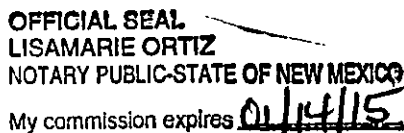


IN THE MATTER OF THE APPLICATION OF WPX ENERGY FOR APPROVAL OF A 9,238 ACRE PROJECT AREA COMPRISED OF ACREAGE SUBJECT TO A COMMUNITIZATION AGREEMENT; FOR A "REFERENCE CASE" AUTHORIZING WITHIN THE PROPOSED PROJECT AREA THE DOWNHOLE COMMINGLING OF PRODUCTION FROM THE ESCRITO GALLUP ASSOCIATED POOL, COUNSELORS GALLUP DAKOTA OIL POOL AND LYBROOK GALLUP OIL POOL; AND FOR AN EXCEPTION TO WELL LOCATION REQUIREMENTS WITHING THE PROPOSED PROJECT AREA, RIO ARRIFFA AND SANDOVAL COUNTIES, NEW MEXICO.

AFFIDAVIT

Michael H. Feldewert, attorney in fact and authorized representative of WPX Energy Production, LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letter and proof of receipts attached hereto.

Feldewert.



**BEFORE THE OIL CONVERSION
DIVISION**
Santa Fe, New Mexico
Exhibit No. 12
Submitted by: **WPX ENERGY**
Hearing Date: **March 20, 2014**

HOLLAND & HART



Michael H. Feldewert
Recognized Specialist in the Area of
Natural Resources - oil and gas law - New
Mexico Board of Legal Specialization
mfeldewert@hollandhart.com

February 14, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL MINERAL OWNERS WITHIN THE PROPOSED PROJECT AREA

Re: Application Of WPX Energy For Approval Of A 9,238 Acre Project Area Comprised Of Acreage Subject To A Communitization Agreement; For A "Reference Case" Authorizing Within The Proposed Project Area The Downhole Commingling Of Production From The Escrito Gallup Associated Pool, Counselors Gallup Dakota Oil Pool And Lybrook Gallup Oil Pool; And For An Exception to Well Location Requirements Within The Proposed Project Area, Rio Arriba And Sandoval Counties, New Mexico.

Ladies & Gentlemen:

This letter is to advise you that WPX Energy Production, LLC, has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner on March 6, 2014. The hearings will start at 8:15 a.m. in Porter Hall at 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.

If you have any questions about this matter please contact Brennan West, Landman with WPX, at 539-573-2878 or at Brennan.West@wpxenergy.com.

Sincerely,

Michael H. Feldewert

ATTORNEY FOR WPX ENERGY PRODUCTION, LLC

Holland & Hart LLP

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Denver Aspen Boulder Colorado Springs Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Salt Lake City Santa Fe Washington, D.C. ☐



February 14, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING PARTIES

Re: Application Of WPX Energy For Approval Of A 9,238 Acre Project Area Comprised Of Acreage Subject To A Communitization Agreement; For A "Reference Case" Authorizing Within The Proposed Project Area The Downhole Commingling Of Production From The Escrito Gallup Associated Pool, Counselors Gallup Dakota Oil Pool And Lybrook Gallup Oil Pool; And For An Exception to Well Location Requirements Within The Proposed Project Area, Rio Arriba And Sandoval Counties, New Mexico.

Ladies & Gentlemen:

This letter is to advise you that WPX Energy Production, LLC, has filed the enclosed application with the New Mexico Oil Conservation Division. As affected party in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner on March 6, 2014. The hearings will commence at 8:15 a.m. and be held in Porter Hall at 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 offsetting party 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.

If you have any questions about this matter please contact Brennan West, Landman with WPX, at 539-573-2878 or at Brennan.West@wpxenergy.com.

Sincerely,

Michael H. Feldewert
ATTORNEY FOR WPX ENERGY PRODUCTION, LLC

WPX ENERGY PRODUCTION COMPANY

OVERRIDING ROYALTY INTEREST OWNERS WITHIN THE CA

Charles J. Constantin, Jr.
8 HARBOR POINT DR #104
Mill Valley, CA 94941

Jennifer Constantin
879 INDIANA ST
San Francisco, CA 94107-3041

Ms. L. Constantin Weber
10734 PARK VILLAGE
PLACE, APT C
Dallas, TX 75230

Connie C. Cummins Trust
2929 BUFFALO SPEEDWAY
908
Houston, TX 77098

Guthrie-Minter, LLC
PO BOX 881
Rociada, NM 87742

Almond Energy, LLC
c/o Fairway Asset Mgmt LLC,
475 17th St, Suite 1390,
Denver, CO 80202

Basin Disposal, Inc
P.O. Box 100,
Aztec, NM 87410

Charlisia Rhea Pettigrew
Reardon
PO BOX 154
Chromo, CO 81128

D. W. George David George
Trust, Farmers National Co.,
Oil & Gas Dept.,
PO Box 3480,
Omaha , NE 68103-0480

Frances Oppe Kervin
30 LANCELOT DRIVE
Dallas, TX 75229-5016

Darrel C. Rhodes,
19705 Diablo Dr,
Pflugerville, TX 78660;

Theresa Rhodes Canon,
253 Pilgrim Rd,
Abilene TX 79602

Debra Lee Dupray
12040 JEFSUMARK CIRCLE
Tucson, AZ 85749-9698

Donald Ray Akler and Rosemary Joy
Akler Revocable Trust UTA dated
10/30/80
2305 SCHOFIELD LN
Farmington, NM 87401-2526

E. Perry
I. E. Perry,
3510 Luke Circle NW,
Albuquerque NM, 87107

ELM RIDGE EXPLORATION
CO LLC
12225 GREENVILLE AVENUE
SUITE 950
DALLAS TX 75243-9362

EMG Properties, Inc.
1000 W Fourth St,
Roswell, NM 88201

Energen Resources Corporation
605 RICH ARRINGTON JR
BLVD N
Birmingham, AL 35203-2707

Marinda Robertson,
117 Lytle Place,
Abilene, TX 79602

GARG, Oil
909 WIRT RD
Houston, TX 77024

Gulf Coast Water Co
1100 MIRA VISTA BLVD
Plano, TX 75093-4698

George T. Slaughter
1219 POPLAR CT
Mountain Home, AR 72653

Gregory D. Harkins
10300 7TH REGIMENT DR # 202
Manassas, VA 20110-6709

Henry Black
PO Box 174,
Midland, TX 79702-0174

WPX ENERGY PRODUCTION COMPANY

y Creek Investments, Ltd.
PO BOX 25313
Dallas, TX 75225

Jean Cooley
8643 N FAIRVIEW
Scottsdale, AZ 85258

Matthew Marcus Cooley
1804 BETTS ST NE
Albuquerque, NM 87112-3104

Burr Revocable Trust amended
04/12/91
PO BOX 50
Farmington, NM 87499

Lindsley Living Trust, Ellen A.
Lindsley, Sole Ttee
1125 E UTE
Farmington, NM 87401

Kathy Jo Cambell
PO BOX 112
Ouray, CO 81427

Kay Rogers Gribble
3402 SHORE CREST DR
Dallas, TX 75235

KIMBELL OIL CO OF TEXAS
777 Taylor Street # P2A
Fort Worth, TX 76102

Mary Ann Kervin
13510 CAHILL LANE
Cypress, TX 77429

Harrison Philip Delaney Trust
c/o Margaret B. Harrison, Ttee
6732 SAINT ANNE ST
Dallas, TX 75248-2215

MERRION OIL AND GAS
610 REILLY AVE
FARMINGTON, NM 87401

Daniel E. Maher
PO BOX 810005
Dallas, TX 75381-0005

Ellen Maher
12 SHEFFIELD DR
Richardson, TX 75081

Emily Maher
433 MAIN ROAD
Savoy, MA 01256

John P. Maher
4504 ELDORADO DR
Plano, TX 75093

Stephen Maher
442 SHEFFIELD DR
Richardson, TX 75081

Louis J. Maher, Jr.
4035 FALKIRK LANE
Houston, TX 77025

Patrick J. Maher
5322 SOUTHERN AVE
Dallas, TX 75209

Jane M. Blast
919 BLACKSTONE
Allen, TX 75002

Mary M. Hughes
7736 EL PADRE
Dallas, TX 75248

R.K.C., Inc.
1527 HILLSIDE RD
Fairfield, CT 06430

Patsy Lou Pettigrew
734 KINGSWOOD
Richardson, TX 75080

Roemer Oil Company
1200 17th St, Ste 2350,
Denver, CO 80202

S/GE-I, aka S/GE-I
475 17th St, Ste 1390,
Denver CO 80202

S/GE-I, aka S/GE-I
475 17th St, Ste 2350
Denver CO 80202

The Clarksons Group
c/o Elm Ridge Resources, Inc
12225 GREENVILLE AVE STE 950
Dallas, TX 75243-9362

Wells Childrens Trust uwo
Helen K. Wells 01/03/89
429 MCIVER STREET
Greenville, SC 29601

WPX ENERGY PRODUCTION COMPANY

Okla Oil and Gas
Corporation
2642 E 21ST ST
Tulsa, OK 74114-1726

Veryl F. Moore and Ella Moore,
Trustees of the Moore Family Trust
dated 6/15/1992
2605 HIGHLAND PL
Farmington, NM 87401-9026

THE McBEE COMPANY
3738 OAKLAWN, LB 2
DALLAS TX 75219

W.D. McBee Enterprises, Ltd.
PO BOX 12864
Dallas, TX 75225

McBee Operating Co, LLC
4311 OAK LAWN AVE STE 310
Dallas, TX 75219

Ann McBee Buell
11241 RUSSWOOD CR
Dallas, TX 75229

Wayne & Jo Ann Moore
Charitable Foundation
403 N MARIENFELD ST
Midland, TX 79701

William C. Eiland
PO BOX 11228
Midland, TX 78702

William J. Cooley
8504 CURT WALTERS CT NE
Albuquerque, NM 87122-2823

WPX Energy LLC
DEPT 1111 ONE WILLIAMS CTR
Tulsa, OK 74182

WPX Energy Production, LLC
DEPT 1111 ONE WILLIAMS CTR
Tulsa, OK 74182

Mark E. Weidler and Jacqueline Joan
Widler, Trustees UTA dated April 7,
1981
158 Pearl Ave,
Rogers AR, 72756-9387

Phillip D. Lucas (s/b Philip)
202 E Spring Creek Rd,
Sun Lakes, AZ 85248

Monsanto Oil Company
5847 SAN FELIPE ST
Houston, TX 77057-3000

Aledo Royalty Company; Chelton Minerals,
Ltd.; Energy Royalties, LLC; Gorda Sound
Royalty, L.P.; J. C. Pace, Ltd; Joel B. Burr &
Alma P. Burr; John Huff; Kimbrell Art
Foundation; Lowe Royalty Partners, L.P.;
Oil Nut Bay Royalties, LP; The Burnett
Foundation; Trunk Bay Royalty Partners,
Ltd; White Oak Energy Royalty Partners,
L.P.; WMH2, LLC; Re William M.
Hitchcock
c/o Nail Bay Royalties, LLC
PO BOX 671099
Dallas, TX 75367-1099

WORKING INTEREST OWNERS WITHIN THE C.A.

Manana Gas, Inc.
2420 Tramway Terrace Ct NE
Albuquerque NM 87122

Logos Resources, LLC
4001 N. Butler Ave. Bldg 7101
Farmington NM 87401

WPX ENERGY PRODUCTION COMPANY

ROYALTY INTEREST OWNERS WITHIN THE C.A.

Patrick E. Barton, Jr.
340 Gaylord Street
Denver, CO 80206

Andrew Barton
2119 East Center Avenue
Denver, CO 80209

Kevin J. Barton
P O Box 9612
Denver, CO 80209-9612

Patricia A. Burns
P O BOX 374
Peyton, CO 80831

EL BARRANCO LLC
P O BOX 1776
Santa Fe, NM 87504-1776

Mary E. B. Gonzales
2806 Calle Campeon
Santa Fe, NM 87505-6419

Lorna R. Harvey
2948 North View Drive
Grand Junction, CO 81504

MERRION OIL AND GAS CORP
610 REILLY AVE
FARMINGTON, NM 87401-2634

New Mexico State Land Office
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

Bureau of Land Management
51 College Blvd,
Farmington, NM 87402

OFFSETS

Encana Oil & Gas (USA) Inc
370 17th Street, Suite 1700
Denver, CO 80202

DJ Simmons, Inc and DJ Simmons
Company Limited Partnership
1009 Ridgeway Place
Farmington, NM 87401

Hanson McBride Petroleum
Company, LLC
P.O. Box 1515
Roswell, NM 88202

Dugan Production Company
P.O. Box 420
Farmington, NM 87499-0420

Logos Resources, LLC
4001 N. Butler Ave. Bldg 7101
Farmington, NM 87401

JMJ Land and Minerals Company
2204 N. Santiago Ave.,
Farmington, NM 87401

Parko, Inc
P.O. Box 1655,
Los Lunas, NM 87031

Merrion Oil and Gas, Corp
610 Reilly Ave.,
Farmington, NM 87401

7006 0100 0005 5771 5275

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	669

FEB 14 2014

Guthrie-Minter, LLC
 PO BOX 881
 Rociada, NM 87742

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:

Guthrie-Minter, LLC
 PO BOX 881
 Rociada, NM 87742

2. Article Number

(Transfer from service label)

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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 *2/18/14*

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)

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 669

FEB 14 2014

Almond Energy, LLC
 c/o Fairway Asset Mgmt LLC,
 475 17th St, Suite 1390,
 Denver, CO 80202

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:

Almond Energy, LLC
 c/o Fairway Asset Mgmt LLC,
 475 17th St, Suite 1390,
 Denver, CO 80202

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5282

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) *CHRIST* C. Date of Delivery *2-7-14*

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 5771 5305

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 Certified Fee
 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)

FEB 14 2014
 Postmark
 Here

Charlisia Rhea Pettigrew
 Reardon
 PO BOX 154
 Chromo, CO 81128

for instructions

SEND. 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:

Charlisia Rhea Pettigrew
 Reardon
 PO BOX 154
 Chromo, CO 81128

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5305

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Frank Reardon* ☐ Agent ☒ Addressee
 B. Received by (Printed Name): **FRANK REARDON**
 C. Date of Delivery: **2/19/14**
 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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 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)

FEB 17 2014
 Postmark
 Here

Frances Oppe Kervin
 3230 LANCELOT DRIVE
 Dallas, TX 75229-5016

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:

Frances Oppe Kervin
 3230 LANCELOT DRIVE
 Dallas, TX 75229-5016

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5329

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Frances Kervin* ☐ Agent ☒ Addressee
 B. Received by (Printed Name): **FRANCES KERVIN**
 C. Date of Delivery: **2-18-14**
 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

5343 5771 0005 0100 7006

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Postage	\$	Postmark Here FEB 14 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Theresa Rhodes Canon,
 253 Pilgrim Rd,
 Abilene TX 79602

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:
 Theresa Rhodes Canon,
 253 Pilgrim Rd,
 Abilene TX 79602

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5343

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Theresa Rhodes Canon
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Theresa Rhodes Canon

C. Date of Delivery
 FEB 24 2014

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

5350 5771 0005 0100 7006

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Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Debra Lee Dupray
 12040 JEFSUMARK CIRCLE
 Tucson, AZ 85749-9698

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:
 Debra Lee Dupray
 12040 JEFSUMARK CIRCLE
 Tucson, AZ 85749-9698

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5350

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Debra Lee Dupray
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Debra Lee Dupray

C. Date of Delivery
 2-18-14

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

7006 0100 0005 5771 5367

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.69

Postmark
Here

Donald Ray Akler and Rosemary Joy
 Akler Revocable Trust UTA dated
 10/30/80
 2305 SCHOFIELD LN
 Farmington, NM 87401-2526

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:

Donald Ray Akler and Rosemary Joy
 Akler Revocable Trust UTA dated
 10/30/80
 2305 SCHOFIELD LN
 Farmington, NM 87401-2526

2. Article Number
 (Transfer from service label)

7006 0100 0005 5771 5367

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Rosemary Akler*
 Addressee

B. Received by (Printed Name)
Rosemary Akler
 C. Date of Delivery
FEB 14 2011

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

7006 0100 0005 5771 5367

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.69

Postmark
Here

FEB 14 2011

E. Perry
 I. E. Perry,
 3510 Luke Circle NW,
 Albuquerque NM, 87107

for instructions

Returned

7006 0100 0005 5771 5381

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

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.64

Postmark
FEB 14 2011

ELM RIDGE EXPLORATION
 CO LLC
 12225 GREENVILLE AVENUE
 SUITE 950
 DALLAS TX 75243-9362

See Reverse for Instructions

SEND 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:
 ELMERIDGE EXPLORATION
 CO LLC
 12225 GREENVILLE AVENUE
 SUITE 950
 DALLAS TX 75243-9362

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5381

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name)
 PAUL BARNES

C. Date of Delivery
 2/18/11

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 5771 5398

U.S. Postal ServiceTM
CERTIFIED MAILTM 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	\$ 6.64

Postmark
FEB 14 2011

EMG Properties, Inc.
 1000 W Fourth St,
 Roswell, NM 88201

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:
 EMG Properties, Inc.
 1000 W Fourth St,
 Roswell, NM 88201

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5398

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[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 5721 5404

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
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For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	Postmark Here FEB 14 2014
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Energen Resources Corporation 605 RICH ARRINGTON JR BLVD N Birmingham, AL 35203-2707	
See reverse for instructions	

SEND 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:

Energen Resources Corporation
 605 RICH ARRINGTON JR
 BLVD N
 Birmingham, AL 35203-2707

COMPLETE THIS SECTION ON DELIV

Signature *M. Muller* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *M. Muller* C. Date of Delivery *18 2014*

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

7006 0100 0005 5721 5411

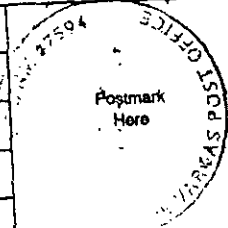
U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	Postmark Here FEB 14 2014
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Marinda Robertson, 117 Lytle Place, Abilene, TX 79602	
See reverse for instructions	

7006 0100 0005 5771 5435

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OFFICIAL USE

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



Gulf Coast Water Co
 1100 MIRA VISTA BLVD
 Plano, TX 75093-4698

for instructions

PS Form 3811, February 2004

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:

Gulf Coast Water Co
 1100 MIRA VISTA BLVD
 Plano, TX 75093-4698

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5435

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ann Inkster* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Ann Inkster

C. Date of Delivery

2/18

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)

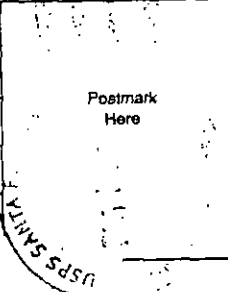
☐ Yes

7006 0100 0005 5771 5435

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OFFICIAL USE

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



Gregory D. Harkins
 10300 7TH REGIMENT DR # 202
 Manassas, VA 20110-6709

for instructions

PS Form 3811, February 2004

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:

Gregory D. Harkins
 10300 7TH REGIMENT DR # 202
 Manassas, VA 20110-6709

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5435

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

A. Signature

X *G. Harkins* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

G. HARKINS

C. Date of Delivery

2/18

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)

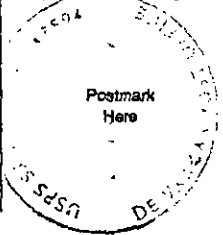
☐ Yes

7006 0100 0005 5771 5473

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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		669

Ivy Creek Investments, Ltd.
 PO BOX 25313
 Dallas, TX 75225

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.

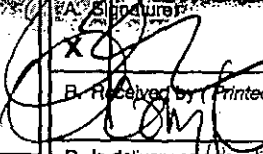
1. Article Addressed to:

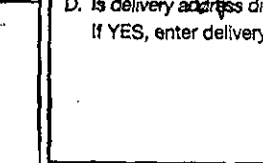
Ivy Creek Investments, Ltd.
 PO BOX 25313
 Dallas, TX 75225

2. Article Number:
 (Transfer from service label) 7006 0100 0005 5771 5473

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

ON DELIVERY

A. Signature: 

B. Received by (Printed Name): 

C. Date of Delivery: 2/20/14

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.

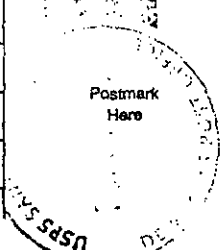
4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 5771 5497

U.S. Postal Service™
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OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		669

Matthew Marcus Cooley
 1804 BETTS ST NE
 Albuquerque, NM 87112-3104

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:

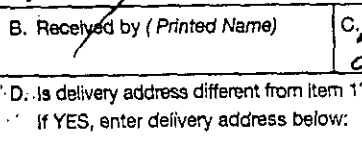
Matthew Marcus Cooley
 1804 BETTS ST NE
 Albuquerque, NM 87112-3104

2. Article Number:
 (Transfer from service label) 7006 0100 0005 5771 5497

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

ON DELIVERY

A. Signature: 

B. Received by (Printed Name): 

C. Date of Delivery: 2/15/14

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

7006 0100 0005 5771 5503

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Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Postmark
Here

Burr Revocable Trust amended

04/12/91

PO BOX 50

Farmington, NM 87499

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:

Burr Revocable Trust amended

04/12/91

PO BOX 50

Farmington, NM 87499

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5503

PS Form 3811 February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Rachel Compton

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Rachel Compton

C. Date of Delivery

2-18-14

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

7006 0100 0005 5771 5510

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Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Postmark
Here

Lindsley Living Trust, Ellen A.

Lindsley, Sole Ttee

1125 E UTE

Farmington, NM 87401

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:

Lindsley Living Trust, Ellen A.

Lindsley, Sole Ttee

1125 E UTE

Farmington, NM 87401

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5510

PS Form 3811 February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Emily Lindsley

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Emily Lindsley

C. Date of Delivery

2-15-14

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

7006 0100 0005 5771 5527

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	669

Postmark
 FEB 1 Here

Kathy Jo Cambell
 PO BOX 112
 Ouray, CO 81427

PS Form 3811, June 2002 (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:

Kathy Jo Cambell
 PO BOX 112
 Ouray, CO 81427

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Kathy Cambell ☐ Agent ☐ Addressee
- B. Received by (Printed Name) Kathy Cambell C. Date of Delivery 2-18
- 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 5771 5527

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 5771 5534

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	669

Postmark
 FEB 1 Here

Kay Rogers Gribble
 3402 SHORE CREST DR
 Dallas, TX 75235

PS Form 3811, June 2002 (Reverse for Instructions)

7006 0100 0005 5771 5541

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	\$	Postmark FEB 14 2004 669
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

KIMBELL OIL CO OF TEXAS
 777 Taylor Street # P2A
 Fort Worth, TX 76102

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:

KIMBELL OIL CO OF TEXAS
 777 Taylor Street # P2A
 Fort Worth, TX 76102

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5541

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Emily
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 Emily

C. Date of Delivery
 2/18/04

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

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

7006 0100 0005 5771 5558

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

OFFICIAL USE

Postage	\$	Postmark FEB 14 2004 669
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Mary Ann Kervin
 13510 CAHILL LANE
 Cypress, TX 77429

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:

Mary Ann Kervin
 13510 CAHILL LANE
 Cypress, TX 77429

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5558

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X M. Alice Collie
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 M. Alice Collie

C. Date of Delivery

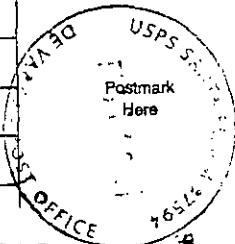
D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

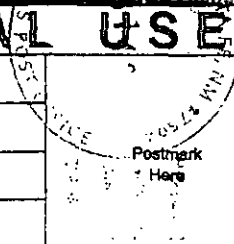
4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 0100 0005 5771 5572

U.S. Postal Service™	
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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)	
MERRION OIL AND GAS 610 REILLY AVE FARMINGTON, NM 87401	
PS Form 3800, June 2002	

7006 0100 0005 5771 5596

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 \$	6.67
Ellen Maher 442 SHEFFIELD DR Richardson, TX 75081	
PS Form 3811, February 2004	

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.		A. Signature X <i>P. Garcia</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>P. Garcia</i> C. Date of Delivery <i>2/18</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below	
1. Article Addressed to: MERRION OIL AND GAS 610 REILLY AVE FARMINGTON, NM 87401		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004		102595-02-M-1540	

Returned

7006 0100 0005 5771 5619

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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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	\$ 6.69

Postmark Here

John P. Maher
 4504 ELDORADO DR
 Plano, TX 75093

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:

P. Maher
 ELDORADO DR
 Plano, TX 75093

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *2-18*

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 5771 5619
 February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5771 5602

U.S. Postal Service™
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OFFICIAL USE

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

Postmark Here

Emily Maher
 433 MAIN ROAD
 Savoy, MA 01256

PS Form 3811, 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.

Article Addressed to:

Emily Maher
 433 MAIN ROAD
 Savoy, MA 01256

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Emily Maher* C. Date of Delivery *2/19*

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 7006 0100 0005 5771 5602
 (Transfer from service)

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

7006 0100 0005 5771 5589

U.S. Postal Service™
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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)	

Postmark Here

669

Daniel E. Maher
 PO BOX 810005
 Dallas, TX 75381-0005

PS Form 3811, February 2004 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:

Daniel E. Maher
 PO BOX 810005
 Dallas, TX 75381-0005

2. Article Number

7006 0100 0005 5771 5589

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *D. Maher* ☐ Agent ☐ Addressee

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

D. Maher *3/4/14*

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 5771 5565

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)	

Postmark Here

FEB 14 2014

669

Harrison Philip Delaney Trust
 c/o Margaret B. Harrison, Ttee
 6732 SAINT ANNE ST
 Dallas, TX 75248-2215

PS Form 3811, February 2004 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:

Harrison Philip Delaney Trust
 c/o Margaret B. Harrison, Ttee
 6732 SAINT ANNE ST
 Dallas, TX 75248-2215

2. Article Number

7006 0100 0005 5771 5565

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. Harrison* ☐ Agent ☐ Addressee

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

M. Harrison *2/18/14*

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

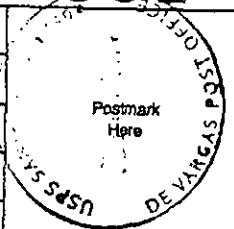
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 5771 5466

U.S. Postal Service™
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 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		\$ 6.69

Henry Black
 PO Box 174,
 Midland, TX 79702-0174

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:
 Henry Black
 PO Box 174,
 Midland, TX 79702-0174

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5466

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

5. Signature
 X *Dana Cristian* ☐ Agent ☐ Addressee

6. Received by (Printed Name) *Dana CRISTIAN* C. Date of Delivery *2-21-14*

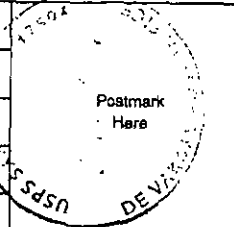
D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

7006 0100 0005 5771 5480

U.S. Postal Service™
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OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		\$ 6.69

Jean Cooley
 8643 N FAIRVIEW
 Scottsdale, AZ 85258

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:
 Jean Cooley
 8643 N FAIRVIEW
 Scottsdale, AZ 85258

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5480

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

5. Signature
 X *Jean Cooley* ☐ Agent ☐ Addressee

6. Received by (Printed Name) *Jean Cooley* C. Date of Delivery *2-18*

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

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

7006 0100 0005 5771 5428

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		669

GARG, Oil
 909 WIRT RD
 Houston, TX 77024

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:

GARG, Oil
 909 WIRT RD
 Houston, TX 77024

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Karen Loyd* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *Karen Loyd* C. Date of Delivery: *2/18/14*

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 5771 5442

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		669

George T. Slaughter
 1219 POPLAR CT
 Mountain Home, AR 72653

PS Form 3811, February 2004 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:

George T. Slaughter
 1219 POPLAR CT
 Mountain Home, AR 72653

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *George T. Slaughter* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *GEORGE T. Slaughter* C. Date of Delivery: *2-18-14*

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 105-02-M-1540

7006 0100 0005 5771 5299

U.S. Postal ServiceTM
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Postage & Fees	\$ <u>6.69</u>



Basin Disposal, Inc
 P.O. Box 100,
 Aztec, NM 87410

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:
 Basin Disposal, Inc
 P.O. Box 100,
 Aztec, NM 87410

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X. August Teofani ☐ Agent ☐ Addressee
 B. Received by (Printed Name): August Teofani C. Date of Delivery: 2/18/14
 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.

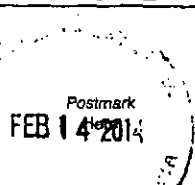
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number: 7006 0100 0005 5771 5299
 (Transfer from service label)
 PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5771 5312

U.S. Postal ServiceTM
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 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)	
Postage & Fees	\$ <u>6.69</u>



D. W. George David George
 Trust, Farmers National Co.,
 Oil & Gas Dept.,
 PO Box 3480,
 Omaha, NE 68103-0480

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:
 D. W. George David George
 Trust, Farmers National Co.,
 Oil & Gas Dept.,
 PO Box 3480,
 Omaha, NE 68103-0480

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 ☒ 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: 7006 0100 0005 5771 5312
 (Transfer from service label)
 PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5771 5237

U.S. Postal ServiceTM
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Charles J. Constantin, Jr.
 8 HARBOR POINT DR #104
 Mill Valley, CA 94941

PS Form 3800, June 2002 (Instructions on 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:

Charles J. Constantin, Jr.
 8 HARBOR POINT DR #104
 Mill Valley, CA 94941

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5237

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

Constantin

2/18/04

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:

Darrel C. Rhodes,
 19705 Diablo Dr,
 Pflugerville, TX 78660;

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5336

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

Chris Rhodes

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

7006 0100 0005 5771 5336

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark FEB 1 2004
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Darrel C. Rhodes,
 19705 Diablo Dr,
 Pflugerville, TX 78660;

PS Form 3800, June 2002

(for instructions)

7006 0100 0005 5771 5251

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	\$	FEB 14 2011 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	669

Ms. L. Constantin Weber
10734 PARK VILLAGE
PLACE, APT C
Dallas, TX 75230

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:

Ms. L. Constantin Weber
10734 PARK VILLAGE
PLACE, APT C
Dallas, TX 75230

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5251

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>L Constantin Weber</i>		☐ Agent ☒ Addressee
B. Received by (Printed Name) <i>L Constantin Weber</i>		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		

7006 0100 0005 5771 5268

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	\$	FEB 14 2011 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	669

Connie C. Cummins Trust
2929 BUFFALO SPEEDWAY
908
Houston, TX 77098

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:

Connie C. Cummins Trust
2929 BUFFALO SPEEDWAY
908
Houston, TX 77098

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5268

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature <i>Anthony Carter</i>		☒ Agent ☐ Addressee
B. Received by (Printed Name) <i>Anthony Carter</i>		C. Date of Delivery <i>2-18-11</i>
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		

7006 0100 0005 5771 5633

U.S. Postal ServiceTM
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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

Stephen Maher
 442 SHEFFIELD DR
 Richardson, TX 75081

for instructions

Returned

7006 0100 0005 5771 5657

U.S. Postal ServiceTM
CERTIFIED MAILTM 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)	

Postmark
 FEB 14 2014

Patrick J. Maher
 5322 SOUTHERN AVE
 Dallas, TX 75209

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:
 Patrick J. Maher
 5322 SOUTHERN AVE
 Dallas, TX 75209

2. Article Number
 (Transfer from service label) 11

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Patrick Maher*

B. Received by (Printed Name)
 Patrick Maher

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

PS Form 3800, June 2002 See Reverse for Instructions PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5771 5664

U.S. Postal ServiceTM
CERTIFIED MAILTM 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)	

FEB 14 2014

Mary M. Hughes
 7736 EL PADRE
 Dallas, TX 75248

For instructions

CERTIFIED MAIL
 SENDER: COMPLETE
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

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:
 Mary M. Hughes
 7736 EL PADRE
 Dallas, TX 75248

2. Article Number
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
 X Mary M. Hughes ☐ Agent ☒ Addressee

B. Received by (Printed Name)
 Mary M. Hughes

C. Date of Delivery
 2-18-2014

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

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

7006 0100 0005 5771 5668

U.S. Postal ServiceTM
CERTIFIED MAILTM 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
 FEB 14 2014

Patsy Lou Pettigrew
 734 KINGSWOOD
 Richardson, TX 75080

For instructions

CERTIFIED MAIL
 SENDER: COMPLETE
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

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:
 Patsy Lou Pettigrew
 734 KINGSWOOD
 Richardson, TX 75080

2. Article Number
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
 X Patsy L. Pettigrew ☐ Agent ☒ Addressee

B. Received by (Printed Name)
 Patsy L. Pettigrew

C. Date of Delivery
 2/18/14

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

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

7006 0100 0005 5771 5718

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	\$	Postmark Here FEB 14 2015
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.69	

S/GE-I, aka S/GE-1
 475 17th St, Ste 2350
 Denver CO 80202

(for instructions)

Returned

7006 0100 0005 5771 5725

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	\$	Postmark Here FEB 14 2015
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.69	

The Clarksons Group
 c/o Elm Ridge Resources, Inc
 12225 GREENVILLE AVE STE 950
 Dallas, TX 75243-9362

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 Clarksons Group
 c/o Elm Ridge Resources, Inc
 12225 GREENVILLE AVE STE 950
 Dallas, TX 75243-9362

2. Article Number:
 (Transfer from service label)

ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 PAUL DAWKINS

C. Date of Delivery
 2/18/14

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

7006 0100 0005 5771 5725

PS Form 3811 February 2004 Domestic Return Receipt 102595-02-M-1541

7006 0100 0005 5721 5749

U.S. Postal ServiceTM
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here FEB 14 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Toklan Oil and Gas
 Corporation
 2642 E 21ST ST
 Tulsa, OK 74114-1726

PS Form 3800, June 2002 See Reverse for Instructions

Return

7006 0100 0005 5721 5763

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

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

OFFICIAL USE

Postage	\$	Postmark Here FEB 14 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

THE McBEE COMPANY
 3738 OAKLAWN, LB 2
 DALLAS TX 75219

PS Form 3800, June 2002 See Reverse for Instructions

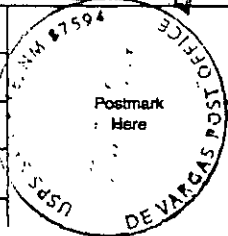
Returned

7006 0100 0005 5771 5787

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)		

McBee Operating Co, LLC
 4311 OAK LAWN AVE STE 310
 Dallas, TX 75219

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:

McBee Operating Co, LLC
 4311 OAK LAWN AVE STE 310
 Dallas, TX 75219

2. Article Number (Transfer from service label) 7006 0100 0005 5771 5787

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

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X *S Kreiner*

B. Received by (Printed Name) *S Kreiner* C. Date of Delivery *02/18/14*

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.

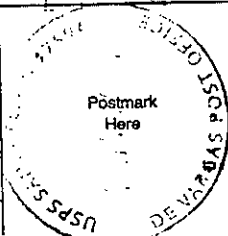
4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 0100 0005 5771 5800

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 \$ *6.69*

Wayne & Jo Ann Moore
 Charitable Foundation
 403 N MARIENFELD ST
 Midland, TX 79701

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:

Wayne & Jo Ann Moore
 Charitable Foundation
 403 N MARIENFELD ST
 Midland, TX 79701

2. Article Number (Transfer from service label) 7006 0100 0005 5771 5800

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

PLACE STICKER AT TOP OF ENVELOPE, FOLD AT DOTTED LINE

THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
 X *K Burkles*

B. Received by (Printed Name) *K Burkles* C. Date of Delivery *2/18/14*

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 5771 5824

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	FEB 14 2014 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

William J. Cooley
 8504 CURT WALTERS CT NE
 Albuquerque, NM 87122-2823

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 J. Cooley
 8504 CURT WALTERS CT NE
 Albuquerque, NM 87122-2823

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5824

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) C. Date of Delivery

William J. Cooley 2/19/14

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 5771 5831

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

WPX Energy LLC
 DEPT 1111 ONE WILLIAMS CTR
 Tulsa, OK 74182

See Reverse for Instructions

Returned

5595 5771 0005 0100 7006

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)	

669

Postmark Here

Mark E. Weidler and Jacqueline Joan Widler, Trustees UTA dated April 7, 1981
 158 Pearl Ave,
 Rogers AR, 72756-9387

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:
 Mark E. Weidler and Jacqueline Joan Widler, Trustees UTA dated April 7, 1981
 158 Pearl Ave,
 Rogers AR, 72756-9387

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5855

ON DELIVERY

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

B. Received by (Printed Name)
 Mark E. Weidler

C. Date of Delivery
 2/22/14

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

5595 5771 0005 0100 7006

U.S. Postal Service™
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OFFICIAL USE

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

669

Postmark Here

Phillip D. Lucas (s/b Philip)
 10202 E Spring Creek Rd,
 Sun Lakes, AZ 85248

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:
 Phillip D. Lucas (s/b Philip)
 10202 E Spring Creek Rd,
 Sun Lakes, AZ 85248

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5862

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name)
 Phillip D. Lucas

C. Date of Delivery
 2-18-14

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 5771 5879

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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)	

Postmark Here

Monsanto Oil Company
 5847 SAN FELIPE ST
 Houston, TX 77057-3000

for Instructions

Returned

7006 0100 0005 5771 5893

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)	

Postmark Here

Logos Resources, LLC
 4001 N. Butler Ave. Bldg 7101
 Farmington NM 87401

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:

Logos Resources, LLC
 4001 N. Butler Ave. Bldg 7101
 Farmington NM 87401

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5893

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

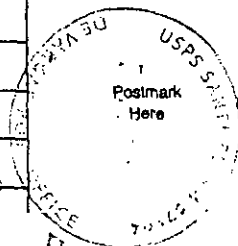
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5771 5916

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)



Andrew Barton
 2119 East Center Avenue
 Denver, CO 80209

PS Form 3811, June 2004 (Rev. 11-03) See back 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:
 Andrew Barton
 2119 East Center Avenue
 Denver, CO 80209

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5916

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name)
 C. Date of Delivery 2/18/14

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

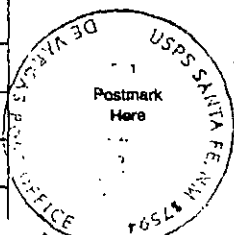
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5771 5923

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)



Kevin J. Barton
 P O Box 9612
 Denver, CO 80209-9612

PS Form 3811, February 2004 Domestic Return Receipt 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:
 Kevin J. Barton
 P O Box 9612
 Denver, CO 80209-9612

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5923

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name)
 C. Date of Delivery FEB 2 - 2014

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 5771 5954

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OFFICIAL USE

Postage	\$	FEB 14 2004 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Mary E. B. Gonzales
 2806 Calle Campeon
 Santa Fe, NM 87505-6419

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:

Mary E. B. Gonzales
 2806 Calle Campeon
 Santa Fe, NM 87505-6419

2. Article Number
 (Transfer from service label)

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
 X Mary E. B. Gonzales ☐ 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

7006 0100 0005 5771 5954

PS Form 3811, February 2004 Domestic Return Receipt 595-02-M-1540

7006 0100 0005 5771 5978

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

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

OFFICIAL USE

Postage	\$	FEB 14 2004 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

MERRION OIL AND GAS CORP
 610 REILLY AVE
 FARMINGTON, NM 87401-2634

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:

MERRION OIL AND GAS CORP
 610 REILLY AVE
 FARMINGTON, NM 87401-2634

2. Article Number
 (Transfer from service label)

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
 X P. Garcia ☐ 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

7006 0100 0005 5771 5978

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

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: \$6.69

Bureau of Land Management
 6251 College Blvd,
 Farmington, NM 87402

See Reverse for Instructions

7006 0100 0005 5771 5992

CERTIFIED MAIL
 SENDER: CC

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Bureau of Land Management
 6251 College Blvd,
 Farmington, NM 87402

2. Article Number (Transfer from service label): 7006 0100 0005 5771 5992

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: 
☐ Agent ☐ Addressee

B. Received by (Printed Name): Jim Collins
 C. Date of Delivery: 2-18-14

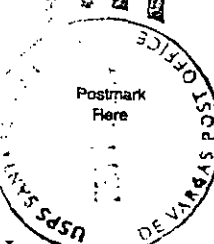
D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

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: \$6.69

Encana Oil & Gas (USA) Inc
 370 17th Street, Suite 1700
 Denver, CO 80202

See Reverse for Instructions

7006 0100 0005 5771 5213

CERTIFIED MAIL
 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.

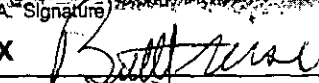
1. Article Addressed to:

Encana Oil & Gas (USA) Inc
 370 17th Street, Suite 1700
 Denver, CO 80202

2. Article Number (Transfer from service label): 7006 0100 0005 5771 5213

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: 
☐ Agent ☐ Addressee

B. Received by (Printed Name): Jim Collins
 C. Date of Delivery: 2-18-14

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

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

7006 0100 0005 5771 5206

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	\$	Postmark FEB 14 2014 Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	6.69	

DJ Simmons, Inc and DJ Simmons
 Company Limited Partnership
 1009 Ridgeway Place
 Farmington, NM 87401

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:
 DJ Simmons, Inc and DJ Simmons
 Company Limited Partnership
 1009 Ridgeway Place
 Farmington, NM 87401

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5206

COMPLETE THIS SECTION ON DELIVERY

A. Signature: [Signature] ☐ Agent ☐ Addressee
 P.O. Box 1469 zip 87499
 X 1009 Ridgeway Pl Ste 200
 Farmington, NM 87401
 B. Received by (Printed Name) C. Date of Delivery: 2-18-14

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 5771 5183

U.S. Postal Service™
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 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark FEB 14 2014 Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	6.69	

Dugan Production Company
 P.O. Box 420
 Farmington, NM 87499-0420

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:
 Dugan Production Company
 P.O. Box 420
 Farmington, NM 87499-0420

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5183

COMPLETE THIS SECTION ON DELIVERY

A. Signature: [Signature] ☐ Agent ☐ Addressee
 B. Received by (Printed Name): Tom Dugan C. Date of Delivery: 2-18-14

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 5771 5176

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	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Logos Resources, LLC
 4001 N. Butler Ave. Bldg 7101
 Farmington, NM 87401

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:

Logos Resources, LLC
 4001 N. Butler Ave. Bldg 7101
 Farmington, NM 87401

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5176

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) 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

7006 0100 0005 5771 5169

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	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

JMJ Land and Minerals Company
 2204 N. Santiago Ave.,
 Farmington, NM 87401

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:

JMJ Land and Minerals Company
 2204 N. Santiago Ave.,
 Farmington, NM 87401

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5169

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) 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

7006 0100 0005 5771 5152

U.S. Postal Service™
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 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	\$	6.00

Postmark Here

Parko, Inc
 P.O. Box 1655,
 Los Lunas, NM 87031

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:
 Parko, Inc
 P.O. Box 1655,
 Los Lunas, NM 87031

2. Article Number: 7006 0100 0005 5771 5152
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *Mami Sandoval*
 C. Date of Delivery: *2-18-14*

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

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

7006 0100 0005 5771 5145

U.S. Postal Service™
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OFFICIAL USE

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.69

Postmark Here

Merrion Oil and Gas, Corp
 610 Reilly Ave.,
 Farmington, NM 87401

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:
 Merrion Oil and Gas, Corp
 610 Reilly Ave.,
 Farmington, NM 87401

2. Article Number: 7006 0100 0005 5771 5145
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *P. Garcia*
☐ Agent
☐ Addressee

B. Received by (Printed Name): *P. Garcia*
 C. Date of Delivery: *2/18*

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

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

7006 0100 0005 5771 5244

U.S. Postal Service™
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 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	\$ 6.69

Postmark Here

Jennifer Constantin
 879 INDIANA ST
 San Francisco, CA 94107-3041

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 Constantin
 879 INDIANA ST
 San Francisco, CA 94107-3041

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5244

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) C. Date of Delivery 2/24/14

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 5771 5150

U.S. Postal Service™
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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.69

Postmark Here

Hanson McBride Petroleum
 Company, LLC
 P.O. Box 1515
 Roswell, NM 88202

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:
 Hanson McBride Petroleum
 Company, LLC
 P.O. Box 1515
 Roswell, NM 88202

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5150

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) C. Date of Delivery 2/24/14

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 5771 5220

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OFFICIAL USE

Postage	\$ 69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee	6.69

Postmark Here

J. C. Pace, Ltd; Joel B. Burr & Alma P. Burr;
 John Huff; Kimbrell Art Foundation; Lowe
 Royalty Partners, L.P.; Oil Nut Bay
 Royalties, LP; The Burnett Foundation;
 Trunk Bay Royalty Partners, Ltd; White Oak
 Energy Royalty Partners, L.P.; WMH2, LLC
 Re William M. Hitchcock
 c/o Nail Bay Royalties, LLC
 PO BOX 671099
 Dallas, TX 75367-1099

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:

J. C. Pace, Ltd; Joel B. Burr & Alma P. Burr;
 John Huff; Kimbrell Art Foundation; Lowe
 Royalty Partners, L.P.; Oil Nut Bay
 Royalties, LP; The Burnett Foundation;
 Trunk Bay Royalty Partners, Ltd; White Oak
 Energy Royalty Partners, L.P.; WMH2, LLC;
 Re William M. Hitchcock
 c/o Nail Bay Royalties, LLC
 PO BOX 671099
 Dallas, TX 75367-1099

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5220

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

M. SOBELT

☐ Agent
☐ Addressee

B. Received by (Printed Name)

M. SOBELT

C. Date of Delivery

02/20/14

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

7006 0100 0005 5771 5985

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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 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)	

Postmark Here

FEB 14 2014

New Mexico State Land Office
 310 Old Santa Fe Trail
 Santa Fe, New Mexico 87501

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:

New Mexico State Land Office
 310 Old Santa Fe Trail
 Santa Fe, New Mexico 87501

2. Article Number

(Transfer from service label)

7006 0100 0005 5771 5985

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SECTION ON DELIVERY

A. Signature

X

M. SOBELT

☐ Agent
☐ Addressee

B. Received by (Printed Name)

M. SOBELT

C. Date of Delivery

FEB 18 2014

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

7006 0100 0005 5771 5961

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OFFICIAL USE

Postage	\$	Postmark Here FEB 14 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Lorna R. Harvey
 2948 North View Drive
 Grand Junction, CO 81504

PS Form 3800, June 2002 See reverse for instructions

SENDER'S USE ONLY
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

INSTRUCTIONS ON DELIVERY

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 mail piece, or on the front if space permits.

1. Article Addressed to:
 Lorna R. Harvey
 2948 North View Drive
 Grand Junction, CO 81504

2. Article Number:
 (Transfer from service label) 7006 0100 0005 5771 5961

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Signature: *Lorna R. Harvey*
☒ Agent ☒ Addressee
 B. Received by (Printed Name) LORNA HARVEY
 C. Date of Delivery 2-18-14
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

7006 0100 0005 5771 5947

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here SANTA FE, NM FEB 14 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

EL BARRANCO LLC
 P O BOX 1776
 Santa Fe, NM 87504-1776

PS Form 3800, June 2002 See reverse for instructions

Returned

7006 0100 0005 5771 5930

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)

Postmark Here

Patricia A. Burns
 P O BOX 374
 Peyton, CO 80831

PS Form 3800, June 2002 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:
 Patricia A. Burns
 P O BOX 374
 Peyton, CO 80831

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5930

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

ON DELIVERY

A. Signature
 X Patricia A. Burns ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 PATRICIA A. BURNS

C. Date of Delivery
 2/14/14

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

7006 0100 0005 5771 5930

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OFFICIAL USE

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

Postmark Here

Patrick E. Barton, Jr.
 340 Gaylord Street
 Denver, CO 80206

PS Form 3800, June 2002 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:
 Patrick E. Barton, Jr.
 340 Gaylord Street
 Denver, CO 80206

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5930

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

ON DELIVERY

A. Signature
 X Patrick E. Barton, Jr. ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 23456789

C. Date of Delivery
 2-18-14

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

7006 0100 0005 5771 5886

U.S. Postal Service™
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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)	

Postmark Here

Manana Gas, Inc.
 2420 Tramway Terrace Ct NE
 Albuquerque NM 87122

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:

Manana Gas, Inc.
 2420 Tramway Terrace Ct NE
 Albuquerque NM 87122

2. Article Number (Transfer from service label): 7006 0100 0005 5771 5886

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: [Signature]
☐ Agent ☐ Addressee

B. Received by (Printed Name): Douglas M. Hartman
 C. Date of Delivery: 9/15/2014

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

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

7006 0100 0005 5771 5848

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OFFICIAL USE

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

Postmark Here

WPX Energy Production, LLC
 DEPT 1111 ONE WILLIAMS CTR
 Tulsa, OK 74182

for Instructions

Returned

7006 0100 0005 5771 5817

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)	

Postmark Here

William C. Eiland
 PO BOX 11228
 Midland, TX 78702

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 C. Eiland
 PO BOX 11228
 Midland, TX 78702

2. Article Number

7006 0100 0005 5771 5817

(Transfer from service label)

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) C. Date of Delivery 2-24
- 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 5771 5794

U.S. Postal Service™
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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)	

Postmark Here

Ann McBee Buell
 11241 RUSSWOOD CR
 Dallas, TX 75229

For Instructions

SENDER:

- 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 McBee Buell
 11241 RUSSWOOD CR
 Dallas, TX 75229

2. Article Number

7006 0100 0005 5771 5794

(Transfer from service label)

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) C. Date of Delivery 2-18-04
- 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 5771 5770

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

OFFICIAL USE

Postage	\$	Postmark Here 814 30
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

W.D. McBee Enterprises, Ltd.
 PO BOX 12864
 Dallas, TX 75225

PS Form 3811, February 2004 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:
 W.D. McBee Enterprises, Ltd.
 PO BOX 12864
 Dallas, TX 75225

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5770

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

ON DELIVERY

A. Signature
 X MBM 12 ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 MBM 12

C. Date of Delivery
 2-18-14

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 5771 5756

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here FEB 14 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Veryl F. Moore and Ella Moore,
 Trustees of the Moore Family Trust
 dated 6/15/1992
 2605 HIGHLAND PL
 Farmington, NM 87401-9026

PS Form 3811, February 2004 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:
 Veryl F. Moore and Ella Moore,
 Trustees of the Moore Family Trust
 dated 6/15/1992
 2605 HIGHLAND PL
 Farmington, NM 87401-9026

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 5756

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

ON DELIVERY

A. Signature
 X Veryl F. Moore ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 Veryl F. Moore

C. Date of Delivery
 2-26-14

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 5771 5732

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 \$		FEB 14 2014 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Wells Childrens Trust uwo
 Helen K. Wells 01/03/89
 429 MCIVER STREET
 Greenville, SC 29601

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:
 Wells Childrens Trust uwo
 Helen K. Wells 01/03/89
 429 MCIVER STREET
 Greenville, SC 29601

2. Article Number (Transfer from service label) 7006 0100 0005 5771 5732

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *[Signature]* C. Date of Delivery 2/18/14

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 5771 5701

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 \$		FEB 14 2014 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

S/GE-I, aka S/GE-I
 475 17th St, Ste 1390,
 Denver CO 80202

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:
 S/GE-I, aka S/GE-I
 475 17th St, Ste 1390,
 Denver CO 80202

2. Article Number (Transfer from service label) 7006 0100 0005 5771 5701

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) *[Signature]* C. Date of Delivery 2/18/14

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 5771 5671

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 \$	Postmark Here FEB 14 2011
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
669	
R.K.C., Inc. 1527 HILLSIDE RD Fairfield, CT 06430	
See Reverse for Instructions	

7006 0100 0005 5771 5695

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 \$	Postmark Here FEB 14 2011
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
669	
Roemer Oil Company 1200 17th St, Ste 2350, Denver, CO 80202	
See Reverse for Instructions	

Returned

7006 0100 0005 5771 5626

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark FEB 4 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Jane M. Blast
 919 BLACKSTONE
 Allen, TX 75002

for Instructions

CERTIFIED MAIL
 SENDER: COMPLETE
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
 OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:
 Jane M. Blast
 919 BLACKSTONE
 Allen, TX 75002

2. Article Number
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
 X Jane M. Blast ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 Jane M. Blast

C. Date of Delivery
 2-21-14

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

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

7006 0100 0005 5771 5640

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information, visit our website at www.usps.com

OFFICIAL USE

Postage	\$	Postmark Here FEB 4 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)	669	

Louis J. Maher, Jr.
 4035 FALKIRK LANE
 Houston, TX 77025

for Instructions

CERTIFIED MAIL
 SENDER: COMPLETE THIS SECTION
 COMPLETE THIS SECTION ON DELIVERY

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:
 Louis J. Maher, Jr.
 4035 FALKIRK LANE
 Houston, TX 77025

2. Article Number
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
 X Helen K Maher ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 Helen K Maher

C. Date of Delivery
 2/19/14

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

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