

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

**APPLICATION OF MEWBOURNE OIL COMPANY
FOR A NON-STANDARD OIL SPACING AND
PRORATION UNIT, AN UNORTHODOX OIL WELL
LOCATION, AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

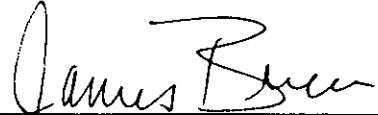
Case No. 15,037

AFFIDAVIT OF NOTICE

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

James Bruce, being duly sworn upon his oath, deposes and states:

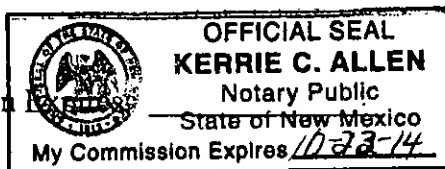
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Mewbourne Oil Company.
3. Mewbourne Oil Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipt are attached hereto as Exhibit 1.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.

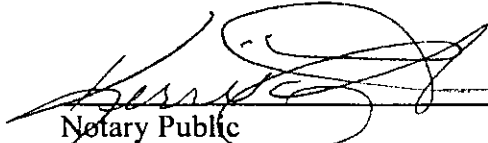


James Bruce

SUBSCRIBED AND SWORN TO before me this 4th day of September, 2013 by
James Bruce.

My Commission Expires





Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 6

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

August 15, 2013

To: Persons on Exhibit A

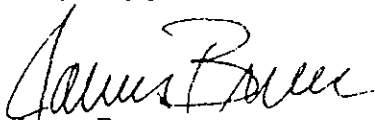
Ladies and gentlemen:

Enclosed is an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding the E½E½ of Section 35, Township 23 South, Range 28 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 5, 2013, in Porter Hall at the Division's offices at 1220 South St. 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 the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, August 29, 2013. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the 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 need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company

EXHIBIT 

EXHIBIT A

- | | |
|---|--|
| 1) Pavlos P. Panagopoulos
Panagopoulos Enterprises
Andreas P. Panagopoulos
511 West Reinken
Belen, NM 87002 | 12) Nolan Greak
8008 Slide Road, Suite #33
Lubbock, TX 79424 |
| 2) Klipstine & Hanratty and
James W. Klipstine
1601 N. Turner, Suite 400
Hobbs, NM 88240 | 13) Panagiota P. Panagopoulos and
Magdalene P. Panagopoulos
10008 Ranch Hand Ave.
Las Vegas, NV 89117 |
| 3) Kevin J. Hanratty
P.O. Box 1330
Artesia, NM 88211 | 14) William Ervin Gregory
11910 Central Ave., SE, Suite 2B
Albuquerque, NM 87123 |
| 4) Mary Jo Dickerson
P.O. Box 642
Glenpool, OK 74033 | 15) Irma J. Gregory
14 Cork
Alva, Florida 33920 |
| 5) Wells Fargo Bank, N.A.
2318 W. Pierce Street
Carlsbad, NM 88220 | 16) Thomas W. Gregory
1705 Black Gold SE
Albuquerque, NM 87123 |
| 6) First Federal Savings and Loan Association
P.O. Box 1390
Littlefield, TX 79339 | |
| 7) Clarence W. Ervin and
Mary I. Ervin
4016 Jones Street
Carlsbad, NM 88220 | |
| 8) Bonnie R. Gregory and
Irma J. Gregory
305 S. Hemlock Ave.
Roswell, NM 88203 | |
| 9) Estate of Stanley J. Gregory
608 Lakeside Drive
Carlsbad, NM 88220 | |
| 10) Laura Meade
611 N. Mesa Ave.
Carlsbad, NM 88203 | |
| 11) Neville Manning
2112 Indiana
Lubbock, TX 79410 | |

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:

Kevin J. Hanratty
P.O. Box 1330
Artesia, NM 88211

2. Article Number
(Transfer from service)

7012 0470 0001 5976 6580

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Supriya Bishu ☐ Agent ☐ Addressee

B. Received by (Printed Name)
Supriya Bishu C. Date of Delivery
8-19-13

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

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

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

ALBUQUERQUE NM 87123

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

0500

03

Postmark Here

08/16/2013

Sent To

Street, Apt. No., or PO Box No. William Ervin Gregory
11910 Central Ave., SE, Suite 2B
City, State, ZIP+4 Albuquerque, NM 87123

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

ARTESIA NM 88211

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

0500

03

Postmark Here

08/16/2013

Sent To Kevin J. Hanratty
P.O. Box 1330
Artesia, NM 88211

Street, Apt. No., or PO Box No.
City, State, ZIP+4

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:

William Ervin Gregory
11910 Central Ave., SE, Suite 2B
Albuquerque, NM 87123

2. Article Number
(Transfer from service)

7012 0470 0001 5976 6726

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X WEG ☐ Agent ☐ Addressee

B. Received by (Printed Name)
WEG C. Date of Delivery
8-19-13

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

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:

Nolan Greak
8008 Slide Road, Suite #33
Lubbock, TX 79424

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
☒ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7012 0470 0001 5976 6702

102595-02-M-1540

PS Form 3811, February 2004

Domestic Return Receipt

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

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

ALVA FL 33920 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

0500
03
Postmark Here

08/16/2013

Sent To Imma J. Gregory
14 Cork
Alva, Florida 33920
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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

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

LUBBOCK TX 79424 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

0500
03
Postmark Here
08/16/2013

Sent To Nolan Greak
8008 Slide Road, Suite #33
Lubbock, TX 79424
Street, Apt. No., or PO Box No.
City, State, ZIP+4

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:

Imma J. Gregory
14 Cork
Alva, Florida 33920

2. Article Number
(Transfer from service label)

7012 0470 0001 5976 6733

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
☒ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Neville Manning
2112 Indiana
Lubbock, TX 79410

2. Article Number

(Transfer from service label)

7012 0470 0001 5976 6696

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Thomas W. Gregory
B. Received by (Printed Name)
THOMAS W. GREGORY
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

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

ALBUQUERQUE NM 87123

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

0500

03

Postmark Here

08/16/2013

Sent To
Thomas W. Gregory
1705 Black Gold SE
Albuquerque, NM 87123
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

LUBBOCK TX 79410

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

0500

03

Postmark Here

08/16/2013

Sent To
Neville Manning
2112 Indiana
Lubbock, TX 79410
City, State, ZIP+4

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:

Thomas W. Gregory
1705 Black Gold SE
Albuquerque, NM 87123

2. Article Number

(Transfer from service label)

7012 0470 0001 5976 6740

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Thomas W. Gregory
B. Received by (Printed Name)
THOMAS W. GREGORY
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

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

Pavlos P. Panagopoulos
Panagopoulos Enterprises
Andreas P. Panagopoulos
511 West Reinken
Belen, NM 87002

2. Article Number:

(Transfer from service label)

7012 0470 0001 5976 6597

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

A. Signature

[Signature]

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

8/17/13

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

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

HOBBS NM 88240

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

0500
03
Postmark Here

08/16/2013

Sent To Klipstine & Hanratty and
James W. Klipstine
Street, Apt. No., or PO Box No. 1601 N. Turner, Suite 400
City, State, ZIP+4 Hobbs, NM 88240

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal ServiceTM

CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

BELEN NM 87002

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

08/16/2013

Sent To Pavlos P. Panagopoulos
Panagopoulos Enterprises
Andreas P. Panagopoulos
Street, Apt. No., or PO Box No. 511 West Reinken
City, State, ZIP+4 Belen, NM 87002

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:

Klipstine & Hanratty and
James W. Klipstine
1601 N. Turner, Suite 400
Hobbs, NM 88240

2. Article Number:

(Transfer from service label)

7012 0470 0001 5976 6603

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

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

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:

Bonnie R. Gregory and
Irma J. Gregory
105 S. Hemlock Ave.
Roswell, NM 88203

2. Article Number

(Transfer from service label)

7012 0470 0001 5976 6665

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Irma J. Gregory*

☐ Agent

☒ Addressee

B. Received by (Printed Name)

Irma J. Gregory

C. Date of Delivery

8/26/13

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

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

CARLSBAD NM 88220

Postage

\$ 10.66

Certified Fee

\$3.10

Return Receipt Fee
(Endorsement Required)

\$2.55

Restricted Delivery Fee
(Endorsement Required)

\$0.00

Total Postage & Fees

\$ 16.31

SAV 0500
03

Postmark
Here

08/16/2013

Sent To

Wells Fargo Bank, N.A.
2318 W. Pierce Street
Carlsbad, NM 88220

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

ROSWELL NM 88203

Postage

\$ 10.66

Certified Fee

\$3.10

Return Receipt Fee
(Endorsement Required)

\$2.55

Restricted Delivery Fee
(Endorsement Required)

\$0.00

Total Postage & Fees

\$ 16.31

08/16/2013

0500
87501-03
2013

Sent To

Bonnie R. Gregory and
Irma J. Gregory
105 S. Hemlock Ave.
Roswell, NM 88203

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

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:

Wells Fargo Bank, N.A.
2318 W. Pierce Street
Carlsbad, NM 88220

2. Article Number

(Transfer from service label)

7012 0470 0001 5976 6634

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Irma J. Gregory*

☐ 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

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:

Clarence W. Ervin and
Mary I. Ervin
4016 Jones Street
Carlsbad, NM 88220

2. Article Number

(Transfer from service label)

7012 0470 0001 5976 6658

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Guadalupe*☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

LITTLEFIELD TX 79339

Postage

\$ 0.66

0500

Certified Fee

\$3.10

03

Return Receipt Fee
(Endorsement Required)

\$2.55

Restricted Delivery Fee
(Endorsement Required)

\$0.00

Total Postage & Fees

\$ 5.31

08/16/2013

Sent To

First Federal Savings and Loan Association

P.O. Box 1390

Street, Apt. No.,
or P.O. Box No.

Littlefield, TX 79339

City, State, ZIP+4

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

CARLSBAD NM 88220

Postage

\$ 0.66

0500

Certified Fee

\$3.10

03

Return Receipt Fee
(Endorsement Required)

\$2.55

Restricted Delivery Fee
(Endorsement Required)

\$0.00

Total Postage & Fees

\$ 5.31

08/16/2013

Sent To

Clarence W. Ervin and
Mary I. Ervin
4016 Jones Street
Carlsbad, NM 88220

Street, Apt. No.,
or P.O. Box No.
City, State, ZIP+4

PS Form 3800, August 2006

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:

First Federal Savings and Loan Association
P.O. Box 1390
Littlefield, TX 79339

Article Number

(Transfer from service label)

7012 0470 0001 5976 6641

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Lisa Muller*☐ Agent☐ Addressee

B. Received by (Printed Name)

Lisa Muller

C. Date of Delivery

8/16/13

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

7012 0470 0001 5976 6627

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0500
03
2102 9153
Postmark Here

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

08/16/2013

Sent To: Mary Jo Dickerson
P.O. Box 642
Glenpool, OK 74033

Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006 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:

Mary Jo Dickerson
P.O. Box 642
Glenpool, OK 74033

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: **X**

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7012 0470 0001 5976 6627

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



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YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
7012047000159766672	First-Class Mail®	Unclaimed	September 4, 2013, 12:31 pm	CARLSBAD, NM 88220	Scheduled Delivery Day: August 19, 2013 Certified Mail™ Return Receipt
		Notice Left	August 19, 2013, 12:44 pm	CARLSBAD, NM 88220	
		Arrival at Unit	August 19, 2013, 7:32 am	CARLSBAD, NM 88220	
		Dispatched to Sort Facility	August 16, 2013, 4:20 pm	SANTA FE, NM 87501	
		Acceptance	August 16, 2013, 1:06 pm	SANTA FE, NM 87501	

Check on Another Item

What's your label (or receipt) number?

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7012047000159766672

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CARLSBAD, NM 88220	
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
08/16/2013	
Sent To: Estate of Stanley J. Gregory 608 Lakeside Drive Carlsbad, NM 88220 Street, Apt. No., or PO Box No. City, State, ZIP+4	
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YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
7012047000015976689	First-Class Mail®	Notice Left	August 20, 2013, 4:14 pm	CARLSBAD, NM 88220	Scheduled Delivery Day: August 19, 2013 Certified Mail™ Return Receipt
		Notice Left	August 20, 2013, 4:11 pm	CARLSBAD, NM 88220	
		Arrival at Unit	August 19, 2013, 7:32 am	CARLSBAD, NM 88220	
		Processed through USPS Sort Facility	August 18, 2013, 3:39 am	LUBBOCK, TX 79402	
		Depart USPS Sort Facility	August 17, 2013	LUBBOCK, TX 79402	
		Processed through USPS Sort Facility	August 17, 2013, 7:08 pm	LUBBOCK, TX 79402	
		Processed at USPS Origin Sort Facility	August 16, 2013, 7:43 pm	ALBUQUERQUE, NM 87101	
		Depart USPS Sort Facility	August 16, 2013	ALBUQUERQUE, NM 87101	
		Dispatched to Sort Facility	August 16, 2013, 4:20 pm	SANTA FE, NM 87501	
		Acceptance	August 16, 2013, 1:06 pm	SANTA FE, NM 87501	

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ROSWELL, NM 88203

Postage	\$ 0.66	0500
Certified Fee	\$3.10	03
Return Receipt Fee (Endorsement Required)	\$2.55	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.31	08/16/2013

Sent To

Laura Meade
Street, Apt. No.,
or PO Box No. 611 N. Mesa Ave.
City, State, ZIP+4 Carlsbad, NM 88203

PS Form 3800, August 2006

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YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
70120470000159766719	First-Class Mail®	Delivered	August 30, 2013, 10:44 am	LAS VEGAS, NV 89117	Scheduled Delivery Day: August 19, 2013 Certified Mail™ Return Receipt
		Notice Left	August 19, 2013, 11:11 am	LAS VEGAS, NV 89117	
		Processed through USPS Sort Facility	August 19, 2013, 5:47 am	LAS VEGAS, NV 89199	
		Processed through USPS Sort Facility	August 18, 2013, 3:05 am	LAS VEGAS, NV 89199	
		Depart USPS Sort Facility	August 17, 2013	LAS VEGAS, NV 89199	
		Processed through USPS Sort Facility	August 17, 2013, 6:17 pm	LAS VEGAS, NV 89199	
		Processed at USPS Origin Sort Facility	August 16, 2013, 7:53 pm	ALBUQUERQUE, NM 87101	
		Depart USPS Sort Facility	August 16, 2013	ALBUQUERQUE, NM 87101	
		Dispatched to Sort Facility	August 16, 2013, 4:20 pm	SANTA FE, NM 87501	
		Acceptance	August 16, 2013, 1:04 pm	SANTA FE, NM 87501	

Check on Another Item

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LAS VEGAS NV 89117

Postage	\$ 0.66	0500
Certified Fee	\$3.10	03 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.31	08/16/2013

Sent To: Panagiotis P. Panagopoulos and
Magdalene P. Panagopoulos
Street, Apt. No., or PO Box No.: 10008 Ranch Hand Ave.
City, State, ZIP+4: Las Vegas, NV 89117

PS Form 3800, August 2006

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