7011 3500 0002 4935 9557

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

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

CUYAHOGA FALLS OH 44223 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: Jennifer Seltzer
Street, Apt. No., or PO Box No.: 2053 16th St
City, State, ZIP+4: Cyahoga Falls, OH 44223

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:

Jennifer Seltzer
2053 16th St
Cyahoga Falls, OH 44223

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Jennifer Seltzer ☐ Agent ☐ Addressee

B. Received by (Printed Name): Jennifer Seltzer C. Date of Delivery: 11/5/13

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

7011 3500 0002 4935 9564

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

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

SANTA FE NM 87501 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: Mary Howard Smith
Street, Apt. No., or PO Box No.: 105 Starview
City, State, ZIP+4: Santa Fe, NM 87501

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
ANDREWS TX 79714 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 MIDLAND TX 06/19/2013

Sent To: Snow Oil and Gas
Street, Apt. No.; or PO Box No.: 818 E. Broadway St.
City, State, ZIP+4: Andrews, TX 79714

PS Form 3800, August 2006 See Reverse for Instructions

7011 3500 0002 4935 9571

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
SANTA FE NM 87502 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: State of New Mexico Property Control Division
Street, Apt. No.; or PO Box No.: P.O. Box 6850
City, State, ZIP+4: Santa Fe, NM 87502-0110

PS Form 3800, August 2006 See Reverse for Instructions

7011 3500 0002 4935 9588

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:

Snow Oil and Gas
818 E. Broadway St.
Andrews, TX 79714

COMPLETE THIS SECTION ON DELIVERY

A. Signature X ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 6/20/13

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

2. Article Number (Transfer from service label) 7011 3500 0002 4935 9571

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

State of New Mexico Property Control
Division
P.O. Box 6850
Santa Fe, NM 87502-0110

COMPLETE THIS SECTION ON DELIVERY

A. Signature X ☐

B. Received by (Printed Name) Edward Kraus C. Dat 6

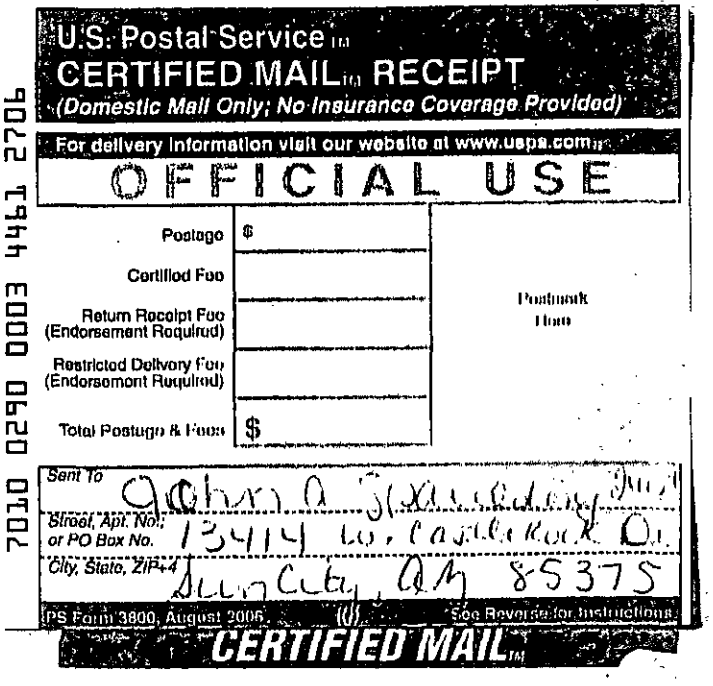
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

2. Article Number (Transfer from service label) 7011 3500 0002 4935 9588

PS Form 3811, February 2004 Domestic Return Receipt



RSC Resources, LP
6824 Island Circle
Midland, TX 79707

0003 4461 2706

UNITED STATES POSTAL SERVICE

1000

85375

U.S. POSTAGE
PAID
MIDLAND, TX
79701
APR 29, 13
AMOUNT
$6.31
00055732-02

NIXIE 850 DE 1 00 05/22/13
RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD
BC: 79707141324 *0114-01182-01-42

516
517

5/2/13
mc
7901

John Spaulding, Trust
13414 W. Castlerock Dr.
Sun City, AZ 85375