



MODRALL SPERLING
LAWYERS

September 22, 2014

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

Re: In The Matter of the Application of Cimarex Energy Company of Colorado for Non-Standard Oil Spacing and Proration Unit and Compulsory Pooling in Eddy County, New Mexico.

TO: POOLED PARTIES LISTED ON EXHIBIT A:

This letter is to advise you that Cimarex Energy Company of Colorado has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on October 16, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. As a party who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to Division Rule 1208.B, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 5:00 PM on Thursday, October 9, 2014, with a copy delivered to the undersigned.

Sincerely,

Jordan L. Kessler
Attorney for Cimarex Energy
Company of Colorado

Y:\dox\client\82762\0127\CORRES\W2277773.DOCX

Modrall Spierling
Reehl Harris & Sisk P.A.

Bank of America Centre
500 Fourth Street NW
Suite 1000
Albuquerque,
New Mexico 87102

PO Box 2168
Albuquerque,
New Mexico 87103-2168

Tel: 505.848.1800
www.modrall.com

Cimarex Exhibit 6



MODRALL SPERLING

L A W Y E E R S

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TO: OFFSET PARTIES LISTED ON EXHIBIT A:

This letter is to advise you that Cimarex Energy Company of Colorado has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. You are an offset operator to the proposed non-standard spacing and proration unit in the W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on October 16, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. As a party who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

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Attorney for Cimarex Energy
Company of Colorado

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Fax: 505.449.9710
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STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION

RECEIVED OGD
2014 SEP 17 P 3 43

APPLICATION OF CIMAREX
ENERGY COMPANY OF COLORADO
FOR A NON-STANDARD OIL SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.

CASE NO. 15215

APPLICATION

Cimarex Energy Company of Colorado ("Cimarex"), through its undersigned attorneys, hereby makes application to the Oil Conservation Division pursuant to the provisions of NMSA 1978, Section 70-2-17, for an order: (1) creating a non-standard 160-acre, more or less, oil spacing and proration unit in the Bone Spring formation, comprised of the W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico; and (2) pooling all mineral interests in the Bone Spring formation underlying this proposed non-standard spacing and proration unit. In support of this application, Cimarex states as follows:

1. Cimarex is an interest owner in the subject lands and has the right to drill a well thereon.
2. Cimarex seeks to dedicate the W/2 E/2 of Section 36 to the proposed well to form a non-standard 160-acre, more or less, oil spacing and proration unit (the "project area").
3. Cimarex proposes to drill the Jake 36 State 7H well to a depth sufficient to test the Bone Spring formation. This well is a horizontal well with a surface location 330 feet from the South line, 1725 feet from the East line, and a terminus 330 feet from the North line, 1725 feet from the East line (Section 36).

4. This project area is within the Cottowood Draw Bone Spring pool (pool code 97494). There are no special pool rules, and the producing interval that Cimarex seeks will comply with the statewide 300-foot setback requirements.

5. Cimarex has sought but been unable to obtain a voluntary agreement from all interest owners in the Bone Spring formation underlying the proposed project area to participate in the drilling of the well or to otherwise commit their interests to the well.

6. Approval of the non-standard unit and the pooling of all interests in the Bone Spring formation underlying the proposed project area will prevent the drilling of unnecessary wells, prevent waste and protect correlative rights.

7. Notice of this application has been given in accordance with Division rules as shown on Exhibit A.

WHEREFORE, Cimarex Energy Company of Colorado requests this application be set for hearing before an Examiner of the Oil Conservation Division on October 16, 2014, and after notice and hearing as required by law, the Division enter its order:

A. Creating a non-standard oil spacing and proration unit ("project area") in the Bone Spring formation comprised of W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico;

B. Pooling all mineral interests in the Bone Spring formation underlying this non-standard spacing and proration unit/project area;

C. Designating Cimarex as operator of this unit and the well to be drilled thereon;

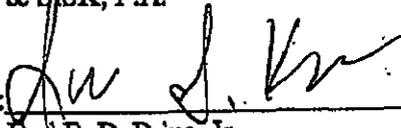
D. Authorizing Cimarex to recover its costs of drilling, equipping and completing this well;

E. Approving actual operating charges and costs charged for supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedure; and

F. Setting a 200% charge for the risk involved in drilling and completing the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted,

MODRALL, SPERLING, ROEHL, HARRIS
& SISK, P.A.

By: 

Earl E. DeBrine, Jr.

Jordan L. Kessler

Post Office Box 2168

Bank of America Centre

500 Fourth Street NW, Suite 1000

Albuquerque, New Mexico 87103-2168

Telephone: 505.848.1800

Attorneys for Applicant

C:\Users\christine\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\LHTIQP4P\Draft
compulsory pooling applicatoh for Jake 36 State 7H (W2268017).DOCX

EXHIBIT A
CIMAREX ENERGY COMPANY OF COLORADO NOTICE LIST

Parties to be pooled:

Isramco Resources, LLC
3452 Lyrac St.
Oakton, VA 22124

Mary Shoener
26 Thunderhill Lane
Ridgefield, CT 06877

Chester J. Stuebben
1275 Rock Ave.
Apt # HH5
North Plainfield, NJ 07060

Alan D. Tuck, JR. and Evelyn Tuck
2829 Wilfred Reid Cir.
Sarasota, FL 34240

Larry Turner
2902 County Road N-O
Lamesa, TX 79331

Sande Wische
3 Morton Ln.
Warren, NJ 07059

Offsets

Chevron USA Inc.
1400 Smith Street
Houston, TX 77022

Chevron USA, Inc.
P.O. Box 1150
Midland, TX 79702

HOG Partnership, LP
5950 Cedar Springs Rd.
Dallas, TX 75235-6803

Isramco Resources, LLC
3452 Lyrac St.
Oakton, VA 22124

Nortex Corporation
Attn: Robert Kent
1415 Louisiana Street
Houston, Texas 77002

MBOE, Inc.
915 One Energy Square
Dallas, TX 75026

Chester J. Stuebben
1275 Rock Ave.
Apt # HH5
North Plainfield, NJ 07060

Alan D. Tuck, JR. and Evelyn Tuck
2829 Wilfred Reid Cir.
Sarasota, FL 34240

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2902 County Road N O
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Warren, NJ 07059

Irene McIsaac
3452 Lyrac St.
Oakton, VA 22124

Patricia McIsaac
3452 Lyrac St.
Oakton, VA 22124

Nancy Redford
141 S. Norton St.
Los Angeles, CA 90004

Mary Shoener
26 Thunderhill Lane
Ridgefield, CT 06877

Daniel MacIsaac
902 Schultz Pl.
Monona, WI 53716

Rubicon Oil & Gas, LLC
508 W. Wall Street
Midland, Texas 79701



MODRALL SPERLING

LAWYERS

October 1, 2014

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Re: In The Matter of the Application of Cimarex Energy Company of Colorado for Non-Standard Oil Spacing and Proration Unit and Compulsory Pooling in Eddy County, New Mexico.

TO: POOLED PARTIES LISTED ON EXHIBIT A:

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Pursuant to Division Rule 1208.B, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 5:00 PM on Thursday, October 23, 2014, with a copy delivered to the undersigned.

Sincerely,

Jordan L. Kessler
Attorney for Cimarex Energy
Company of Colorado

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

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Roehl Harris & Sisk P.A.

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October 1, 2014

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Attorney for Cimarex Energy
Company of Colorado

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

RECEIVED OCD
2014 SEP 17 P 3:43

APPLICATION OF CIMAREX
ENERGY COMPANY OF COLORADO
FOR A NON-STANDARD OIL SPACING
AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.

CASE NO. 15215

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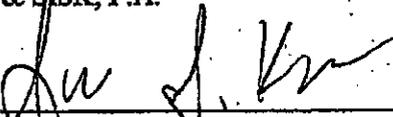
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By: 

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500 Fourth Street NW, Suite 1000

Albuquerque, New Mexico 87103-2168

Telephone: 505.848.1800

Attorneys for Applicant

C:\Users\christine\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Outlook\LHTIQP4P\Draft
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AMENDED EXHIBIT A
CIMAREX ENERGY COMPANY OF COLORADO NOTICE LIST

Parties to be pooled:

Isramco Resources, LLC
Attn: Anthony James
2425 W. Loop S., Ste. 810
Houston, Texas 77027

Mary Shoener
26 Thunderhill Lane
Ridgefield, CT 06877

Chester J. Stuebben
1275 Rock Ave.
Apt # HH5
North Plainfield, NJ 07060

Alan D. Tuck, JR. and Evelyn Tuck
2829 Wilfred Reid Cir.
Sarasota, FL 34240

Larry Turner
2902 County Road N O
Lamesa, TX 79331

Sande Wische
3 Morton Ln.
Warren, NJ 07059

Offsets

Chevron USA Inc.
1400 Smith Street
Houston, TX 77022

Chevron USA, Inc.
P.O. Box 1150
Midland, TX 79702

HOG Partnership, LP
5950 Cedar Springs Rd.
Dallas, TX 75235-6803

Isramco Resources, LLC

Attn: Anthony James
2425 W. Loop S., Ste. 810
Houston, Texas 77027

Nortex Corporation
Attn: Robert Kent
1415 Louisiana Street
Houston, Texas 77002

MBOE, Inc.
915 One Energy Square
Dallas, TX 75026

Chester J. Stuebben
1275 Rock Ave.
Apt # HH5
North Plainfield, NJ 07060

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Daniel MacIsaac
902 Schultz Pl.
Monona, WI 53716

Rubicon Oil & Gas, LLC
508 W. Wall Street
Midland, Texas 79701

CERTIFIED MAILING/NOTICE LIST – Cimarex Energy/Jake
Case No. 15215 – Application [Mailed 9/22/14]

	Pooled Party	USPS Article No.	Date Returned
1.	Isramco Resources, LLC 3452 Lyrac St. Oakton, VA 22124	7008 1300 0001 2834 6948	9/29/14
2.	Mary Shoener 26 Thunderhill Lane Ridgefield, CT 06877	7008 1300 0001 2834 6955	9/29/14
3.	Chester J. Stuebben 1275 Rock Ave., Apt # HH5 North Plainfield, NJ 07060	7008 1300 0001 2834 6962	9/29/14
4.	Alan D. Tuck, Jr. and Evelyn Tuck 2829 Wilfred Reid Cir. Sarasota, FL 34240	7008 1300 0001 2834 6979	9/29/14
5.	Larry Turner 2902 County Road N O Lamesa, TX 79331	7008 1300 0001 2834 6986	9/29/14
6.	Sande Wische 3 Morton Lane Warren, NJ 07059	7008 1300 0001 2834 6993	10/13/14
	Offset Party	USPS Article No.	Date Returned
1.	Chevron USA Inc. 1400 Smith Street Houston, TX 77022	7008 1300 0001 2834 6832	10/3/14
2.	Chevron USA, Inc. P.O. Box 1150 Midland, TX 79702	7010 2780 0002 5895 8817	Returned 10/8/14 - Undeliverable as addressed; no forwarding order on file
3.	HOG Partnership, LP 5950 Cedar Springs Rd. Dallas, TX 75235-6803	7010 2780 0002 5895 8824	10/1/14
4.	Isramco Resources, LLC 3452 Lyrac St. Oakton, VA 22124	7010 2780 0002 5895 8831	9/29/14
5.	Nortex Corporation Attn: Robert Kent 1415 Louisiana Street Houston, Texas 77002	7010 2780 0002 5895 8848	9/30/14
6.	MBOE, Inc. 915 One Energy Square Dallas, TX 75026	7010 2780 0002 5895 8855	Returned 10/8/14 - Unable to Forward
7.	Chester J. Stuebben 1275 Rock Ave. Apt # HH5 North Plainfield, NJ 07060	7010 2780 0002 5895 8862	9/29/14

CERTIFIED MAILING/NOTICE LIST – Cimarex Energy/Jake
Case No. 15215 – Application [Mailed 9/22/14]

8.	Alan D. Tuck, Jr. and Evelyn Tuck 2829 Wilfred Reid Cir. Sarasota, FL 34240	7010 2780 0002 5895 8879	9/29/14
9.	Larry Turner 2902 County Road N O Lamesa, TX 79331	7010 2780 0002 5895 8886	9/29/14
10.	Sande Wische 3 Morton Lane Warren, NJ 07059	7010 2780 0002 5895 8893	9/29/14
11.	Irene McIsaac 3452 Lyrac St. Oakton, VA 22124	7010 2780 0002 5895 8909	9/29/14
12.	Patricia McIsaac 3452 Lyrac St. Oakton, VA 22124	7010 2780 0002 5895 8916	9/29/14
13.	Nancy Redford 141 S. Norton St. Los Angeles, CA 90004	7010 2780 0002 5895 8923	10/2/14
14.	Mary Shoener 26 Thunderhill Lane Ridgefield, CT 06877	7010 2780 0002 5895 8930	9/29/14
15.	Daniel MacIsaac 902 Schultz Pl. Monona, WI 53716	7010 2780 0002 5895 8947	10/3/14
16.	Rubicon Oil & Gas, LLC 508 W. Wall Street Midland, Texas 79701	7010 2780 0002 5895 8954	10/1/14
Notice mailed to Isramco – 10/1/14			
	<i>Pooled:</i> Isramco Resources, LLC Attn: Anthony James 2425 W. Loop S., Ste 810 Houston, TX 77027	7010 2780 0002 5895 8978	10/9/14
	<i>Offset:</i> Isramco Resources, LLC Attn: Anthony James 2425 W. Loop S., Ste 810 Houston, TX 77027	7010 2780 0002 5895 8961	10/9/14

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

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

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

Postmark
Here

SEP 22 2014

Sent To: **Isramco Resources, LLC**
 3452 Lyrac St.
 Oakton, VA 22124

PS Form 3811

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:

Isramco Resources, LLC
 3452 Lyrac St.
 Oakton, VA 22124

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
[Signature]

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

MON 22 SEP 2014 PM

3. Service type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail Signature Confirmation

4. Restricted Delivery (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7008 1300 0001 2834 6948

PS Form 3811, February 2004

Domestic Return Receipt

49295-02-M-1540

UNITED STATES POSTAL SERVICE

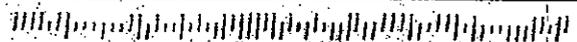


First-Class Mail
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• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 SEP 29 2014



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

For delivery information visit our website at www.usps.com
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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here
SEP 22 2014

Sent To **Mary Shoener**
 Street, Apt. or PO Box **26 Thunderhill Lane**
 City, State **Ridgefield, CT 06877**

SENDER: COMPLETE THIS SECTION

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26 Thunderhill Lane
Ridgefield, CT 06877

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)

2. Article Number (Transfer from service label) **7008 1300 0001 2834 6955**

PS Form 3811, February 2004 Domestic Return Receipt 10255-02-000-1000

UNITED STATES POSTAL SERVICE

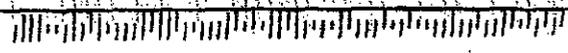


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
SEP 29 2014
 BY: _____



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

OFFICIAL USE

2969 4ER2 1000 00ET 9007

Postage \$		Postmark Here SEP 22 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		

Sent To: **Chester J. Stuebben**
 1275 Rock Ave., Apt # HH5
 North Plainfield, NJ 07060

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received By (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No
1. Article Addressed to: Chester J. Stuebben 1275 Rock Ave., Apt # HH5 North Plainfield, NJ 07060	MON 22 SEP 2014 PM ALBUQUERQUE NM 87101
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
PS Form 3811, February 2004.	7008 1300 0001 2834 6962 Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE
 NO POSTAGE
 25 SEP 2014
 PM 7-1

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 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 SEP 29 2014
 BY _____

7008 1300 0001 2834 6979

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

SEP 22 2014

Postmark Here

Sent To: Alan D. Tuck, Jr. and Evelyn Tuck
 Street, Apt. or PO Box #: 2829 Wilfred Reid Cir.
 City, State, ZIP: Sarasota, FL 34240

PS Form 3811

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 on the front if space permits.

1. Article Addressed to:
 Alan D. Tuck, Jr. and Evelyn Tuck
 2829 Wilfred Reid Cir.
 Sarasota, FL 34240

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Jordan Kessler* Agent Addressee

B. Received by (Printed Name): _____ Date of Delivery: 9-29-14

C. 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.
 Restricted Delivery (Extra Fee) Yes

2. Article Number (Transfer from service label) 7008 1300 0001 2834 6979

UNITED STATES POSTAL SERVICE

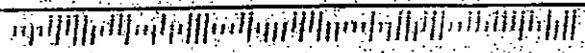


First-Class Mail
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USPS
Permit No. G-10

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Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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SEP 29 2014
BY: _____



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9869 4E92 1000 00ET 9002

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

SEP 22 2014

Postmark
Here

Sent To
 Street, Apt.
 or PO Box
 City, State

Larry Turner
 2902 County Road N O
 Lamesa, TX 79331

PS Form

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:

Larry Turner
 2902 County Road N O
 Lamesa, TX 79331

2. Article Number
 (Transfer from service label)

7008 1300 0001 2834 6986

PS Form 3811, February 2004

Domestic Return Receipt

102591

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Larry Turner* Agent
 Addressee

B. Received by (Printed Name) Date of Delivery
 9-21-14

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

UNITED STATES POSTAL SERVICE
 LUBBOCK TX 794

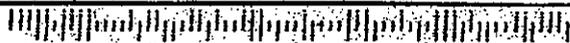
27 SEP 2014 PM 2:1

First-Class Mail
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 USPS
 Permit No. 640

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Jordan Kessler
 Modrall Spering Law Firm
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 Albuquerque, NM 87103-2168

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6994 4892 1000 0001 1300 0001 2834 6993

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

SEP 22 2014

Postmark
Here

Sent To
 Sande Wische
 Street, Apt. or PO Box
 3 Morton Lane
 City, State
 Warren, NJ 07059

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:

Sande Wische
 3 Morton Lane
 Warren, NJ 07059

2. Article Number
 (Transfer from service label):

7008 1300 0001 2834 6993

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Carol Wische*

- 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

MON 22 SEP 2014 PM

- Certified Mail
- Registered
- Insured Mail
- Restricted Delivery (Extra Fee)
- Express Mail
- Return Receipt for Merchandise
- C.O.D.

PS Form 3811, February 2004

Domestic Return Receipt

102505-02-M-1540

UNITED STATES POSTAL SERVICE



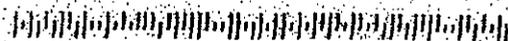
First-Class Mail
 Postage & Fees Paid
 USPS

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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 BY:

03216668



7008 1300 0001 2834 6832

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OFFICIAL USE

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

SEP 22 2014

Postmark
Here

Sent To **Chevron USA Inc.**
1400 Smith Street
Houston, TX 77022

PS Form 3811

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:

Chevron USA Inc.
1400 Smith Street
Houston, TX 77022

2. Article Number
(Transfer from service label)

7008 1300 0001 2834 6832

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Anthony Allen* 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

UNITED STATES POSTAL SERVICE

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Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box. •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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OCT - 3 - 2014



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

CERTIFIED MAIL

7010 2780 0002 5895 8817

US POSTAGE
EPA
211
11D

U.S. Postal Service
CERTIFIED MAILTM RECEIPT
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Postage	\$	SEP 22 2014	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			
Total Postage			

Sent To **Chevron USA Inc.**
P.O. Box 1150
Midland, TX 79702

7010 2780 0002 5895 8817

MODRALL SPERLING
Modrall Sperling Roehl Harris & Sisk, P.A.
P.O. Box 2168
Albuquerque NM 87103-2168

RETURNED TO SENDER
UNDELIVERABLE AS ADDRESSED - NO FORWARDING ORDER ON FILE

Chevron USA Inc.
P.O. Box 1150
Midland, TX 79702

UNDELIVERABLE AS ADDRESSED - NO FORWARDING ORDER ON FILE

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:

Chevron USA Inc.
P.O. Box 1150
Midland, TX 79702

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 e-Postcard

4. Restricted Delivery (Extra Fee) Yes

7010 2780 0002 5895 8817

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OFFICIAL USE

7010 2780 0002 5895 8824

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

SEP 29 2014

Sent To
 Street, Apt. #
 or PO Box No.
 City, State, Z

HOG Partnership, LP
 5950 Cedar Springs Rd.
 Dallas, TX 75235-6803

PS Form 380

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:

HOG Partnership, LP
 5950 Cedar Springs Rd.
 Dallas, TX 75235-6803

2. Article Number
 (Transfer from service label) **7010 2780 0002 5895 8824**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) Agent
 Addressee

C. Date of Delivery

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

RECEIVED
 SEP 29 2014

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

UNITED STATES POSTAL SERVICE
 DALLAS 750
 29 SEP '14
 PM 15 L

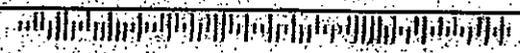


First-Class MailSM
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 USPS
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• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 OCT - 1 2014
 BY: _____



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7010 2780 0002 5895 8831

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

SEP 22 2014

Postmark
Here

Sent To
 Street, Apt. or PO Box
 City, State
 PS Form

Isramco Resources, LLC
 3452 Lyrac St.
 Oakton, VA 22124

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:

Isramco Resources, LLC
 3452 Lyrac St.
 Oakton, VA 22124

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *M. Loe* 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

2. Article Number
 (Transfer from service)

7010 2780 0002 5895 8831

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

SEP 22 2014

PM 5 L

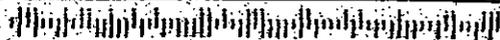


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 Albuquerque, NM 87103-2168

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 SEP 29 2014



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

SEP 22 2014

Postmark
Here

Sent To
 Street, Apt. or PO Box
 City, State
 PS Form 3811

Nortex Corporation
 Attn: Robert Kent
 1415 Louisiana Street
 Houston, Texas 77002

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature x <i>R Taylor</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
	B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to: Nortex Corporation Attn: Robert Kent 1415 Louisiana Street Houston, Texas 77002	D. Is delivery address different from item 1? If YES, enter delivery address below.	<input type="checkbox"/> Yes <input type="checkbox"/> No
	3. Service Type	
	<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
	4. Restricted Delivery (Extra Fee)	<input type="checkbox"/> Yes

2. Article Number (Transfer from service label) **7010 2780 0002 5895 8848**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-44-1540



Postage & Fees Paid
USPS
Permit No. G-10

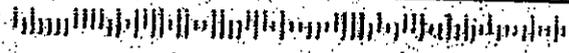
• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED

SEP 30 2014

BY: _____



OF THE RETURN ADDRESS (FOLD AT DOTTED LINE)

CERTIFIED MAIL™

7010 2780 0002 5895 8855

POSTAGE
707418
15708374

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

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

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

SEP 22 2014
Postmark Here

MODRALL SPERLING

Modrall Sperling Roehl Harris & Sisk, P.A.
P.O. Box 2168
Albuquerque NM 87103-2168

RECEIVED
OCT - 6 2014

Sent To **MBOE, Inc.**
915 One Energy Square
Dallas, TX 75026

NIXIE 750262033-1N 09/29/14

**RETURN TO SENDER
UNABLE TO FORWARD
UNABLE TO FORWARD
RETURN TO SENDER**



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:

MBOE, Inc.
915 One Energy Square
Dallas, TX 75026

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: _____
- E. Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery (Extra Fee) Yes No

MON 22 SEP 2014 PM 10:14
ALBUQUERQUE NM 87101

2. Article Number (Transfer from service label) **7010 2780 0002 5895 8855**



7010 2780 0002 5895 8862

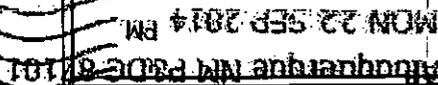
U.S. Postal Service
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OFFICIAL USE

Postage \$		SEP 22 2014	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			
Total Po			

Sent To	Chester J. Stuebben
Street, Ap or PO Box	1275 Rock Ave.
City, State	Apt # HH5 North Plainfield, NJ 07060

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> X <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
	B. Received by (Printed Name)	C. Date of Delivery
	<i>C. Stuebben</i>	<i>9-25-14</i>
	D. Is delivery address different from Item 1? If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No
1. Article Addressed to:		
Chester J. Stuebben 1275 Rock Ave Apt # HH5 North Plainfield, NJ 07060		
	3. Service Type	
	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes
2. Article Number (Transfer from service)	7010 2780 0002 5895 8862	

PS Form 3811, February 2004

Domestic Return Receipt

102585 02-M-1540

UNITED STATES POSTAL SERVICE

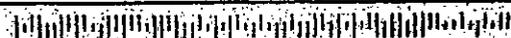


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USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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BY: _____



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7010 2780 0002 5895 8879

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

SEP 22 2014

Postmark
Here

Sent To: Alan D. Tuck, Jr. and Evelyn Tuck
 Street, Apt. or PO Box: 2829 Wilfred Reid Cir.
 City, State: Sarasota, FL 34240

PS Form

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 mail piece or on the front if space permits.

1. Article Addressed to:
 Alan D. Tuck, Jr. and Evelyn Tuck
 2829 Wilfred Reid Cir.
 Sarasota, FL 34240

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Natalie Tuck* Agent Addressee

B. Received by (Printed Name): _____

C. Date of Delivery: *9-25-14*

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

E. Service Type:
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number:
(Transfer from service label)

7010 2780 0002 5895 8879

PS Form 3811, February 2004

Domestic Return Receipt

102596-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 SEP 29 2014
 BY: _____



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

OFFICIAL USE

7010 2780 0002 5895 8886

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

SEP 22 2014

Postmark
Here

Sent To **Larry Turner**
 2902 County Road N O
 Lamesa, TX 79331

PS Form 3811

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
Mr. Larry Turner Agent Addressee

B. Received by (Printed Name) **L. Turner** C. Date of Delivery **9-24-14**

1. Article Addressed to:
 Larry Turner
 2902 County Road N O
 Lamesa, TX 79331

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

MON 22 SEP 2014 PM 10:17
 Albuquerque, NM 87103

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) **7010 2780 0002 5895 8886**

PS Form 3811, February 2004 Domestic Return Receipt 102585-02-M-1540

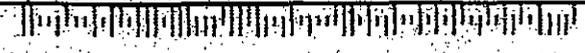
UNITED STATES POSTAL SERVICE
 LAMESA, TX 79331
 25 SEP 2014 PM 2

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. 670

• Sender. Please print your name, address, and ZIP+4 in this box.

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 Modrall Sperling Law Firm
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 Albuquerque, NM 87103-2168

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7010 2780 0002 5895 8893

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

SEP 22 2014

Postmark
Here

Sent To
 Street, Apt. or PO Box
 City, State
Sande Wische
3 Morton Lane
Warren, NJ 07059

PS Form 3811

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:

Sande Wische
 3 Morton Lane
 Warren, NJ 07059

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Sande Wische Agent Addressee

B. Received by (Print name) _____ C. Date of Delivery _____

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

SEP 26 2014

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail G.O.D.
 Restricted Delivery (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7010 2780 0002 5895 8893

PS Form 3811, February 2004

Domestic Return Receipt

325595-02-M-1540

UNITED STATES POSTAL SERVICE

07070

26 SEP '14

PM 10 1



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 USPS
 Permit No. G-10

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7010 2780 0002 5895 8909

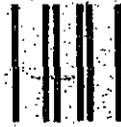
Postage \$		SEP 22 2014 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Paid		
Sent To	Irene McIsaac	
Street, Apt. or PO Box	3452 Lyrac St.	
City, State	Oakton, VA 22124	

PS Form 3890, August 2006

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X <i>McIsaac</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
Irene McIsaac 3452 Lyrac St. Oakton, VA 22124		
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
	3. Service type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7010 2780 0002 5895 8909 MON 22 SEP 2014 PM 10:11 ALBUQUERQUE, NM PERMIT 97101	

PS Form 3811, February 2004 Domestic Return Receipt 102585-02-M-1540

UNITED STATES POSTAL SERVICE
 27 SEP 14
 PM 5 L

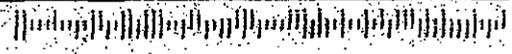


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 USPS
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 Albuquerque, NM 87103-2168

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 BY: _____



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7010 2780 0002 5895 8916

Postage	\$	SEP 22 2014 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To: Patricia McIsaac
 3452 Lyrac St.
 Oakton, VA 22124

Street, Apt. or PO Box
 City, State

PS Form 3811

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 	A. Signature X <i>McIsaac</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: _____ <input type="checkbox"/> No
1. Article Addressed to: Patricia McIsaac 3452 Lyrac St. Oakton, VA 22124	E. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> COD F. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article Number (Transfer from service label)	7010 2780 0002 5895 8916

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

UNITED STATES POSTAL SERVICE

27 SEP '14 PM 5:1

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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7010 2780 0002 5895 8923

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

SEP 22 2014

Postmark Here

Sent To **Nancy Redford**
 Street, Apt or PO Box **141 S. Norton Street**
 City, State **Los Angeles, CA 90004**

PS Form

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:
 Nancy Redford
 141 S. Norton Street
 Los Angeles, CA 90004

2. Article Number (Transfer from service label) **7010 2780 0002 5895 8923**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Addressee
 X *[Signature]* Agent

B. Received by (Printed Name) **PAUL REDFORD** 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

MON 22 SEP 2014 PM 10:17
 Albuquerque, NM 87103

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1

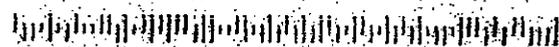
Postage & Fees Paid

USPS Permit No. G-10

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 Modrall Sperlberg Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

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7010 2780 0002 5895 8930

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

SEP 22 2014
Postmark
Here

Sent To **Mary Shoener**
26 Thunderhill Lane
Ridgefield, CT 06877

PS Form 3811, Registered Mail

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 Shoener
26 Thunderhill Lane
Ridgefield, CT 06877

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
[Signature] 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

2. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail S.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7010 2780 0002 5895 8930**

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

UNITED STATES POSTAL SERVICE

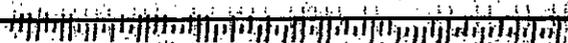


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USPS
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7010 2780 0002 5895 8947

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

SEP 22 2014

Postmark
Here

Sent To **Daniel MacIsaac**
 Street, Ap or PO Box **902 Schultz Pl.**
 City, State **Monona, WI 53716**

PS Form 3811

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 MacIsaac
 902 Schultz Pl.
 Monona, WI 53716

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

9-30-14

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

- Yes
- No

MON 22 SEP 2014 PM 10:10

- 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)

7010 2780 0002 5895 8947

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

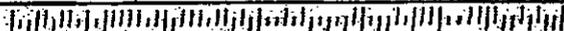
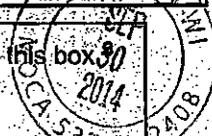


First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. 6104
 ALBUQUERQUE, NM

• Sender: Please print your name, address, and ZIP+4 in this box.

Jordan Kessler
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 P.O. Box 2168
 Albuquerque, NM 87103-2168

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 OCT -3 2014
 BY: *[Signature]*



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7010 2780 0002 5895 8954

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

SEP 22 2014

Postmark
Here

Sent To **Rubicon Oil & Gas, LLC**
 Street, Apt. or PO Box / **508 W. Wall Street**
 City, State / **Midland, Texas 79701**

PS Form 3811

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:

Rubicon Oil & Gas, LLC
 508 W. Wall Street
 Midland, Texas 79701

2. Article Number
 (Transfer from service)

7010 2780 0002 5895 8954

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

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

C. Date of Delivery **SEP 22 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)

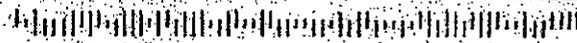
UNITED STATES POSTAL SERVICE / ODESSA TX 797 11
 29 SEP 2014 PM

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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 Modrall Sperling Law Firm
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 Albuquerque, NM 87103-2168

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7010 2780 0002 5895 8978

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

OCT - 1 2014

Postmark
Here

Sent To **Isramco Resources, LLC**
 Attn: Anthony James
 Street, Apt. or PO Box **2425 W. Loop S., Ste 810**
 City, State **Houston, TX 77027**

PS Form 3811 (01/15)

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) QUANG PHAM C. Date of Delivery 10/6/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Isramco Resources, LLC Attn: Anthony James 2425 W. Loop S., Ste 810 Houston, TX 77027</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7010 2780 0002 5895 8978</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102585-02-M-1540</p>	

UNITED STATES POSTAL SERVICE

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

OCT - 1 2014

Postmark
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Sent To **Isramco Resources, LLC**
 Attn: Anthony James
 2425 W. Loop S., Ste 810
 Houston, TX 77027

PS Form 3811

7010 2780 0002 5895 8961

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:

Isramco Resources, LLC
 Attn: Anthony James
 2425 W. Loop S., Ste 810
 Houston, TX 77027

2. Article Number
 (Transfer from service label)

7010 2780 0002 5895 8961

COMPLETE THIS SECTION ON DELIVERY

A. Signature X <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) QUANG PHAM	C. Date of Delivery 10/6/14
D. Is delivery address different from item 1? If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

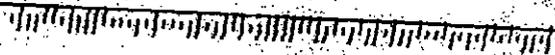


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 Albuquerque, NM 87103-2168

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OCT - 8 2014
 BY: *[Signature]*



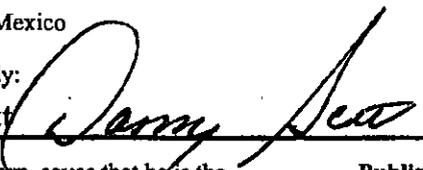
Affidavit of Publication

No. 23199

State of New Mexico

County of Eddy:

Danny Scott



being duly sworn, says that he is the Publisher

of the Artesia Daily Press, a daily newspaper of General circulation, published in English at Artesia, said county and state, and that the hereto attached

Legal Notice

was published in a regular and entire issue of the said Artesia Daily Press, a daily newspaper duly qualified for that purpose within the meaning of Chapter 167 of the 1937 Session Laws of the state of New Mexico for 1 Consecutive weeks/day on the same

day as follows:

First Publication	<u>October 2, 2014</u>
Second Publication	
Third Publication	
Fourth Publication	
Fifth Publication	
Sixth Publication	

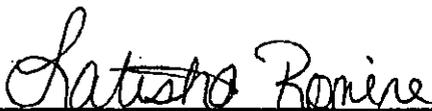
Subscribed and sworn before me this

2nd day of October 2014



OFFICIAL SEAL
Latisha Romine
NOTARY PUBLIC-STATE OF NEW MEXICO

My commission expires: 5/12/2015



Latisha Romine

Notary Public, Eddy County, New Mexico

Copy of Publication:

LEGAL NOTICE

CASE NO. 15215; Notice to all affected parties, heirs and devisees, including Sande Wische, Chevron, USA, HOG Partnership, LP, Nortex Corporation, MBOE, Inc., Nancy Reford, Daniel MacIsaac, and Rubicon Oil and Gas, LLC. Application of Cimarex Energy Company of Colorado for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. Applicant seeks an order from the Division: (1) creating a non-standard 160-acre, more or less, oil spacing and proration unit in the Bone Spring formation, comprised of the W/2 E/2 of Section 36, Township 24 South, Range 26 East, NMPM, Eddy County, New Mexico; and (2) pooling all mineral interests in the Bone Spring formation underlying this proposed non-standard spacing and proration unit. This proposed non-standard spacing and proration unit will be the project area for the Jake 36 State 7H well, to be horizontally drilled. The producing area for this well will be 330 feet from the project area boundary. Also to be considered will be the cost of drilling and completing said well; the allocation of these costs as well as the actual operating costs and charges for supervision, designation of Cimarex as operator of the well; and a 200% charge for risk involved in drilling said well. Said area is located approximately 30 miles South of Carlsbad, New Mexico.

Published in the Artesia Daily Press, Artesia, N.M., October 2, 2014 Legal No. 23199