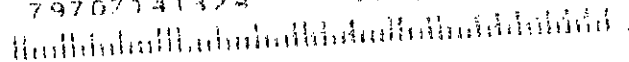
871 DE 1

00 06/09/13

RETURN TO SENDER
VACANT
UNABLE TO FORWARD

RC: 79707141324

*1110-02703-03-43



Falls Land & Development Corp
P.O. Box 1000
Elephant Butte, NM 87901

NAME

1st Notice

2nd Notice

Return

VAC

RSC Resources, LP
6824 Island Circle
Midland, TX 79707

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

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

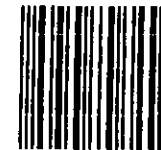
OFFICIAL USE

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

Postmark
Here

Sent To Falls Land & Development Corp
Street, Apt. No., PO Box No. PO Box 1000
City, State, ZIP+4 Elephant Butte, NM 87901
PS Form 3800, August 2013 See Reverse for Instructions

210739846 01 413



1000

92107

U.S. POSTAGE
PAID
MIDLAND, TX
79701
APR 29, 13
AMOUNT

\$0.66
00055732-02

Jeran L. Fraser
3885 Caminito Litoral
San Diego, CA 92107

NIXIE 918 SE 1 00 06/09/13
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
RC: 79707141324 *7510-15877-29-33

