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

APPLICATION OF COG OPERATING LLC FOR A NON-STANDARD SPACING AND PRORATION UNIT AND COMPULSORY POOLING, LEA COUNTY, NEW MEXICO.

CASE NO. 15568

AFFIDAVIT

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

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

Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 26th day of October 2016 by Michael H. Feldewert.

OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 10/14/19

Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 7
Submitted by:
COG OPERATING LLC
Hearing Date: October 27, 2016

COG – NELSON FED COM 13H WELL

POOLED PARTIES (AS OF 9/26/2016):

Working Interests Owners:

ARD OIL LTD
224 W. 4TH STREET, PH 5
FORT WORTH, TX 76102

Overriding Royalty Interest Owners:

CARA LYN GANT
230 W. MORTON AVE.
PHOENIX, AZ 85021

ESTATE OF JOSEPHINE T. HUDSON
616 TEXAS STREET
FORT WORTH, TX 76102

IVERSON FAMILY OIL & GAS LLC
3530 EAST 31ST STREET, SUITE B
TULSA, OK 74135

LAURA HOVER PARKES
1344 ROSSMOYNE AVE.
GLENDALE, CA 91207

LINDY'S LIVING TRUST
4200 S. HULEN, STE. 302
FORT WORTH, TX 76109

P.I.P. 1990 TRUST
P.O. BOX 10508
MIDLAND, TX 79702

SIEGFRIED JAMES IVERSON TRUST
P.O. BOX 10508
MIDLAND, TX 79702

CLAIRE ANN IVERSON REVOCABLE LIVING TRUST
P.O. BOX 10508
MIDLAND, TX 79702

ROBERT ILES
2115 E. DUNBAR
TEMPE, AZ 85282

T.I.G. PROPERTIES LP
P.O. BOX 10508
MIDLAND, TX 79702

ZORRO PARTNERS LTD
616 TEXAS STREET
FORT WORTH, TX 76102

Record Title Owners:
LINN ENERGY HOLDINGS LLC
600 TRAVIS STREET, STE. 5100
HOUSTON, TX 77002

MW IVERSON TRUST
P.O. BOX 2546
FORT WORTH, TX 76113

DELMAR HUDSON LEWIS
616 TEXAS STREET
FORT WORTH, TX 76102

EDWARD R. HUDSON TRUST NO. 4
616 TEXAS STREET
FORT WORTH, TX 76102

DOROTHY C. IVERSON
2417 E. SKELLY DR.
TULSA, OK 74105

JEWELL D. IVERSON
2417 E. SKELLY DR.
TULSA, OK 74105

IVERSON INC.
P.O. BOX 664
HUNTINGTON BEACH, CA 92648

Un-marketable Title Owners:
ATTN: LARRY SCOTT
LYNX PETROLEUM CONSULTANTS INC.
P.O. BOX 1708
HOBBS, NM 88241

ALFRED B. GUINN
1111 SEVENTH STREET
WICHITA FALLS, TX 76301

PATRICIA ANN RUDOLPH GUINN (DECEASED), HEIRS AND DEVISEES
1111 SEVENTH STREET
WICHITA FALLS, TX 76301

LESLIE ANN IVERSON (SHIMAZAKI)
3592 FELTON ST.
SAN DIEGO, CA 92104

BEVERLY BRANDER IVERSON (MARTELLA)
17287 SKYLINE BLVD, BOX 103
WOODSIDE, CA 94062

PETER BRANDER IVERSON
2002 N VALENCIA AVE
SANTA ANA, CA 92706

BARBARA BRANDER TATE (FORMER SPOUSE)
11 RUE VILLARS
NEWPORT BEACH, CA 92660

MOORE & SHELTON COMPANY LTD.
PREDECESSORS IN INTEREST
HUDSON & HUDSON INC.
616 TEXAS STREET
FORT WORTH, TX 76102

JOHN KNOX HUTCHINGS MOORE, JR.
3723 TARTAN LN
HOUSTON, TX 77025

ANITA G. MOORE DOYLE
3220 69TH STREET B-10
GALVESTON, TX 77551

ANITA M. DOYLE
3220 69TH STREET B-10
GALVESTON, TX 77551

PAUL C. MOORE
3842 OVERBROOK LN
HOUSTON, TX 77027

BARLETT G. MOORE
9519 TEICHMAN RD.
GALVESTON, TX 77554

ANITA G. MOORE, EXECUTRIX
ESTATE OF CHARLES H. MOORE, DECEASED
3220 69TH STREET B-10
GALVESTON, TX 77551

MOORE & SHELTON COMPANY LTD.
P.O. BOX 3070
GALVESTON, TX 77552

MARJORIE IVERSON
P.O. BOX 10508
MIDLAND, TX 79702

1990 MANAGEMENT TRUST
P.O. BOX 10508
MIDLAND, TX 79702

S.J.I. JR 1990 TRUST
P.O. BOX 10508
MIDLAND, TX 79702

PATSY IVERSON PAGE
1155 MUIRLANDS VISTA WAY
LA JOLLA, CA 92037

WENDELL W. IVERSON
P.O. BOX 205
MIDLAND, TX 79702

CLAIRE ANN IVERSON
2005 KIDWELL ST
DALLAS, TX 75214

SIEGFRIED JAMES IVERSON III
P.O. BOX 10508
MIDLAND, TX 79702

W.W.I. 1990 TRUST
P.O. BOX 10508
MIDLAND, TX 79702

SIEGFRIED JAMES IVERSON III REVOCABLE LIVING TRUST
P.O. BOX 10508
MIDLAND, TX 79702

PAMELA J. BURKE
3800 KNIFFEN DR.
MIDLAND, TX 79705

OFFSETS

Occidental Permian, LP
Attn: Permian Basin Land Manager
5 Greenway Plaza, Suite 110
Houston, TX 77210-4294

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

Devon Energy Production LP
Attn: Meg Muhlinghause

333 W. Sheridan Avenue
Oklahoma City, OK 73102

McCombs Energy Ltd.
5599 San Felipe, Suite 1500
Houston, TX 77056-2974

Sandra O'Brien
P.O. Box 1743
Midland, TX 79702

Jafar Salehi, Dick Rogers Holland &
George Michael O'Brien, Trustees
George H. O'Brien Trust
P.O. Box 1743
Midland, TX 79702

Pear Resources
P.O. Box 11044
Midland, TX 79702

Fuel Products Inc.
P.O. Box 3098
Midland, TX 79702

Marcus Wayne Luna
P.O. Box 1889
Midland, TX 79702

ARD Oil Ltd
Attn: Julian Ard
224 W. 4th Street, PH 5
Fort Worth, TX 76102

Lynx Petroleum Consultants
Attn: Larry Scott
P.O. Box 1708
Hobbs, NM 88241

HOLLAND&HART LLP

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

October 7, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.
Nelson Federal Com 13H Well

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on October 27, 2016. The hearing will be held in Porter Hall in 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 19.15.4.13.B to file a Pre-hearing Statement four business 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 James Martin, at (432) 685-2590 or JMartin1@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

HOLLAND&HART LLP

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

October 7, 2016

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

Re: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico. Nelson Federal Com 13H Well

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application,* but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

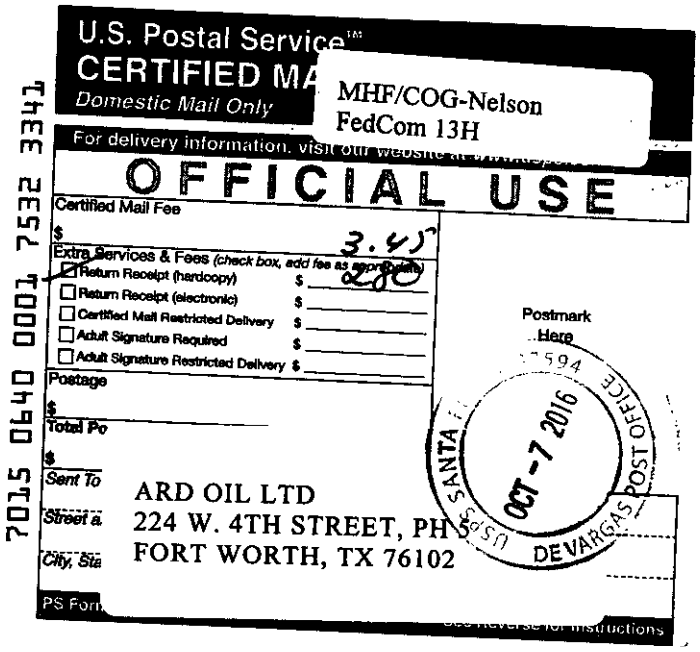
This application has been set for hearing before a Division Examiner at 8:15 AM on October 27, 2016. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, 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 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four business 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 James Martin, at (432) 685-2590 or JMartin1@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC



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FedCom 13H

For delivery information, visit our website at

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Po
$

Sent To
ARD OIL LTD

Street a
224 W. 4TH STREET, PH 5

City, Sta
FORT WORTH, TX 76102

PS Form

Postmark Here

SANTA FE 87594 OCT - 7 2016 DEVARGAS POST OFFICE

7015 0640 0001 7532 3341

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3.
- 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:

ARD OIL LTD
224 W. 4TH STREET, PH 5
FORT WORTH, TX 76102

9590 9401 0129 5225 0130 05

2. Article Number (*Transfer from service label*)
7015 0640 0001 7532 3341

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Bonnie Stockton ☐ Agent ☐ Addressee

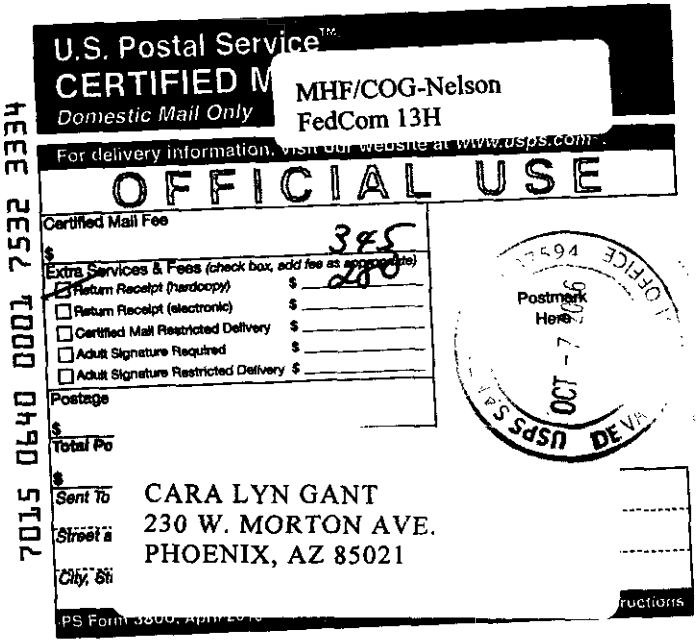
B. Received by (*Printed Name*) Bonnie Stockton C. Date of Delivery 10/12/16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☑ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Mail
Mail Restricted Delivery
00)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt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For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
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Adult Signature Required $
Adult Signature Restricted Delivery $
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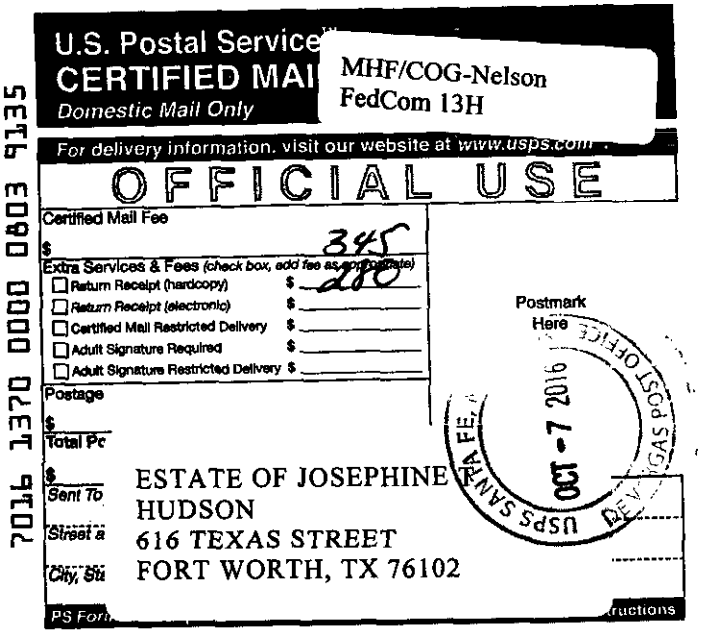
Sent To
Street a
City, St
CARA LYN GANT
230 W. MORTON AVE.
PHOENIX, AZ 85021
Postmark Here
OCT - 7
USPS
7015 0640 0001 7532 3334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FedCom 13H
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OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
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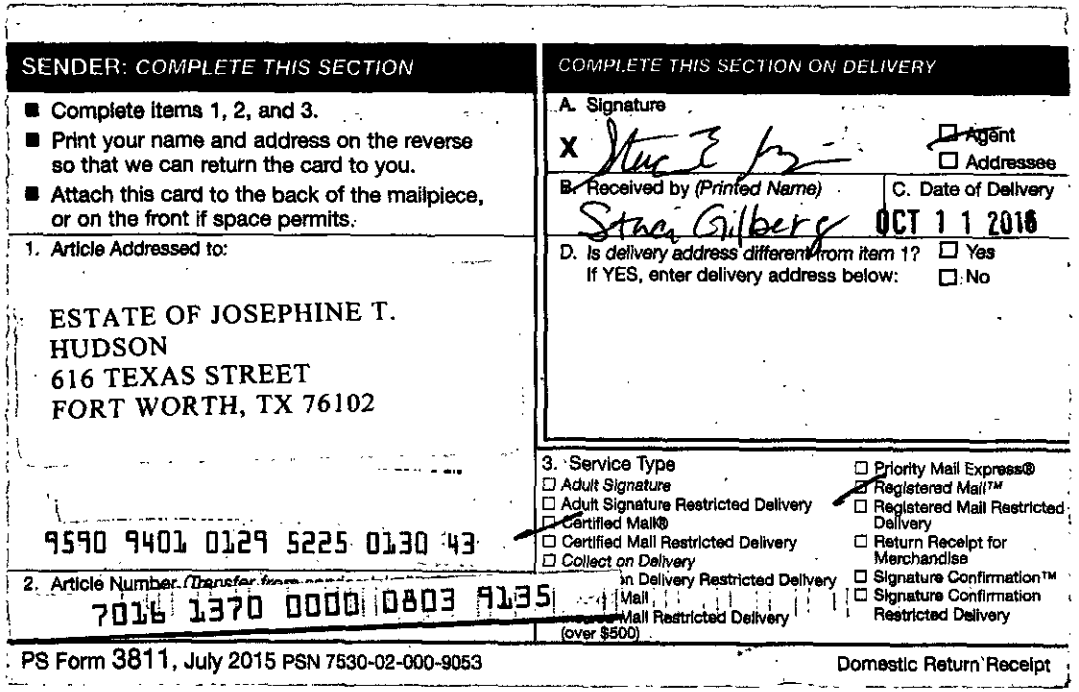
Sent To
Street a
City, St
ESTATE OF JOSEPHINE
HUDSON
616 TEXAS STREET
FORT WORTH, TX 76102
Postmark Here
OCT - 7 2016
USPS
7016 1370 0000 0803 9135


SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3.
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:
ESTATE OF JOSEPHINE T.
HUDSON
616 TEXAS STREET
FORT WORTH, TX 76102
9590 9401 0129 5225 0130 43
2. Article Number (Transfer from
7016 1370 0000 0803 9135
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
Agent
Addressee
B. Received by (Printed Name)
Stacy Gilberg
C. Date of Delivery
OCT 1 1 2016
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
3. Service Type
Adult Signature
Adult Signature Restricted Delivery
Certified Mail®
Certified Mail Restricted Delivery
Collect on Delivery
Delivery Restricted Delivery
Mail
Mail Restricted Delivery
(over $500)
Priority Mail Express®
Registered Mail™
Registered Mail Restricted Delivery
Return Receipt for Merchandise
Signature Confirmation™
Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053
Domestic Return Receipt

7016 1370 0000 0803 9142

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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MHF/COG-Nelson
FedCom 13H

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Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 280
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postmark Here

OCT - 2016 USPS DE... POST OFFICE

Postage
$
Total Pos...
$
Sent To
Street and...
City, State

IVERSON FAMILY OIL & GAS
LLC
3530 EAST 31ST STREET, SUITE
B
TULSA, OK 74135

PS Form ... See reverse for instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

IVERSON FAMILY OIL & GAS
LLC
3530 EAST 31ST STREET, SUITE
B
TULSA, OK 74135

9590 9401 0129 5225 0130 50

2. Article Number (Transfer from service label)

7016 1370 0000 0803 9142

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
If YES, enter delivery address below: ☐ No

SHERIDAN STATION TULSA OK OCT 08 2016 74135-9998

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- Mail Restricted Delivery (0)
- ☐ Priority Mail Express®
- ☑ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 — Domestic Return Receipt

7016 1370 0000 0803 9159

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 280
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postmark Here

USPS SANTA FE, NM ... OCT - 7 2016 DE VARGAS POST OFFICE

Postage
$
Total Post...
$
Sent To
Street and...
City, State

LAURA HOVER PARKE...
1344 ROSSMOYNE AVE.
GLENDALE, CA 91207

PS Form 3800, April 2015 PSN 7530-02-000-9047 See reverse for instructions

7016 1370 0000 0803 9166

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Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

2.80

Postage
$
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$
Sent To
Street a
City, St

Postmark Here
OCT - 7 2016
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

LINDY'S LIVING TRUST
4200 S. HULEN, STE. 302
FORT WORTH, TX 76109

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 1370 0000 0803 9173

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CERTIFIED M
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FedCom 13H

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OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
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2.80

Postage
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City, St

Postmark Here
OCT - 7 2016
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

P.I.P. 1990 TRUST
P.O. BOX 10508
MIDLAND, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 1370 0000 0803 9180

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Certified Mail Fee
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Extra Services & Fees *(check box, add fee as appropriate)*
- ☐ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Post
$

Sent To SIEGFRIED JAMES IVERSON
TRUST
Street and P.O. BOX 10508
City, State, MIDLAND, TX 79702

SANTA FE, NM 87594
OCT - 7 2016
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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 1370 0000 0803 9197

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$ 3.45

Extra Services & Fees *(check box, add fee as appropriate)*
- ☐ Return Receipt (hardcopy) $
- ☑ Return Receipt (electronic) $ 2.80
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

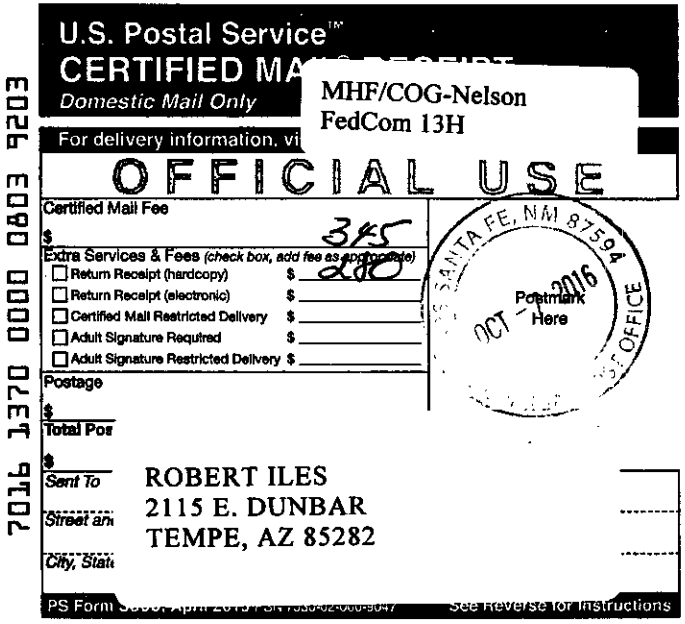
Postage
$

Total Pr
$

Sent To CLAIRE ANN IVERSON
REVOCABLE LIVING TRUST
Street P.O. BOX 10508
City, St MIDLAND, TX 79702

SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

PS Fo ...tructions


U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, vi
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Pos
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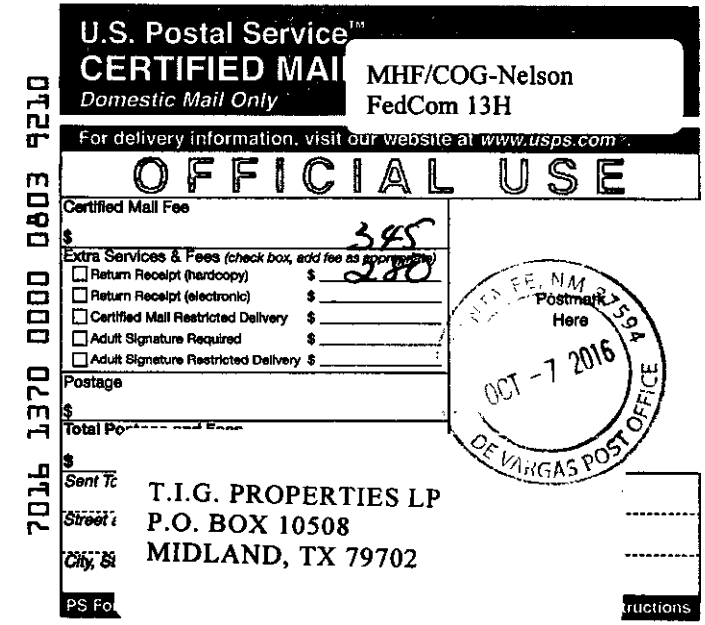
Sent To
Street an
City, Stat
ROBERT ILES
2115 E. DUNBAR
TEMPE, AZ 85282
PS Form
See Reverse for Instructions
SANTA FE, NM 87594
OCT - 2016
Postmark Here
OFFICE
7016 1370 0000 0803 9203


U.S. Postal Service™
CERTIFIED MAI
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
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OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
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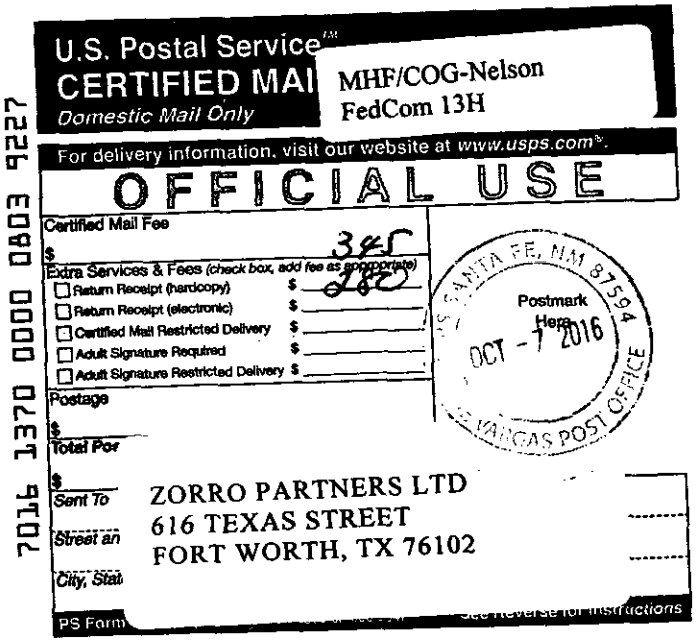
Sent To
Street
City, St
T.I.G. PROPERTIES LP
P.O. BOX 10508
MIDLAND, TX 79702
PS Fo
ructions
NTA FE, NM 87594
Postmark Here
OCT -7 2016
DE VARGAS POST OFFICE
7016 1370 0000 0803 9210



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FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $ 1.80

Postage
$

Total Pos
$

Sent To
Street an
City, Stat

ZORRO PARTNERS LTD
616 TEXAS STREET
FORT WORTH, TX 76102

PS Form

See Reverse for Instructions

U.S. POSTAGE PITNEY BOWES
SANTA FE, NM 87594
OCT - 7 2016
VARGAS POST OFFICE
Postmark Here

7016 1370 0000 0803 9227

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

ZORRO PARTNERS LTD
616 TEXAS STREET
FORT WORTH, TX 76102

9590 9401 0129 5225 0131 28

2. Article Number (Transfer from service label)

7016 1370 0000 0803 9227

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
Staci Gilbert

C. Date of Delivery
OCT 11 2016

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Priority Mail Express®
- ☑ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7016 1370 0000 0803 9234

U.S. Postal Service™
CERTIFIED MAIL®
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $ 2.80

Postage
$

Total
$

Postmark Here
OCT - 7 2016

Sent To
Street
City,

LINN ENERGY HOLDINGS LLC
600 TRAVIS STREET, STE. 5100
HOUSTON, TX 77002

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

LINN ENERGY HOLDINGS LLC
600 TRAVIS STREET, STE. 5100
HOUSTON, TX 77002

9590 9402 1838 6104 7695 84

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9234

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X JUAN VILLANUEVA
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
OCT 11 2016

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 1370 0000 0803 9241

U.S. Postal Service™
CERTIFIED MAIL®
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $ 2.80

Postage
$

Total Postage
$

Postmark Here
OCT 2016

Sent To
Street and
City, State

MW IVERSON TRUST
P.O. BOX 2546
FORT WORTH, TX 76113

PS Form See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MW IVERSON TRUST
P.O. BOX 2546
FORT WORTH, TX 76113

9590 9402 1838 6104 7695 91

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9241

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Norma Eos
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
OCT 12 2016

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

OCT 12 2016

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 1370 0000 0803 9258

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $
Postage
$
Total
$
Ser
Stre
City
Postmark Here
OCT 7 2016
DELMAR HUDSON LEWIS
616 TEXAS STREET
FORT WORTH, TX 76102
PS
See Reverse for Instructions

SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3.
- 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 HUDSON LEWIS
616 TEXAS STREET
FORT WORTH, TX 76102

9590 9402 1838 6104 7696 07

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9258

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Staci Gilberg
C. Date of Delivery OCT 11 2016

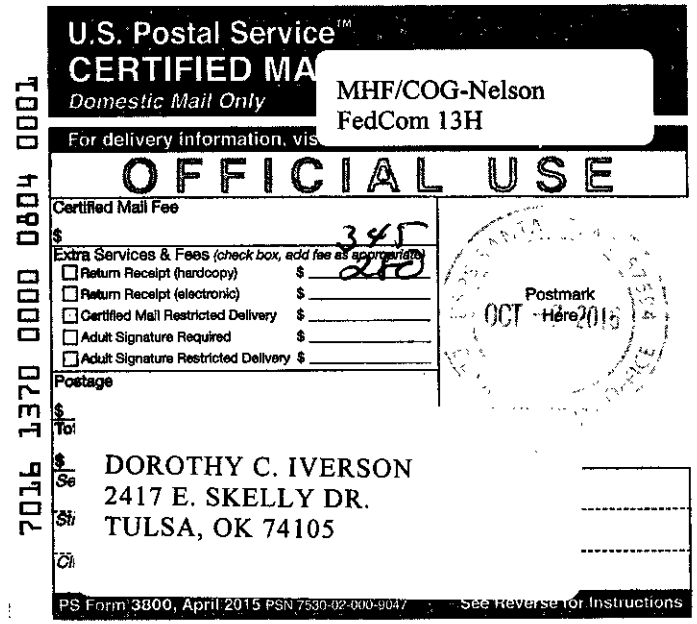
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail
☐ Mail Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☑ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053
Domestic Return Receipt

7016 1370 0000 0803 8732

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $
Postage
$
Total Pc
$
Sent To
Street a
City, Sta
Postmark Here
OCT - 7 2016
EDWARD R. HUDSON TRUST NO. 4
616 TEXAS STREET
FORT WORTH, TX 76102
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, vis
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
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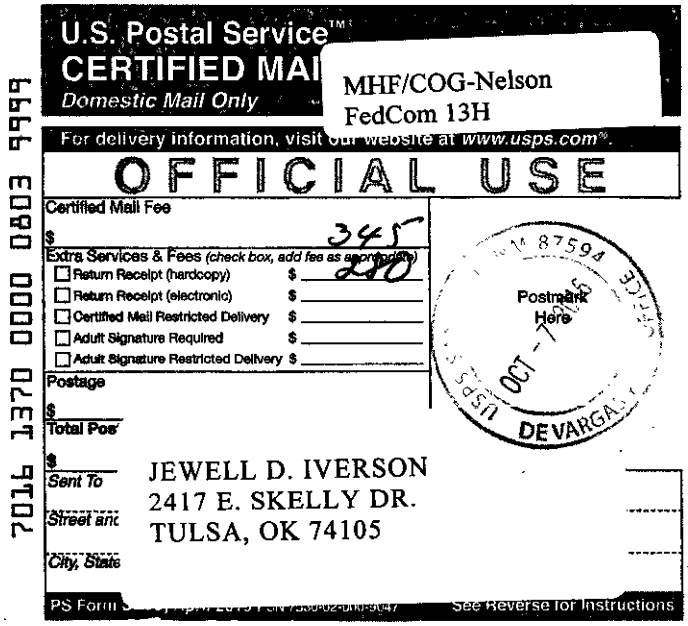
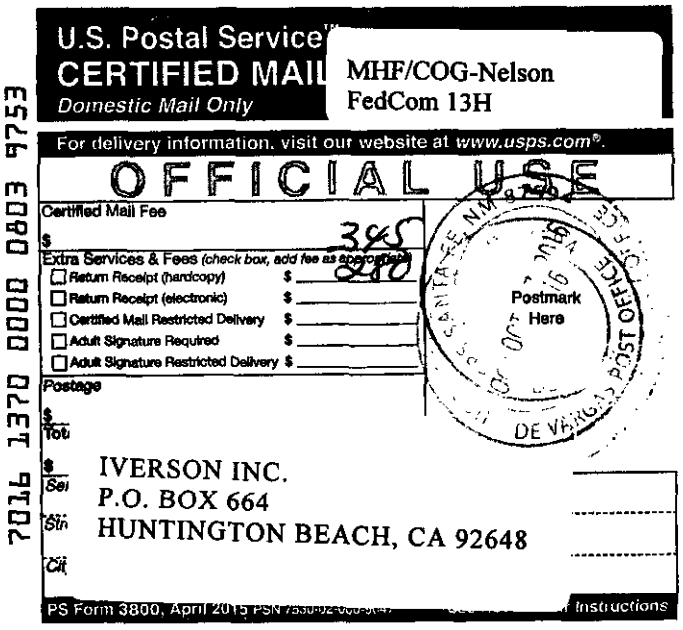
OCT 2015
DOROTHY C. IVERSON
2417 E. SKELLY DR.
TULSA, OK 74105
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7016 1370 0000 0804 0001


U.S. Postal Service™
CERTIFIED MAI
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Pos
$
Sent To
Street and
City, State
Postmark Here
OCT - 7
DE VARGAS
JEWELL D. IVERSON
2417 E. SKELLY DR.
TULSA, OK 74105
See Reverse for Instructions
7016 1370 0000 0803 9999


U.S. Postal Service™
CERTIFIED MAIL
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
2.70
Postage
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Here
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Sei
IVERSON INC.
P.O. BOX 664
Str
HUNTINGTON BEACH, CA 92648
Cit
PS Form 3800, April 2015
Instructions
7016 1370 0000 0803 9753

7016 1370 0000 0803 9746

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $ 2.80

Postage
$

Total Post
$

Sent To
Street and
City, State

ATTN: LARRY SCOTT
LYNX PETROLEUM
CONSULTANTS INC.
P.O. BOX 1708
HOBBS, NM 88241

Postmark Here
OCT - 7 2016
USPS DE VARGAS POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

ATTN: LARRY SCOTT
LYNX PETROLEUM
CONSULTANTS INC.
P.O. BOX 1708
HOBBS, NM 88241

9590 9402 1838 6104 7696 45

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9746

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Mary
☐ Agent
☐ Addressee

B. Received by (Printed Name) Maren Latimer
C. Date of Delivery 10-12-16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 1370 0000 0803 9739

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $ 2.80

Postage
$

Total Postage
$

Sent To
Street and Ap
City, State, Z

ALFRED B. GUINN
1111 SEVENTH STREET
WICHITA FALLS, TX 76301

Postmark Here
OCT - 7 2016
USPS SANTA ... POST OFFICE

PS Form 380 ...ons

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

ALFRED B. GUINN
1111 SEVENTH STREET
WICHITA FALLS, TX 76301

9590 9402 1838 6104 7696 69

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9739

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Mark Welch
☐ Agent
☐ Addressee

B. Received by (Printed Name) Mark Welch
C. Date of Delivery 10-11-16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 1370 0000 0803 9722

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $ 2.80

Postage
$
Total Posta

Postmark Here
ANTA FE, NM 87594
OCT - 7 2016
DE VARGAS POST OFFICE

Sent To
PATRICIA ANN RUDOLPH GUINN
(DECEASED), HEIRS AND DEVISEES
Street and
1111 SEVENTH STREET
City, State,
WICHITA FALLS, TX 76301

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

PATRICIA ANN RUDOLPH GUINN
(DECEASED), HEIRS AND DEVISEES
1111 SEVENTH STREET
WICHITA FALLS, TX 76301

9590 9402 1838 6104 7696 76

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9722

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mark Welch
☐ Agent
☐ Addressee

B. Received by (Printed Name)
Mark Welch

C. Date of Delivery
10-11-16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 0438 7324

U.S. Postal Service™
CERTIFIED MAIL®
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $ 2.80

Postage
$
Total Po

Postmark Here
S87594
OCT - 7 2016
DE VARGAS POST OFFICE

Sent To
LESLIE ANN IVERSON
(SHIMAZAKI)
Street a
3592 FELTON ST.
City, St
SAN DIEGO, CA 92104

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

LESLIE ANN IVERSON
(SHIMAZAKI)
3592 FELTON ST.
SAN DIEGO, CA 92104

9590 9402 1838 6104 7698 81

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7324

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☑ Addressee

B. Received by (Printed Name)
LESLIE I SHIMAZAKI

C. Date of Delivery
10/11/16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 0438 7317

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

For delivery information, visit our website at

OFFICIAL USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ [illegible]
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Total Pos

Sent To
Street and
City, State,

BEVERLY BRANDER IVERSON
(MARTELLA)
17287 SKYLINE BLVD, BOX 103
WOODSIDE, CA 94062

SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 1520 0002 0438 7300

U.S. Postal Service™
CERTIFIED MAI
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ [illegible]
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Total Po

Sent To
Street an
City, Stat

PETER BRANDER IVERSON
2002 N VALENCIA AVE
SANTA ANA, CA 92706

SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

BEVERLY BRANDER IVERSON
(MARTELLA)
17287 SKYLINE BLVD, BOX 103
WOODSIDE, CA 94062

9590 9402 1838 6104 7698 98

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7317

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Marina Khaleel ☐ Agent ☐ Addressee

B. Received by (Printed Name) Marina Khaleel C. Date of Delivery 10/11/16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery 00)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 0438 7287

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

For delivery information, visi

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $ 2.80
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $

Postage
$

Total Pos
$

Sent To BARBARA BRANDER TATE
(FORMER SPOUSE)

Street and 11 RUE VILLARS

City, State NEWPORT BEACH, CA 92660

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

BARBARA BRANDER TATE
(FORMER SPOUSE)
11 RUE VILLARS
NEWPORT BEACH, CA 92660

9590 9402 1838 6104 7699 11

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7287

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Barbara Tate ☐ 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

OCT 11 2016

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Priority Mail Express®
- ☑ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 1520 0002 0438 7270

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $ 2.80
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $

Postage
$

Total MOORE & SHELTON COMPANY
LTD. - PREDECESSORS IN INTEREST

Sent HUDSON & HUDSON INC.

Stree 616 TEXAS STREET

City, FORT WORTH, TX 76102

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MOORE & SHELTON COMPANY
LTD. - PREDECESSORS IN INTEREST
HUDSON & HUDSON INC.
616 TEXAS STREET
FORT WORTH, TX 76102

9590 9402 1838 6104 7699 28

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7270

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
OCT 17 2016

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☑ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 1520 0002 0438 7263

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Total Pos
$
Sent To
Street an
City, Stat

Postmark Here
OCT - 7
DE VARGAS POST OFFICE

JOHN KNOX HUTCHINGS
MOORE, JR.
3723 TARTAN LN
HOUSTON, TX 77025

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 1520 0002 0438 7256

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

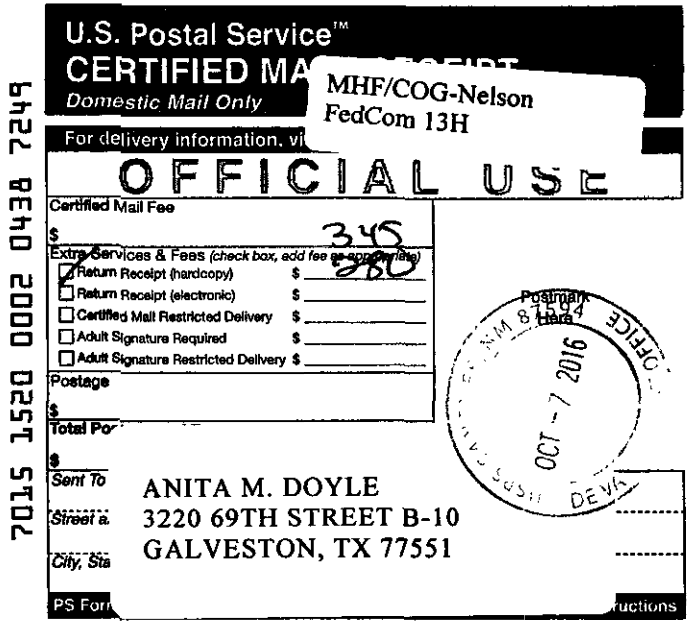
Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

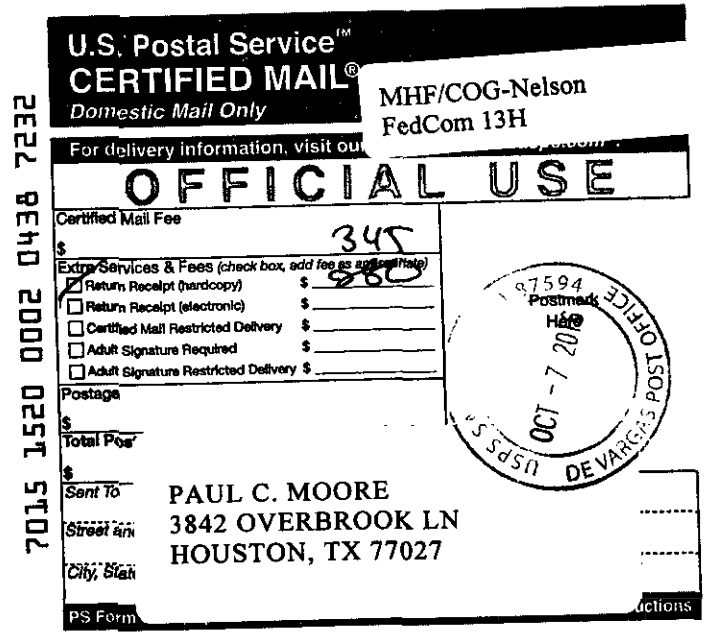
Postage
$
Total Pos
$
Sent To
Street an
City, Stat

Postmark Here
OCT - 7
DE VARGAS POST OFFICE

ANITA G. MOORE DOYLE
3220 69TH STREET B-10
GALVESTON, TX 77551

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions


7015 1520 0002 0438 7249
U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, vi
OFFICIAL USE
Certified Mail Fee
$ 345
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 280
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Po
$
Sent To
Street a
City, Sta
ANITA M. DOYLE
3220 69TH STREET B-10
GALVESTON, TX 77551
Postmark Here
OCT - 7 2016
DE VA
PS For
ructions


7015 1520 0002 0438 7232
U.S. Postal Service™
CERTIFIED MAIL®
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit ou
OFFICIAL USE
Certified Mail Fee
$ 345
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 280
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Pos
$
Sent To
Street an
City, Stat
PAUL C. MOORE
3842 OVERBROOK LN
HOUSTON, TX 77027
87594
Postmark Here
OCT - 7 20
DE VARGAS POST OFFICE
PS Form
uctions

7015 1520 0002 0438 7225

U.S. Postal Service™
CERTIFIED MAIL® RE
Domestic Mail Only
For delivery information, visit

MHF/COG-Nelson
FedCom 13H

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage
$
Total P
$
Sent T
Street
City, St

BARLETT G. MOORE
9519 TEICHMAN RD.
GALVESTON, TX 77554

M 875 Postmark Here
OCT - 7 2016
USPS SAN DE VARGAS POST OFFICE

PS For
See Reverse for Instructions

7015 1520 0002 0438 7119

U.S. Postal Service™
CERTIFIED MAI
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage
$
Total Pc
$
Sent To
Street a
City, St

ANITA G. MOORE, EXECUTRIX
ESTATE OF CHARLES H. MOORE,
DECEASED
3220 69TH STREET B-10
GALVESTON, TX 77551

87594 Postmark Here
OCT - 7 2016
USPS SAN DE VARGAS POST OFFICE

PS For
ructions

7015 1520 0002 0438 7102

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total
$

Sent
Stree
City,

Postmark Here
OCT 10

MOORE & SHELTON COMPANY
LTD.
P.O. BOX 3070
GALVESTON, TX 77552

PS Form 3800, April 2015 PSN 7530-02-000-9047 See reverse for instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

MOORE & SHELTON COMPANY
LTD.
P.O. BOX 3070
GALVESTON, TX 77552

9590 9402 1838 6104 7697 99

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Richard Moore
C. Date of Delivery 10-11-16

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

3070

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 0438 7096

U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only

MHF/COG-Nelson
FedCom 13H

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

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

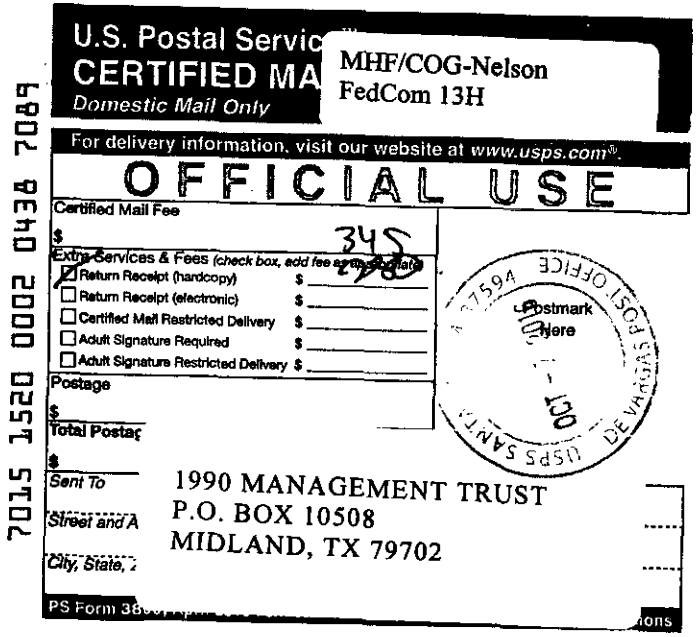
Total Posta
$

Sent To
Street and
City, State,

Postmark Here
OCT 10

MARJORIE IVERSON
P.O. BOX 10508
MIDLAND, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047 See reverse for instructions.


7015 1520 0002 0438 7089
U.S. Postal Servic
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
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City, State, Z
1990 MANAGEMENT TRUST
P.O. BOX 10508
MIDLAND, TX 79702
Postmark Here
OCT
PS Form 38
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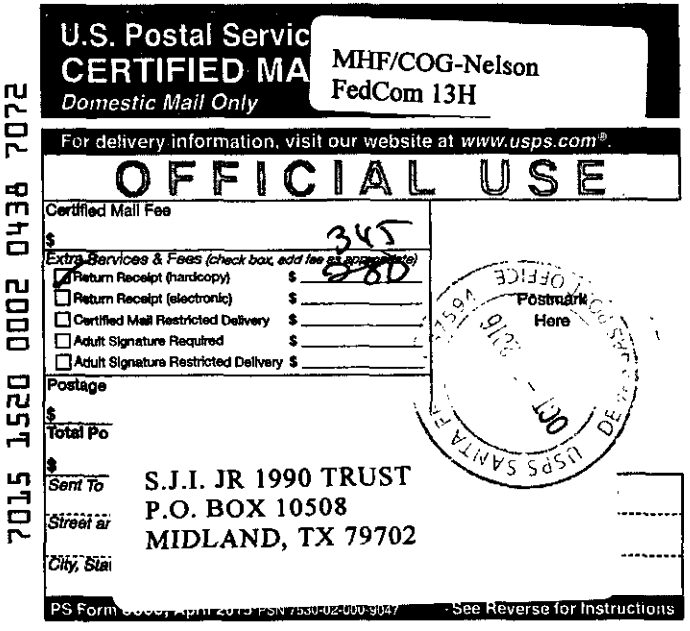
7015 1520 0002 0438 7072
U.S. Postal Servic
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
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Total Po
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Sent To
Street ar
City, Stat
S.J.I. JR 1990 TRUST
P.O. BOX 10508
MIDLAND, TX 79702
Postmark Here
OCT
PS Form
See Reverse for Instructions

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $
Postage
$
Total
$
Sent
Street
City
PATSY IVERSON PAGE
1155 MUIRLANDS VISTA WAY
LA JOLLA, CA 92037
USPS SANTA FE NM 87594 DE VARGAS POST OFFICE
Postmark Here
OCT - 1 2015
PS Form 3800, April 2015
Instructions

7015 1520 0002 0438 7065

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $
Postage
$
Total
$
Sent
Street
City
WENDELL W. IVERSON
P.O. BOX 205
MIDLAND, TX 79702
USPS SANTA FE NM 87594 DE VARGAS POST OFFICE
Postmark Here
OCT - 1 2015
PS Form
See Reverse for Instructions

7015 1520 0002 0438 7058

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

PATSY IVERSON PAGE
1155 MUIRLANDS VISTA WAY
LA JOLLA, CA 92037

9590 9402 1838 6104 7698 36

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7065

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Patsy Page
☐ Agent
☑ Addressee

B. Received by (Printed Name) C. Date of Delivery
10/1/15

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail
☐ Mail Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☑ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 0438 7041

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only
For delivery information,

MHF/COG-Nelson
FedCom 13H

OFFICIAL USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage
$

Total Post
$

Sent To
Street and
City, State,

CLAIRE ANN IVERSON
2005 KIDWELL ST
DALLAS, TX 75214

USPS SANTA FE, NM 87594 DE VARGAS POST OFFICE
Postmark Here
OCT - 7 2015

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

CLAIRE ANN IVERSON
2005 KIDWELL ST
DALLAS, TX 75214

9590 9402 1838 6104 7698 50

2. Article Number (Transfer from service label)
7015 1520 0002 0438 7041

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

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

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

DALLAS TX 752 LAKEWOOD STATION USPS
OCT 12 2015

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Mail Restricted Delivery
00)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☑ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 1520 0002 0438 7034

U.S. Postal Service™
CERTIFIED M
Domestic Mail Only
For delivery information,

MHF/COG-Nelson
FedCom 13H

OFFICIAL USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) $ 2.80
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage
$

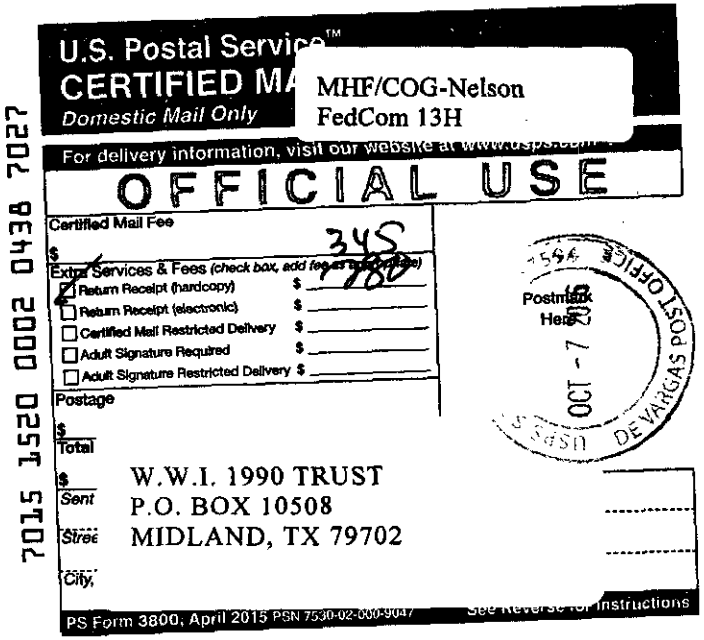
Total P
$

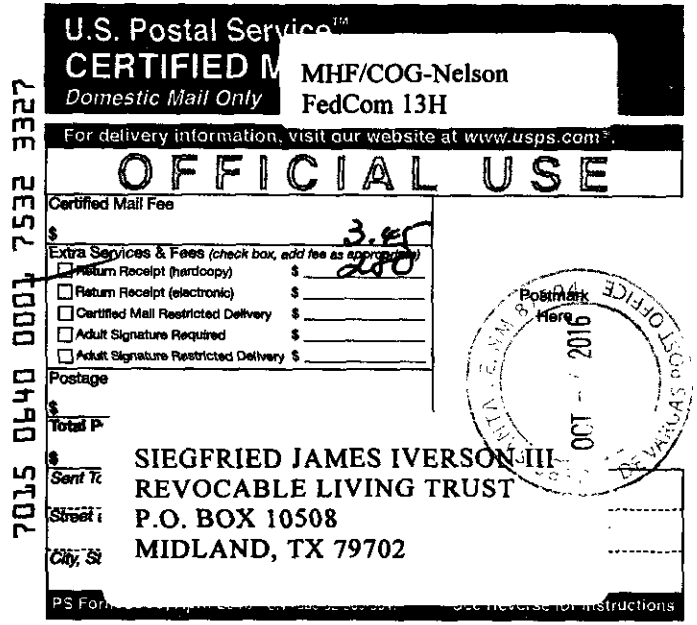
Sent T
Street
City, S

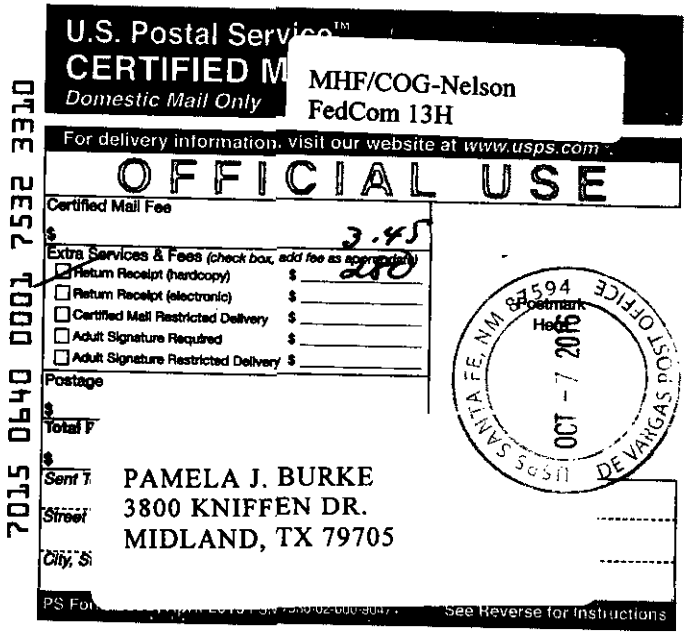
SIEGFRIED JAMES IVERSON III
P.O. BOX 10508
MIDLAND, TX 79702

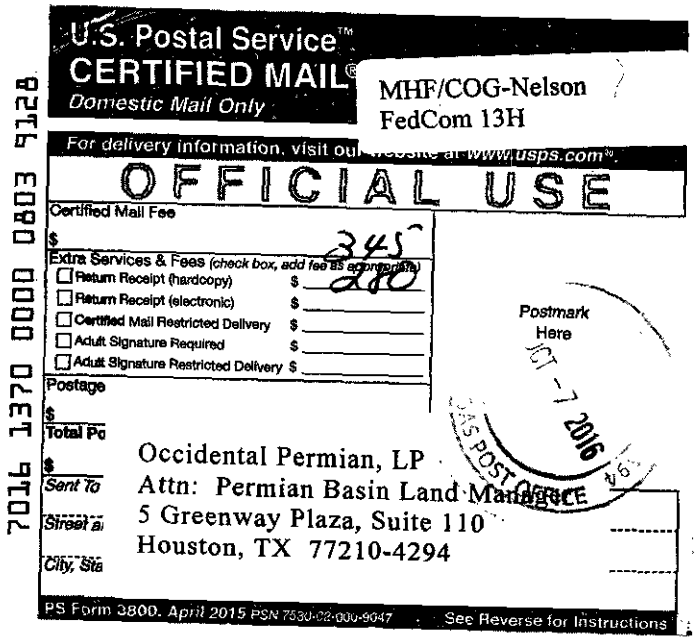
USPS SANTA FE, NM 87594 DE VARGAS POST OFFICE
Postmark Here
OCT - 7 2015

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MA
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total
$
Sent
Stree
City,
W.W.I. 1990 TRUST
P.O. BOX 10508
MIDLAND, TX 79702
Postmark Here
OCT - 7
DE VARGAS POST OFFICE
PS Form 3800, April 2015 PSN 7530-02-000-9047
7015 1520 0002 0438 7027


U.S. Postal Service™
CERTIFIED M
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total P
$
Sent To
Street
City, St
SIEGFRIED JAMES IVERSON III
REVOCABLE LIVING TRUST
P.O. BOX 10508
MIDLAND, TX 79702
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE
7015 0640 0001 7532 3327


U.S. Postal Service™
CERTIFIED M
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total P
$
Sent T
Street
City, S
PAMELA J. BURKE
3800 KNIFFEN DR.
MIDLAND, TX 79705
SANTA FE, NM 87594
Postmark
Here
OCT - 7 2015
DE VARGAS POST
See Reverse for Instructions
7015 0640 0001 7532 3310



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Occidental Permian, LP
Attn: Permian Basin Land Manager
5 Greenway Plaza, Suite 110
Houston, TX 77210-4294

9590 9401 0129 5225 0131 59

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9128

COMPLETE THIS SECTION ON DELIVERY

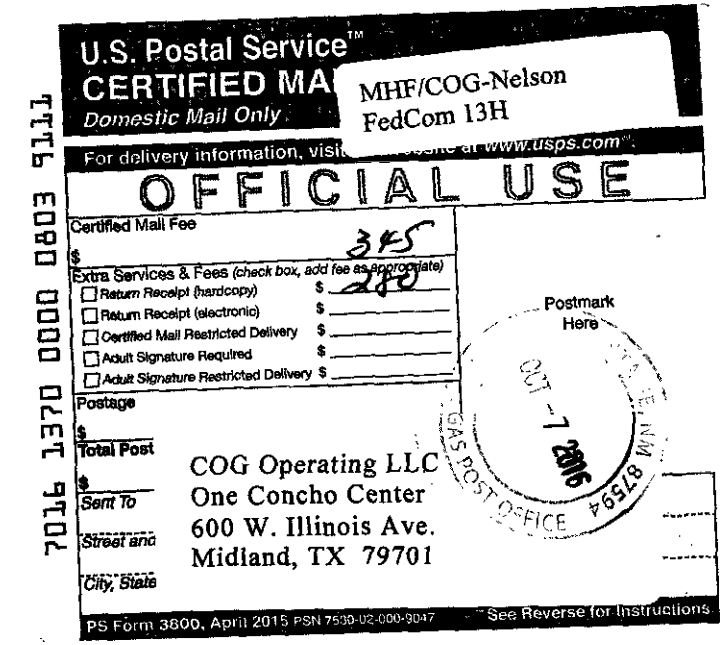
A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail
☐ Mail Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

9590 9401 0129 5225 0131 42

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9111

COMPLETE THIS SECTION ON DELIVERY

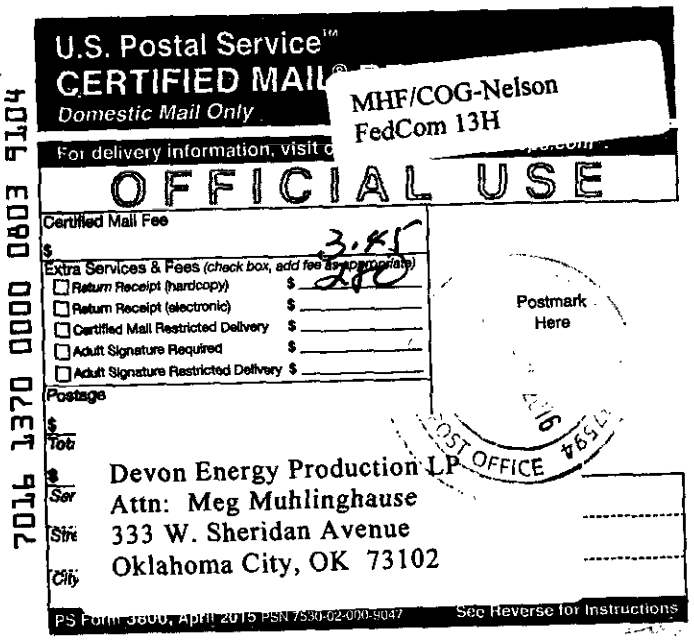
A. Signature
X [signature] ☐ Agent ☐ Addressee

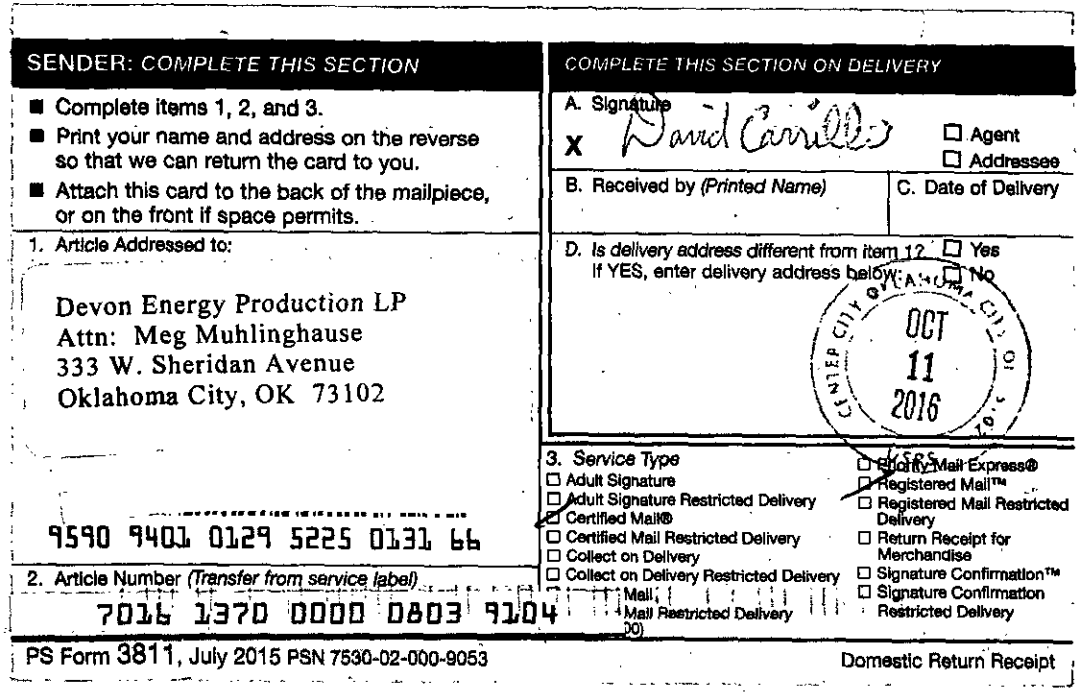
B. Received by (Printed Name) [illegible] C. Date of Delivery 10/11/16

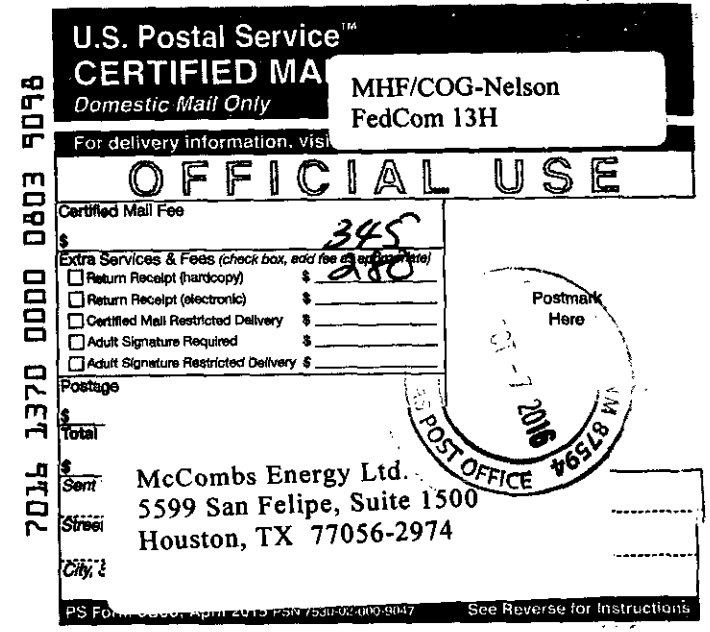
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

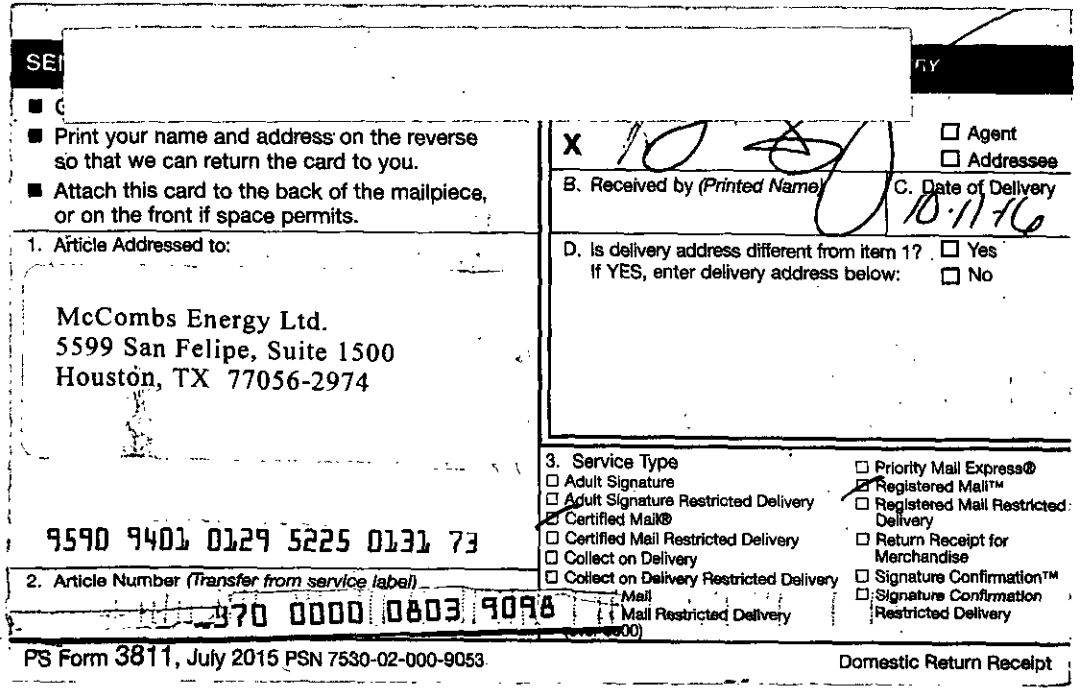
3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail
☐ Mail Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

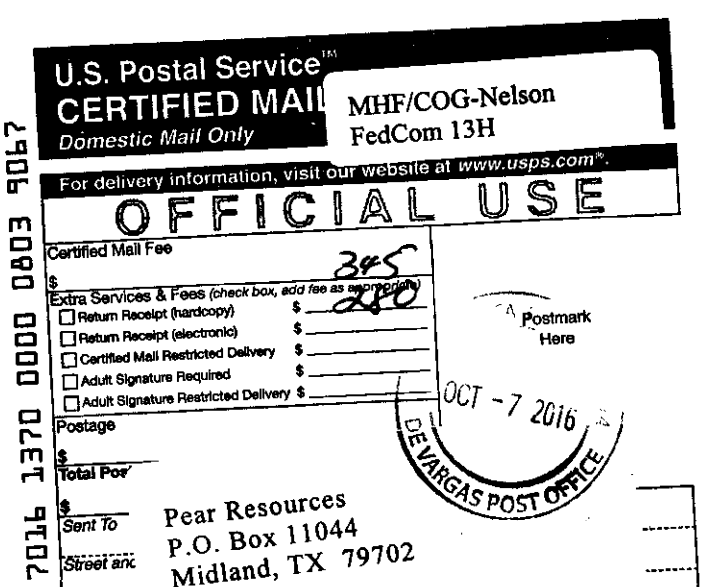
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt


U.S. Postal Service™
CERTIFIED MAIL®
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total
Postmark Here
OCT 11 2016
POST OFFICE 73102
Devon Energy Production LP
Attn: Meg Muhlinghause
333 W. Sheridan Avenue
Oklahoma City, OK 73102
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7016 1370 0000 0803 9104


SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3.
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:
Devon Energy Production LP
Attn: Meg Muhlinghause
333 W. Sheridan Avenue
Oklahoma City, OK 73102
9590 9401 0129 5225 0131 66
2. Article Number (Transfer from service label)
7016 1370 0000 0803 9104
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X David Carrillo
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
OCT 11 2016
3. Service Type
Adult Signature
Adult Signature Restricted Delivery
Certified Mail®
Certified Mail Restricted Delivery
Collect on Delivery
Collect on Delivery Restricted Delivery
Mail
Mail Restricted Delivery
Priority Mail Express®
Registered Mail™
Registered Mail Restricted Delivery
Return Receipt for Merchandise
Signature Confirmation™
Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053
Domestic Return Receipt


U.S. Postal Service™
CERTIFIED MAIL®
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total
Postmark Here
OCT 11 2016
POST OFFICE 87594
McCombs Energy Ltd.
5599 San Felipe, Suite 1500
Houston, TX 77056-2974
See Reverse for Instructions
7016 1370 0000 0803 9098


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:
McCombs Energy Ltd.
5599 San Felipe, Suite 1500
Houston, TX 77056-2974
9590 9401 0129 5225 0131 73
2. Article Number (Transfer from service label)
370 0000 0803 9098
X
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
10-11-16
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
3. Service Type
Adult Signature
Adult Signature Restricted Delivery
Certified Mail®
Certified Mail Restricted Delivery
Collect on Delivery
Collect on Delivery Restricted Delivery
Mail
Mail Restricted Delivery
Priority Mail Express®
Registered Mail™
Registered Mail Restricted Delivery
Return Receipt for Merchandise
Signature Confirmation™
Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053
Domestic Return Receipt


U.S. Postal Service™
CERTIFIED MAIL
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Pos
$
Sent To
Pear Resources
P.O. Box 11044
Midland, TX 79702
Street and
City, State
PS Form
See Reverse for Instructions
Postmark Here
OCT -7 2016
DE VARGAS POST OFFICE
7016 1370 0000 0803 9067


U.S. Postal Service™
CERTIFIED MAIL
Domestic Mail Only
MHF/COG-Nelson
FedCom 13H
For delivery information, visit
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total
$
Sent
Fuel Products Inc.
P.O. Box 3098
Midland, TX 79702
Street
City, S
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
Postmark Here
OCT -7 2016
DE VARGAS POST OFFICE
7015 1520 0002 0438 9151

7016 1370 0000 0803 9050

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, vis

MHF/COG-Nelson
FedCom 13H

OFFIC

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $ 2.80
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $

Postage
$

Total Pos
$

Sent To Marcus Wayne Luna

Street an P.O. Box 1889

City, Stat Midland, TX 79702

Postmark Here
OCT -7 2016
DE VARGAS POST

PS Form April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 1370 0000 0803 9043

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our

MHF/COG-Nelson
FedCom 13H

OFFICIAL USE

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $ 2.80
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $

Postage
$

Total I
$

Sent T ARD Oil Ltd
Attn: Julian Ard

Street 224 W. 4th Street, PH 5

City, S Fort Worth, TX 76102

Postmark Here
OCT -7 2016
USPS SANTA FE DE VARGAS POST

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

ARD Oil Ltd
Attn: Julian Ard
224 W. 4th Street, PH 5
Fort Worth, TX 76102

9590 9401 0129 5225 0132 34

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9043

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Bonnie Stockton ☐ Agent ☐ Addressee

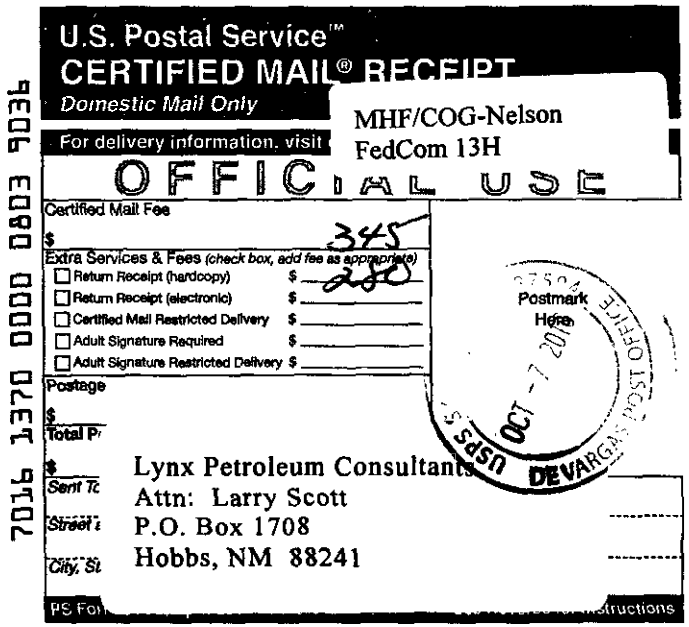
B. Received by (Printed Name) Bonnie Stockton
C. Date of Delivery 10/12/16

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

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☑ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

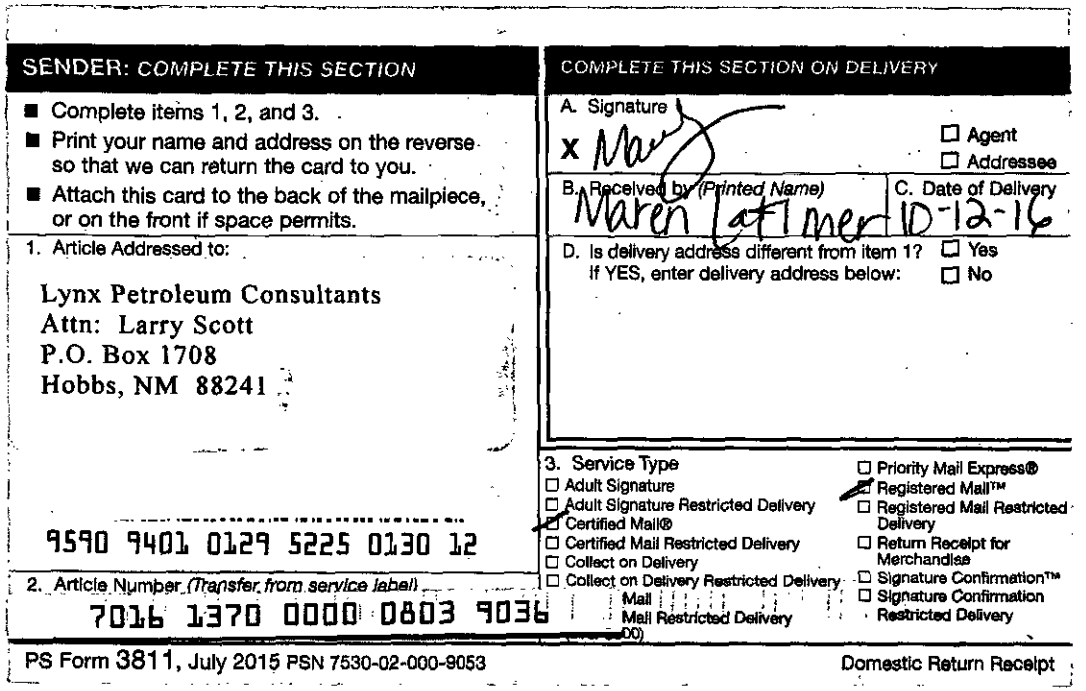
Mail
Mail Restricted Delivery
(0)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit
MHF/COG-Nelson
FedCom 13H
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total P
Postmark Here
OCT - 7 2016
USPS POSTAL SERVICE
DEVARGAS
Sent To
Lynx Petroleum Consultants
Attn: Larry Scott
Street
P.O. Box 1708
City, St
Hobbs, NM 88241
PS Fo
tructions

7016 1370 0000 0803 9036



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Lynx Petroleum Consultants
Attn: Larry Scott
P.O. Box 1708
Hobbs, NM 88241

9590 9401 0129 5225 0130 12

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9036

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Maren Laffmer
☐ Agent
☐ Addressee

B. Received by (Printed Name) Maren Laffmer
C. Date of Delivery 10-12-16

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Mail
☐ Mail Restricted Delivery
00)
☐ Priority Mail Express®
☑ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt