

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF SAMSON RESOURCES
COMPANY FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.


Case No. 13,596

AFFIDAVIT OF NOTICE

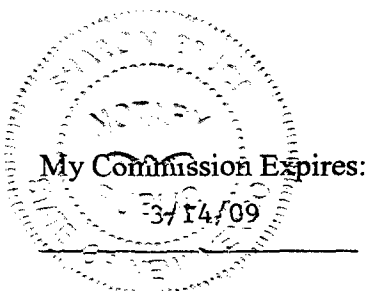
COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)


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

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Samson Resources Company, and have personal knowledge of the matters stated herein.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the proper interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rule 1207.


James Bruce

SUBSCRIBED AND SWORN TO before me this 28th day of November, 2005 by
James Bruce.




Notary Public

OIL CONSERVATION DIVISION
CASE NUMBER
EXHIBIT NUMBER 5

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruce@aql.com

November 4, 2005

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

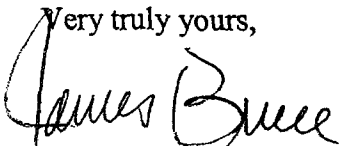
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Samson Resources Company, regarding the S½ of Section 15, Township 20 South, Range 33 East, N.M.P.M., Eddy County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, December 1, 2005, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Friday, November 25, 2005 if you intend to participate in the hearing.

Very truly yours,


James Bruce

Attorney for Samson Resources Company



EXHIBIT A

<u>Working Interest Owner</u>	<u>Working Interest Before Payout</u>	<u>Working Interest After Payout</u>
Samson Resources Company Two West Second Street Tulsa, OK 74103	51.8234%	49.1127%
Desert Rainbow LLC P.O. Box 1837 Roswell, NM 88202	6.1742%	5.2706%
Merit Energy Company Suite 501 13727 Noel Road Dallas, TX 75240	-0-	3.6144%
Pure Resources, LP 500 W. Illinois Midland, TX 79701	0.4261%	0.4261%
Ownership Uncertain: ConocoPhillips Company P.O. Box 2197 Houston, TX 77252 Attention: Linda Hicks Delmar Holdings, LP Suite 801 16607 Blanco Road San Antonio, TX 78232 OBO, Inc. P.O. Box 298 Roswell, NM 88202 Custer & Wright P.O. Box 2334 Midland, TX 79702	4.4484%	4.4484%
A.W. Dugan Suite 3100 1415 Louisiana Street Houston, TX 77002	3.4801%	3.4801%

Edge Petroleum Exploration Company Suite 2000 1301 Travis Houston, TX 77002	15.6250%	15.6250%
Pure Energy Group Inc. Suite 1925 700 N. St. Mary Street San Antonio, TX 78205	7.8125%	7.8125%
Chisos Ltd. 670 Dona Ana Road SW Deming, NM 88030	7.8125%	7.8125%
William W. Saunders 606 Ridgemont San Antonio, TX 78209	2.0709%	2.0709%
Todd M. Wilson 3608 So. County Road 1184 Midland, TX 79701	0.1065%	0.1065%
Roger T. Elliott 3907 Crestgate Midland, TX 79707	0.1065%	0.1065%
Betty F. Hayes c/o Stephen Hayes DHR International, Inc. 5335 Wisconsin Avenue NW Washington, DC 20015	0.0650%	0.0650%
Kelly H. Baxter P.O. Box 1649 Austin, TX 78767	0.0325%	0.0325%
Carol Day 1007 Sylvan Meadows Drive Modesto, CA 95356	0.0108%	0.0108%
Fred T. Newcomb No. 10 15012 Lemoli Drive Gardena, California 90249	0.01083%	0.01083%

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1. Article Addressed to:

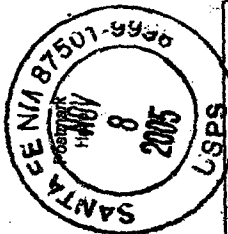
Chicos Ltd.
 670 Dona Ana Road SW
 Deming, NM 88030

2. Article Number (Transfer from service label) **7005 1160 0003 4727 9222**

PS Form 3811, February 2004

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:

William W. Saunders
 606 Ridgemont
 San Antonio, TX 78209

2. Article Number (Transfer from service label) **7005 1160 0003 4727 9239**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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1. Article Addressed to:

Chicos Ltd.
 670 Dona Ana Road SW
 Deming, NM 88030

2. Article Number (Transfer from service label) **7005 1160 0003 4727 9222**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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1. Article Addressed to:

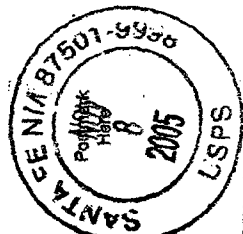
William W. Saunders
 606 Ridgemont
 San Antonio, TX 78209

2. Article Number (Transfer from service label) **7005 1160 0003 4727 9239**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



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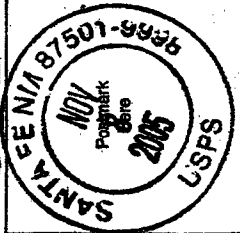
For delivery information visit our website at www.usps.com.

OFFICIAL USE

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

Sent To
Edge Petroleum Exploration Company
Suite 2000
1301 Travis
Houston, TX 77002

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:

Todd M. Wilson
3608 So. County Road 1184
Midland, TX 79701

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7005 1160 0003 4727 9246

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:

Edge Petroleum Exploration Company
Suite 2000
1301 Travis
Houston, TX 77002

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Todd M. Wilson* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Todd M. Wilson* C. Date of Delivery *11/14/05*

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
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7005 1160 0003 4727 8287

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Todd M. Wilson* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Todd M. Wilson* C. Date of Delivery *11/14/05*

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

7005 1160 0003 4727 9246

Domestic Return Receipt

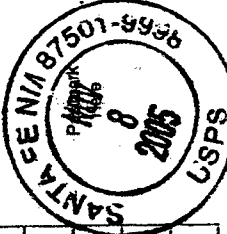
102595-02-M-1540

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



Sent To

Todd M. Wilson
3608 So. County Road 1184
Midland, TX 79701

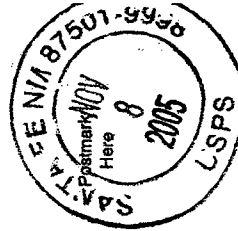
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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Sent To **Roger T. Elliott**
 Street, Apt. No., or PO Box No. **3907 Crestgate**
 City, State, ZIP+4 **Midland, TX 79707**

PS Form 3800, June 2002 See Reverse for Instructions

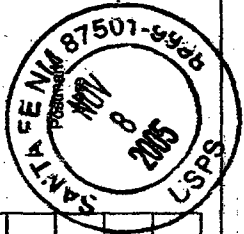
7005 1160 0003 4227 9253

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

Sent To
 Fred T. Newcomb
 No. 10
 15012 Lenoli Drive
 Gardena, California 90249
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4



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:

Fred T. Newcomb
 No. 10
 15012 Lenoli Drive
 Gardena, California 90249

2. Article Number
 (Transfer from service label)

7005 1160 0003 4727 9307

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) Hans W. Schmitt C. Date of Delivery 2/8/05
- 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
 (Transfer from service label)

7005 1160 0003 4727 9307

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:

Desert Rainbow LLC
 P.O. Box 1837
 Roswell, NM 88202

2. Article Number
 (Transfer from service label)

7005 1820 0006 3405 4292

PS Form 3811, February 2004

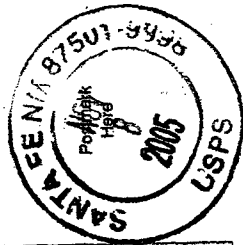
Domestic Return Receipt

102595-02-M-1640

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



Sent To

Desert Rainbow LLC
 P.O. Box 1837
 Roswell, NM 88202
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

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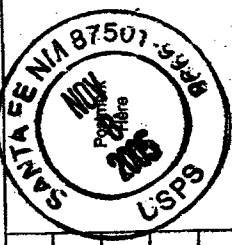
For delivery information visit our website at www.usps.com

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

Sent To
 Merit Energy Company
 Suite 501
 13727 Noel Road
 Dallas, TX 75240
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

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:

Merit Energy Company
 Suite 501
 13727 Noel Road
 Dallas, TX 75240

2. Article Number (Transfer from service label) **7005 1A20 0006 3405 4308**
- PS Form 3811, February 2004 Domestic Return Receipt **S** 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) **John Doe** C. Date of Delivery **Feb 11 2005**
- 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 ☐ No

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:

Pure Resources, LP
 500 W. Illinois
 Midland, TX 79701

2. Article Number (Transfer from service label) **7005 1A20 0006 3405 4315**

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) **John Doe** C. Date of Delivery **Feb 11 2005**
- 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 ☐ No

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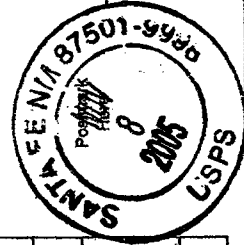
For delivery information visit our website at www.usps.com

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

Sent To
 Pure Resources, LP
 500 W. Illinois
 Midland, TX 79701
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

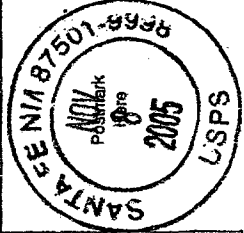


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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	



Sent To	Pure Energy Group Inc.
Street, Apt. No., or PO Box No.	Suite 1925 700 N. St. Mary Street
City, State, Zip+4	San Antonio, TX 78205

PS Form 3800, June 2001 See Reverse for Instructions

7005 1160 0000 4722 5126

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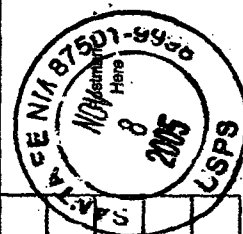
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Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 ConocoPhillips Company
 P.O. Box 2197
 Houston, TX 77252
 Attention: Linda Hicks

PS Form 3800, June 2002 See Reverse for Instructions

2264 504E 9000 028T 5002



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:
 Delmar Holdings, LP
 Suite 801
 16607 Blanco Road
 San Antonio, TX 78232

2. Article Number (Transfer from service label)
 7005 1820 0006 3405 4339

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1840

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X Delmar Holdings* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Delmar Holdings* Date of Delivery *NOV 14 2005*
 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 ☐ No

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:
 ConocoPhillips Company
 P.O. Box 2197
 Houston, TX 77252
 Attention: Linda Hicks

2. Article Number (Transfer from service label)
 7005 1820 0006 3405 4322

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X ConocoPhillips* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *ConocoPhillips* Date of Delivery *NOV 11 2005*
 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 ☐ No

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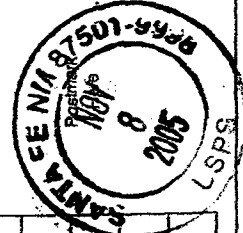
OFFICIAL USE

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

Sent To
 Delmar Holdings, LP
 Suite 801
 16607 Blanco Road
 San Antonio, TX 78232

PS Form 3800, June 2002 See Reverse for Instructions

2264 504E 9000 028T 5002



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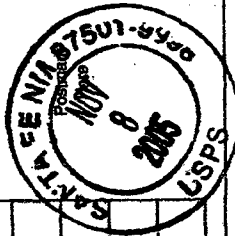
For delivery information visit our website at www.usps.com.

OFFICIAL USE

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

Sent To

OBO, Inc.
 P.O. Box 298
 Roswell, NM 88202
 City, State, ZIP+4



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:

OBO, Inc.
 P.O. Box 298
 Roswell, NM 88202

2. Article Number
(Transfer from service label)

7005 1820 0006 3405 4346

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:

Clutter & Wright
 P.O. Box 2334
 Midland, TX 79702

2. Article Number
(Transfer from service label)

7005 1820 0006 3405 4353

PS Form 3811, February 2004

Domestic Return Receipt

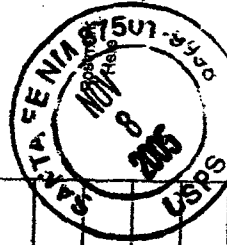
102595-02-M-1640

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



Sent To

Clutter & Wright
 P.O. Box 2334
 Midland, TX 79702
 City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

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

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

OFFICIAL USE

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

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

A.W. Dugan
 Suite 3100
 1415 Louisiana Street
 Houston, TX 77002

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:

Kelly H. Baxter
 P.O. Box 1649
 Austin, TX 78767

2. Article Number
 (Transfer from service label)

PS Form 3811, February 2004

7005 1160 0003 4727 9277

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:

A.W. Dugan
 Suite 3100
 1415 Louisiana Street
 Houston, TX 77002

2. Article Number
 (Transfer from service label)

PS Form 3811, February 2004

7005 1820 0006 3405 4360

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) A.W. Dugan C. Date of Delivery 11-14-05
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

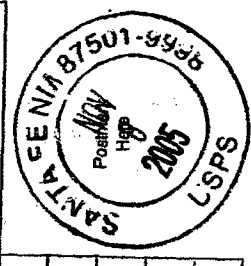
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

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OFFICIAL USE

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



Sent To

Kelly H. Baxter
 P.O. Box 1649
 Austin, TX 78767

PS Form 3800, June 2002

See Reverse for Instructions

2226 2224 E000 0911 5002

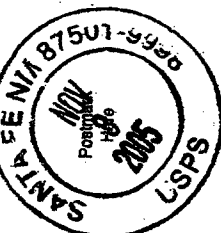
U.S. Postal ServiceTM

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 \$	

Sent To

Carol Day
1007 Sylvan Meadows Drive
Modesto, CA 95356
City, State, ZIP+4

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:

Carol Day
1007 Sylvan Meadows Drive
Modesto, CA 95356

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) 7005 1160 0003 4727 9284

PS Form 3811, February 2004 Domestic Return Receipt

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:

Betty F. Hayes
c/o Stephen Hayes
DHR International, Inc.
5335 Wisconsin Avenue NW
Washington, DC 20015

2. Article Number (Transfer from service label) 7005 1160 0003 4727 9260

PS Form 3811, February 2004 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) Carol Day C. Date of Delivery NOV 18 2005

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

If YES, enter delivery address below:

NOV 18 2005

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) 7005 1160 0003 4727 9284

PS Form 3800, June 2002 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery NOV 18 2005

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 (Transfer from service label) 7005 1160 0003 4727 9260

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM

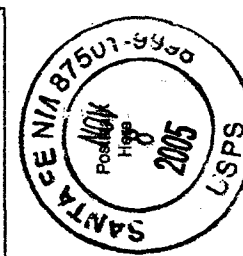
CERTIFIED MAILTM RECEIPT

(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 \$	



Sent To

Betty F. Hayes
c/o Stephen Hayes
DHR International, Inc.
5335 Wisconsin Avenue NW
Washington, DC 20015

2. Article Number (Transfer from service label) 7005 1160 0003 4727 9260

PS Form 3800, June 2002 See Reverse for Instructions