

**MEWBOURNE OIL COMPANY**  
AUTHORIZATION FOR EXPENDITURE

Well Name: Ghostrider 25/36 WODM Fed Com #2H Prospect: Ghostrider  
 Location: SL: 185' FNL & 450' FWL (25); BHL: 330' FSL & 450' FWL (36) County: Eddy ST: NM  
 Sec. 25 Blk:      Survey:      TWP: 23S RNG: 26E Prop. TVD: 8793' TMD: 18650'

INTANGIBLE COSTS 0180		CODE	TCP	CODE	CC
<b>Regulatory Permits &amp; Surveys</b>					
Location / Road / Site / Preparation		0180-0100	\$15,000	0180-0200	
Location / Restoration		0180-0105	\$50,000	0180-0205	\$25,000
Daywork / Turnkey / Footage Drilling 28 days drfg / 4 days comp @ \$18,000/day		0180-0106	\$195,000	0180-0206	\$55,000
Fuel 1500 gal/day @ 1.90/gal		0180-0110	\$536,800	0180-0210	\$76,700
Mud, Chemical & Additives		0180-0114	\$91,200		
Horizontal Drillout Services		0180-0120	\$200,000	0180-0220	
Cementing				0180-0222	\$105,000
Logging & Wireline Services		0180-0125	\$80,000	0180-0225	\$30,000
Casing / Tubing / Snubbing Service		0180-0130	\$2,000	0180-0230	\$404,000
Mud Logging		0180-0134	\$25,000	0180-0234	\$20,000
Stimulation 60 stg 24.4 MM gals X 24.4 MM#		0180-0137	\$25,000		
Stimulation Rentals & Other				0180-0241	\$4,400,000
Water & Other				0180-0242	\$150,000
Bits		0180-0145	\$40,000	0180-0245	\$820,000
Inspection & Repair Services		0180-0148	\$81,000	0180-0248	\$4,000
Misc. Air & Pumping Services		0180-0150	\$40,000	0180-0250	\$5,000
Testing & Flowback Services		0180-0154		0180-0254	\$10,000
Completion / Workover Rig 5 days @ \$3500/day		0180-0158	\$15,000	0180-0258	\$30,000
Rig Mobilization				0180-0260	\$18,500
Transportation		0180-0164	\$160,000		
Welding Services		0180-0165	\$25,000	0180-0265	\$12,000
Contract Services & Supervision		0180-0168	\$5,000	0180-0268	\$5,000
Directional Services Includes vertical control		0180-0170		0180-0270	\$48,000
Equipment Rental		0180-0175	\$218,000		
Well / Lease Legal		0180-0180	\$194,000	0180-0280	\$30,000
Well / Lease Insurance		0180-0184	\$5,000	0180-0284	
Intangible Supplies		0180-0185	\$5,700	0180-0285	
Damages		0180-0188	\$8,000	0180-0288	\$1,000
ROW & Easements		0180-0190	\$25,000	0180-0290	
Pipeline Interconnect		0180-0192		0180-0292	\$65,000
Company Supervision				0180-0293	
Overhead Fixed Rate		0180-0195	\$143,000	0180-0295	\$115,000
Well Abandonment		0180-0196	\$10,000	0180-0296	\$20,000
Contingencies 10% (TCP) 5% (CC)		0180-0198		0180-0298	
		0180-0199	\$219,500	0180-0299	\$322,500
<b>TOTAL</b>			<b>\$2,414,200</b>		<b>\$6,771,700</b>

TANGIBLE COSTS 0181		CODE	TCP	CODE	CC
Casing (19.1" - 30")		0181-0793			
Casing (10.1" - 19.0") 475' - 13 3/8" 54.5# J-55 ST&C @ \$28.51/ft		0181-0794	\$14,500		
Casing (8.1" - 10.0") 1720' - 8 5/8" 40# N-80 LT&C @ \$25.40/ft		0181-0795	\$46,800		
Casing (6.1" - 8.0") 8900' - 7" 29# P-110 LT&C @ \$21.21/ft		0181-0796	\$201,200		
Casing (4.1" - 6.0") 10355' - 4 1/2" 13.5# P-110 BPN @ \$14.21/ft				0181-0797	\$156,800
Tubing (2" - 4")				0181-0798	
Drilling Head		0181-0860	\$30,000		
Tubing Head & Upper Section 10K frac valve & tree				0181-0870	\$45,000
Horizontal Completion Tools				0181-0871	\$30,000
Sucker Rods				0181-0875	
Subsurface Equipment				0181-0880	
Artificial Lift Systems				0181-0884	
Pumping Unit				0181-0885	
Surface Pumps & Prime Movers VRU and SWD pump				0181-0886	\$50,000
Tanks - Oil 3 - 750 steel				0181-0890	\$40,000
Tanks - Water 3 - 750 steel coated				0181-0891	\$45,000
Separation / Treating Equipment 36"x15"x1000# 3ph, 30"x10"x1000# 3 ph, GB				0181-0895	\$50,000
Heater Treaters, Line Heaters 6"x20"x75#				0181-0897	\$15,000
Metering Equipment				0181-0898	\$7,000
Line Pipe & Valves - Gathering 2.5 miles 8" SWD & 1 mile 4 1/2" gas				0181-0900	\$240,000
Fittings / Valves & Accessories				0181-0906	\$60,000
Cathodic Protection				0181-0908	\$6,000
Electrical Installation				0181-0909	\$75,000
Equipment Installation				0181-0910	\$35,000
Pipeline Construction 2.5 miles 8" SWD & 1 mile 4 1/2" gas				0181-0920	\$232,000
<b>TOTAL</b>			<b>\$292,300</b>		<b>\$1,086,800</b>
<b>SUBTOTAL</b>			<b>\$2,706,500</b>		<b>\$7,858,500</b>
<b>TOTAL WELL COST</b>					<b>\$10,565,000</b>

**Extra Expense Insurance**

I elect to be covered by Operator's Extra Expense Insurance and pay my proportionate share of the premium. Operator has secured Extra Expense Insurance covering costs of well control, clean up and redrilling as estimated in Line Item 0180-0185.

I elect to purchase my own well control insurance policy.

If neither box is checked above, non-operating working interest owner elects to be covered by Operator's well control insurance.

Prepared by: R. Terrell Date: 5/2/2017  
 Company Approval: *M. White* Date: 5/2/2017

Joint Owner Interest: \_\_\_\_\_ Amount: \_\_\_\_\_  
 Joint Owner Name: \_\_\_\_\_ Signature: \_\_\_\_\_

EXHIBIT 5

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

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

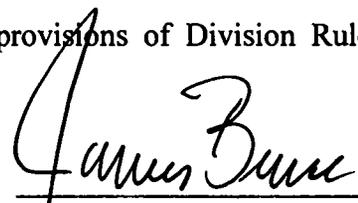
**Case No. 15,767**

**AFFIDAVIT OF NOTICE**

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

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

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

  
\_\_\_\_\_  
James Bruce

SUBSCRIBED AND SWORN TO before me this 18<sup>th</sup> day of July, 2017 by James Bruce.

My Commission Expires:



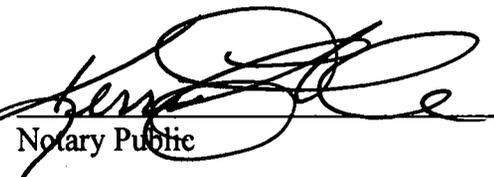
  
\_\_\_\_\_  
Notary Public

EXHIBIT 6

**JAMES BRUCE**  
ATTORNEY AT LAW

POST OFFICE BOX 1056  
SANTA FE, NEW MEXICO 87504

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

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

[jamesbruc@aol.com](mailto:jamesbruc@aol.com)

June 26, 2017

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, *etc.* filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding a Wolfcamp well in the W/2 of Section 25 and the W/2 of Section 36, Township 23 South, Range 26 East, NMPM, Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, July 20, 2017, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, July 13, 2017. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and his or her attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing

Very truly yours,

  
James Bruce

Attorney for Mewbourne Oil Company

ATTACHMENT

**A**

EXHIBIT

A

Black Stone Minerals  
1001 Fannin Street, #2020  
Houston, Texas 77002  
Attn: Mr. Thad Montgomery

FINWING Oil & Gas, L.L.C.  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

S.E.S. Resources, LLC  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

Tiburon Exploration, L.L.C.  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

Logic Energy Holdings, LLC  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

Texas & New Mexico Exploration L.L.C.  
c/o Apache Corporation  
303 Veterans Airpark Lane  
Midland, Texas 79705  
Attn: Mr. Richard E. Dollins

Marathon Oil Company  
POB 3128  
Houston, Texas 77253-3128  
Attn: Mr. Matt D. Brown

Gahr Energy Company  
POB 1889  
Midland, Texas 79702  
Attn: Mr. J. M. Gahr

Magnum Hunter Production Inc.  
600 North Marienfeld, #600  
Midland, Texas 79701  
Attn: Mr. Hayden P. Tresner

F&F Exploration, L.L.C.  
6523 Axton Circle  
Dallas, Texas 75214  
Attn: Mr. Patrick Fulgham

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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.

A. Signature  
 X *AKremehak*  Agent  Addressee

B. Received by (Printed Name) *AKR* C. Date of Delivery *7-3-17*

1. Article Addressed to:

*Black Stone Minerals  
 1001 Famin Street, #2020  
 Houston, Texas 77002  
 Attn: Mr. Thad Montgomery*

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

2. Article Number (Transfer from service label)  
 9590 9402 2691 6351 8823 86

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

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

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**OFFICIAL USE**

7027 0660 0000 6478 7027

Certified Mail Fee \$  
 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 \$

Postmark Here

Postage \$  
 Total Postage and Fees \$  
 Sent To *FINWING Oil & Gas, L.L.C.  
 c/o EGL Resources Inc.  
 POB 10886  
 Midland, Texas 79702  
 Attn: Mr. Mike Newman*  
 Street and Apt. No., or PO Box  
 City, State, ZIP+4®

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

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Certified Mail Fee \$  
 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 \$

Postmark Here

Postage \$  
 Total Postage and Fees \$  
 Sent To *Black Stone Minerals  
 1001 Famin Street, #2020  
 Houston, Texas 77002  
 Attn: Mr. Thad Montgomery*  
 Street and Apt. No., or PO Box  
 City, State, ZIP+4®

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

7017 0660 0000 6478 7034

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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.

A. Signature  
 X *AKremehak*  Agent  Addressee

B. Received by (Printed Name) *AKR* C. Date of Delivery *7/14/17*

1. Article Addressed to:

*FINWING Oil & Gas, L.L.C.  
 c/o EGL Resources Inc.  
 POB 10886  
 Midland, Texas 79702  
 Attn: Mr. Mike Newman*

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

2. Article Number (Transfer from service label)  
 9590 9402 2691 6351 8823 93

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

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

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- 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:

S.E.S. Resources, L.L.C.  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

9590 9402 2691 6351 8824 09

2. Article Number (Transfer from service label)

7017 0660 0000 6478 7010

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

*CHERVIER*

C. Date of Delivery

*7/14/17*

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

(over \$500) Restricted Delivery

Domestic Return Receipt

*MOC G*

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Certified Mail Fee

\$

- 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 \$

Postmark  
Here

Postage

\$

Total Postage and Fee

\$

Sent To

Street and Apt. No., or

City, State, ZIP+4®

Tiburon Exploration, L.L.C.  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7017 0660 0000 6478 7010

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Certified Mail Fee

\$

- 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 \$

Postmark  
Here

Postage

Total Postage and Fee

\$

Sent To

Street and Apt. No., or

City, State, ZIP+4®

S.E.S. Resources, L.L.C.  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

9590 9402 2691 6351 8824 16

2. Article Number (Transfer from service label)

7017 0660 0000 6478 7003

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

**SENDER: COMPLETE THIS SECTION**

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tiburon Exploration, L.L.C.  
c/o EGL Resources Inc.  
POB 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

*CHERVIER*

C. Date of Delivery

*7/14/17*

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

Delivery

(over \$500)

*MOC G*

Domestic Return Receipt

7017 0660 0000 6478 7010

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>C. Perrier</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>C. PERRIER</i></p> <p>C. Date of Delivery  <i>7/14/17</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Logic Energy Holdings, L.L.C.          c/o FGI Resources Inc.          POB 10886          Midland, Texas 79702          Attn: Mr. Mike Newman</p>		<p>3. Service Type</p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	
<p>9590 9402 2691 6351 8824 23</p>		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
<p>2. Article Number (Transfer from service label)</p> <p>7017 0660 0000 6478 6990</p>		<input type="checkbox"/> Restricted Delivery	

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Domestic Mail Only	
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<b>OFFICIAL USE</b>	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$ Postage \$ Total Postage and Fees \$	Postmark Here
Sent To: Texas & New Mexico Exploration L.L.C. c/o Apache Corporation 303 Veterans Airpark Lane Midland, Texas 79705 Attn: Mr. Richard E. Dollins	
Street and Apt. No., or P.O. Box No. _____ City, State, ZIP+4® _____	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

<b>U.S. Postal Service™</b>	
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Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$ Postage \$ Total Postage and Fees \$	Postmark Here
Sent To: Logic Energy Holdings, L.L.C. c/o FGI Resources Inc. POB 10886 Midland, Texas 79702 Attn: Mr. Mike Newman	
Street and Apt. No., or P.O. Box No. _____ City, State, ZIP+4® _____	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>J. Burg</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>J. Burg</i></p> <p>C. Date of Delivery  <i>6-30-17</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Texas &amp; New Mexico Exploration L.L.C.          c/o Apache Corporation          303 Veterans Airpark Lane          Midland, Texas 79705          Attn: Mr. Richard E. Dollins</p>		<p>3. Service Type</p> <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	
<p>9590 9402 2691 6351 8824 30</p>		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
<p>2. Article Number (Transfer from service label)</p> <p>7017 0660 0000 6478 6983</p>		<input type="checkbox"/> Restricted Delivery	

PS Form 3811, July 2015 PSN 7530-02-000-9053 *MOC G* 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:**

Marathon Oil Company  
POB 3128  
Houston, Texas 77253-3128  
Attn: Mr. Matt D. Brown

9590 9402 2691 6351 8824 47

**2. Article Number (Transfer from reverse label)**  
7017 0660 0000 6478 6976

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

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**  
*Craig Blanton*  Agent  
 Addressee

**B. Received by (Printed Name)**  
CRAIG BLANTON

**C. Date of Delivery**

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

- 3. Service Type**
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

(over \$500) Restricted Delivery

*MOC G*

Domestic Return Receipt

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

**Certified Mail Fee**  
\$ \_\_\_\_\_

**Extra Services & Fees (check box, add fee as appropriate)**

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark  
Here

**Postage**  
\$ \_\_\_\_\_

**Total Postage and Fees**  
\$ \_\_\_\_\_

**Sent To** Galv Energy Company  
POB 1889  
Midland, Texas 79702  
Street and Apt. No., or P.O. Box, or Military Address  
Attn: Mr. J. M. Galv

**City, State, ZIP+4®** \_\_\_\_\_

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

7017 0660 0000 6478 6969

**U.S. Postal Service™  
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**OFFICIAL USE**

**Certified Mail Fee**  
\$ \_\_\_\_\_

**Extra Services & Fees (check box, add fee as appropriate)**

<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

Postmark  
Here

**Postage**  
\$ \_\_\_\_\_

**Total Postage and Fees**  
\$ \_\_\_\_\_

**Sent To** Marathon Oil Company  
POB 3128  
Houston, Texas 77253-3128  
Street and Apt. No., or P.O. Box, or Military Address  
Attn: Mr. Matt D. Brown

**City, State, ZIP+4®** \_\_\_\_\_

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:**

Galv Energy Company  
POB 1889  
Midland, Texas 79702  
Attn: Mr. J. M. Galv

9590 9402 2691 6351 8824 54

**2. Article Number (Transfer from reverse label)**  
7017 0660 0000 6478 6969

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

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**  
*Andrea Dell*  Agent  
 Addressee

**B. Received by (Printed Name)**  
Andrea Dell

**C. Date of Delivery**  
7-14-17

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

- 3. Service Type**
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

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

7017 0660 0000 6478 6976

*MOC G*

**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:

Magnum Hunter Production Inc.  
600 North Maricfield, #600  
Midland, Texas 79701  
Attn: Mr. Hayden P. Tresner

9590 9402 2691 6351 8824 61

2. Article Number (Transfer from service label)  
7017 0660 0000 6478 6952

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee

B. Received by (Printed Name) Sodil Garcia C. Date of Delivery 7-5-17

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

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

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$

- 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 \$

Postage \$

Total Postage and Fees \$

Sent To F&F Exploration, LLC  
6523 Axton Circle  
Dallas, Texas 75214

Street and Apt. No., or P.O. Box Attn: Mr. Patrick Fulgham

City, State, ZIP+4®

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

7017 0660 0000 6478 6945

Postmark Here

7017 0660 0000 6478 6952

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**OFFICIAL USE**

Certified Mail Fee \$

- 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 \$

Postage \$

Total Postage and Fees \$

Sent To Magnum Hunter Production Inc.  
600 North Maricfield, #600  
Midland, Texas 79701

Street and Apt. No., or P.O. Box Attn: Mr. Hayden P. Tresner

City, State, ZIP+4®

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

Postmark Here

**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:

F&F Exploration, LLC  
6523 Axton Circle  
Dallas, Texas 75214  
Attn: Mr. Patrick Fulgham

9590 9402 2691 6351 8824 78

2. Article Number (Transfer from service label)  
7017 0660 0000 6478 6945

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature]  Agent  Addressee

B. Received by (Printed Name) Patrick Fulgham C. Date of Delivery 7-1-17

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

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

MOC G

Ghostrider 25/36 WODM #2H  
T23S, R26E, Eddy Co., NM

Mewbourne Oil Company  
500 West Texas, Suite 1020  
Midland, Texas 79701  
Attn: Land Department

Gahr Energy Company  
Post Office Box 1889  
Midland, Texas 79702  
Attn: Mr. J. M. Gahr

Magnum Hunter Production Inc.  
600 North Marienfeld, #600  
Midland, Texas 79701-4405  
Attn: Mr. Hayden P. Tresner

F&F Exploration, LLC  
6523 Axton Circle  
Dallas, Texas 75214  
Attn: Mr. Patrick Fulgham

FINWING Oil & Gas, LLC  
c/o EGL Resources Inc.  
Post Office Box 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

S.E.S. Resources, LLC  
c/o EGL Resources Inc.  
Post Office Box 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

Tiburon Exploration, LLC  
c/o EGL Resources Inc.  
Post Office Box 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman

Logic Energy Holdings, LLC  
c/o EGL Resources Inc.  
Post Office Box 10886  
Midland, Texas 79702  
Attn: Mr. Mike Newman



Ghostrider 25/36 WODM #2H  
T23S, R26E, Eddy Co., NM

Texas & New Mexico Exploration LLC  
c/o Apache Corporation  
2000 Post Oak Blvd., #100  
Houston, Texas 77056-4497

Texas & New Mexico Exploration LLC  
c/o Apache Corporation  
303 Veterans Airpark Lane  
Midland, Texas 79705  
Attn: Mr. Richard E. Dollins

Marathon Oil Company  
Post Office Box 3128  
Houston, Texas 77253-3128  
Attn: Mr. Matt D. Brown

Devon Energy Production Company, LP  
333 West Sheridan Avenue  
Oklahoma City, Oklahoma 73102  
Attn: Ms. Cari J. Allen

Exxon Mobil Corporation  
c/o XTO Energy Inc.  
810 Houston Street  
Fort Worth, Texas 76102  
Attn: Mr. John Rothwell

Chisholm Energy Operating, LLC  
801 Cherry Street  
Fort Worth, Texas 76102

Vanguard Operating, LLC  
5847 San Felipe, #3000  
Houston, Texas 77057

Black Stone Energy Company, L.L.C.  
1001 Fannin Street, #2020  
Houston, Texas 77002-6715  
Attn: Mr. Thad Montgomery, V

RKI Exploration & Production LLC  
3500 One Williams Center  
Tulsa, Oklahoma 74172-0135

Ghostrider 25/36 WODM #2H  
T23S, R26E, Eddy Co., NM

O'Neill Properties Ltd.  
410 West Ohio  
Midland, Texas 79701

EOG A Resources Inc.  
105 South 4th Street  
Artesia, New Mexico 88210-2177

EOG Y Resources Inc.  
105 South 4th Street  
Artesia, New Mexico 88210-2177

EAU Rouge LLC  
Post Office Box 823085  
Dallas, Texas 75382-3085

Vernon E. Faulconer, Inc.  
Post Office Box 7995  
Tyler, Texas 75711

ExxonMobil Oil Corporation  
Post Office Box 4358  
Houston, Texas 77210-4358

J. M. Huber Corporation  
1900 West Loop South, #1600  
Houston, Texas 77027

COG Operating LLC  
600 West Illinois Avenue  
Midland, Texas 79701-4882

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

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

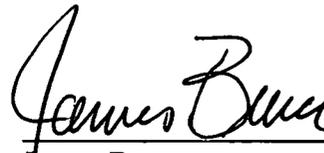
Case No. 15,767

AFFIDAVIT OF NOTICE

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

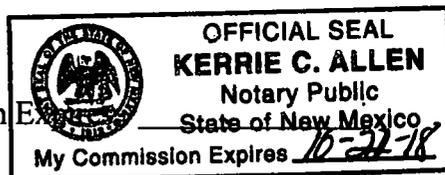
James Bruce, being duly sworn upon his oath, deposes and states:

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

  
\_\_\_\_\_  
James Bruce

SUBSCRIBED AND SWORN TO before me this 18<sup>th</sup> day of July, 2017 by James Bruce.

My Commission Expires



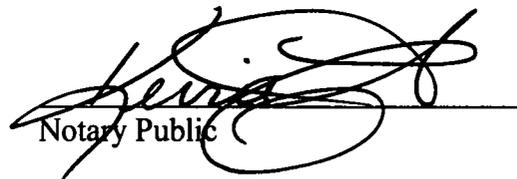
  
\_\_\_\_\_  
Notary Public

EXHIBIT 8

**JAMES BRUCE**  
ATTORNEY AT LAW

POST OFFICE BOX 1056  
SANTA FE, NEW MEXICO 87504

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

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

[jamesbruc@aol.com](mailto:jamesbruc@aol.com)

June 29, 2017

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, *etc.*, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding a Wolfcamp well in the W/2 of Section 25 and W/2 of Section 36, Township 23 South, Range 26 East, NMPM, Eddy County, New Mexico.

The matter is scheduled for hearing at 8:15 a.m. on Thursday, July 20, 2017, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend the hearing, but **as an offset operator or interest owner** who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, July 13, 2017. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and his or her attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing.

Very truly yours,

  
James Bruce

Attorney for Mewbourne Oil Company

ATTACHMENT

**A**

Devon Energy Production Company, LP  
333 West Sheridan Avenue  
Oklahoma City, Oklahoma 73102  
Attn: Ms. Cari J. Allen

Exxon Mobil Corporation  
c/o XTO Energy Inc.  
810 Houston Street  
Fort Worth, Texas 76102  
Attn: Mr. John Rothwell

Chisholm Energy Operating, LLC  
801 Cherry Street  
Fort Worth, Texas 76102

Vanguard Operating, LLC  
5847 San Felipe, #3000  
Houston, Texas 77057

Black Stone Energy Company, L.L.C.  
1001 Fannin Street, #2020  
Houston, Texas 77002-6715  
Attn: Mr. Thad Montgomery, V

RKI Exploration & Production LLC  
3500 One Williams Center  
Tulsa, Oklahoma 74172-0135

O'Neill Properties Ltd.  
410 West Ohio  
Midland, Texas 79701

EOG A Resources Inc.  
EOG Y Resources Inc.  
105 South 4th Street  
Artesia, New Mexico 88210-2177

EAU Rouge LLC  
Post Office Box 823085  
Dallas, Texas 75382-3085



Vernon E. Faulconer, Inc.  
Post Office Box 7995  
Tyler, Texas 75711

J. M. Huber Corporation  
1900 West Loop South, #1600  
Houston, Texas 77027

COG Operating LLC  
600 West Illinois Avenue  
Midland, Texas 79701-4882

**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:**

O'Neill Properties Ltd.  
410 West Ohio  
Midland, Texas 79701

9590 9402 2691 6351 8823 24

**2. Article Number (Transfer from service label).**

7017 0660 0000 6478 7096

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Sammy Barron*  Agent  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery 7-5-17

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

- 3. Service Type**
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Domestic Return Receipt

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Certified Mail Fee \$ \_\_\_\_\_

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 \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Postmark Here

7017 0660 0000 6478 7126

Sent To Vanguard Operating, LLC

Street and Apt. No., or PO Box 5847 San Felipe, #3000

City, State, ZIP+4® Houston, Texas 77057

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

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**OFFICIAL USE**

Certified Mail Fee \$ \_\_\_\_\_

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 \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Total Postage and Fees \$ \_\_\_\_\_

Postmark Here

7017 0660 0000 6478 7096

Sent To O'Neill Properties Ltd.

Street and Apt. No., or PO Box 410 West Ohio

City, State, ZIP+4® Midland, Texas 79701

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:**

Vanguard Operating, LLC  
5847 San Felipe, #3000  
Houston, Texas 77057

9590 9402 2691 6351 8822 94

**2. Article Number (Transfer from service label)**

7017 0660 0000 6478 7126

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee

B. Received by (Printed Name) Veronica Salas C. Date of Delivery 7-5-17

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

- 3. Service Type**
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

(over \$500)

Domestic Return Receipt

MGO

**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:

Vernon E. Faulconer, Inc.  
Post Office Box 7995  
Tyler, Texas 75711

9590 9402 2691 6351 8823 55

2. Article Num

7017 0660 0000 6478 7065

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Ken Charles*

- Agent  
 Addressee

B. Received by (Printed Name)

KAREN CHARLES

C. Date of Delivery

7/6/17

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  
 Priority Mail Express®  
 Registered Mail™  
 Registered Mail Restricted Delivery  
 Return Receipt for Merchandise  
 Signature Confirmation™  
 Signature Confirmation Restricted Delivery

nd Delivery

(over \$500) very

Domestic Return Receipt

MGO

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee

- 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 \$ \_\_\_\_\_

Postmark  
Here

Postage

Total Postage and I

Devon Energy Production Company, LP

Sent To

333 West Sheridan Avenue

Street and Apt. No.,

Oklahoma City, Oklahoma 73102

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7017 0660 0000 6478 7065

**U.S. Postal Service™  
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**OFFICIAL USE**

Certified Mail Fee

- 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 \$ \_\_\_\_\_

Postmark  
Here

Postage

Total Postage and F

Vernon E. Faulconer, Inc.

Sent To

Post Office Box 7995

Street and Apt. No.,

Tyler, Texas 75711

City, State, ZIP+4®

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:

Devon Energy Production Company, LP  
333 West Sheridan Avenue  
Oklahoma City, Oklahoma 73102

9590 9402 2691 6351 8822 63

2.

7017 0660 0000 6478 7065

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*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



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

(over \$500)

restricted Delivery

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

MGO

Domestic Return Receipt

7017 0660 0000 6478 7065

**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:**

RKI Exploration & Production LLC  
 3500 One Williams Center  
 Tulsa, Oklahoma 74172-0135

9590 9402 2691 6351 8823 17

**2. Article Number (transfer from service label)**

7017 0660 0000 6478 7102

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee

B. Received by (Printed Name) *JJ LLC* Date of Delivery *7/31/17*

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

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®

**OFFICIAL USE**

Certified Mail Fee \$  
 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 \$

Postmark Here

Postage \$  
 Total Postage and Fees \$

Sent To *Chisholm Energy Operating, LLC*  
*801 Cherry Street*  
 Street and Apt. No., or PO Fort Worth, Texas 76102  
 City, State, ZIP+4®

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

7017 0660 0000 6478 7133

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Certified Mail Fee \$  
 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 \$

Postmark Here

Postage \$  
 Total Postage and Fees \$

Sent To *RKI Exploration & Production LLC*  
*3500 One Williams Center*  
 Street and Apt. No., o. Tulsa, Oklahoma 74172-0135  
 City, State, ZIP+4®

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

7017 0660 0000 6478 7102

**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:**

Chisholm Energy Operating, LLC  
 801 Cherry Street  
 Fort Worth, Texas 76102

9590 9402 2691 6351 8822 87

**2. Article Number (transfer from service label)**

7017 0660 0000 6478 7133

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee

B. Received by (Printed Name) *OTRishlandas* C. Date of Delivery *7-31-17*

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

*MGD*

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  
600 West Illinois Avenue  
Midland, Texas 79701-4882

9590 9402 2691 6351 8823 79

2. Article Number (Transfer from service label)

7017 0660 0000 6478 7041

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Belany Gillit*  Agent  
 Addressee

B. Received by (Printed Name)  
*Casey Gilbert*

C. Date of Delivery  
 7/11/17

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

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

Domestic Return Receipt

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**OFFICIAL USE**

Certified Mail Fee  
\$

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 \$

Postage  
\$

Total Postage or **EOG A Resources Inc.**  
**EOG Y Resources Inc.**  
 Sent To 105 South 4th Street  
 Street and Apt. # Artesia, New Mexico 88210-2177  
 City, State, ZIP+4®

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

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**OFFICIAL USE**

Certified Mail Fee  
\$

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 \$

Postmark  
Here

Postage  
\$

Total Postage and Fees  
\$

Sent To **COG Operating LLC**  
 600 West Illinois Avenue  
 Street and Apt. No., or P.O. Box  
 Midland, Texas 79701-4882  
 City, State, ZIP+4®

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:

EOG A Resources Inc.  
EOG Y Resources Inc.  
105 South 4th Street  
Artesia, New Mexico 88210-2177

9590 9402 2691 6351 8823 31

2. Article Number (Transfer from service label)

7017 0660 0000 6478 7089

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *[Signature]*  Agent  
 Addressee

B. Received by (Printed Name)  
*[Signature]*

C. Date of Delivery  
 7/11/17

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

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

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:

EAU Rouge LLC  
Post Office Box 823085  
Dallas, Texas 75382-3085

9590 9402 2691 6351 8823 48

2. Article **7017 0660 0000 6478 7072**

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  *Michel A. Sam*  Agent  Addressee

B. Received by (Printed Name) *Michel A. Sam* C. Date of Delivery *6/5/17*

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

3. Service Type
- |   |   |
|---|---|
| <input type="checkbox"/> Adult Signature                            | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery        | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                 | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery         | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                        | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Signature Confirmation Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

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

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Certified Mail Fee \$  
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 \$  
Postage \$  
Total Postage and Fees \$

Sent To Black Stone Energy Company, L.L.C.  
Street and Apt. No., or 1001 Fannin Street, #2020  
City, State, ZIP+4® Houston, Texas 77002-6715

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

7017 0660 0000 6478 7119

**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:

Black Stone Energy Company, L.L.C.  
1001 Fannin Street, #2020  
Houston, Texas 77002-6715

9590 9402 2691 6351 8823 00

2. Article N **7017 0660 0000 6478 7119** Delivery

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  *William Chubb*  Agent  Addressee

B. Received by (Printed Name) *WAC* C. Date of Delivery *7-3-17*

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

3. Service Type
- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                               | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input checked="" type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

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

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Certified Mail Fee \$  
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 \$  
Postage \$  
Total Postage and Fees \$

Sent To EAU Rouge LLC  
Post Office Box 823085  
Street and Apt. No., or Dallas, Texas 75382-3085  
City, State, ZIP+4®

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

7017 0660 0000 6478 7072

MGO

MGO

7017 0660 0000 6478 7058

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$

Postmark  
Here

Total Postage and Fees \$

J. M. Huber Corporation

Sent To 1900 West Loop South, #1600

Street and Apt. No., or P.O. Houston, Texas 77027

City, State, Zip+4\*

7017 0660 0000 6478 7140

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$

Postmark  
Here

Total Postage and Fees \$

Exxon Mobil Corporation

Sent To c/o XTO Energy Inc.

Street and Apt. No., or P.O. 810 Houston Street

City, State, Zip+4\* Fort Worth, Texas 76102