

**BEFORE THE OIL CONSERVATION DIVISION  
EXAMINER HEARING AUGUST 3, 2017**

**CASE No. 15743**

*EK 31 BS2 FEDERAL COM NO. 1H WELL*

**LEA COUNTY, NEW MEXICO**



***McElvain Energy, Inc.***

DISTRICT I  
1625 N. French Dr., Hobbs, NM 88240  
Phone (505) 333-6181 Fax: (505) 333-0720

DISTRICT II  
811 S. First St., Artesia, NM 88210  
Phone (505) 748-1283 Fax: (505) 748-0720

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410  
Phone (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone (505) 476-3450 Fax: (505) 476-3452

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate  
District Office

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

|                                   |                                               |                                      |
|-----------------------------------|-----------------------------------------------|--------------------------------------|
| API Number<br><b>30-025-43884</b> | Pool Code<br><b>21650</b>                     | Pool Name<br><b>EK - Bone Spring</b> |
| Property Code                     | Property Name<br><b>EK 31 BS2 FEDERAL COM</b> | Well Number<br><b>1H</b>             |
| OGRID No.<br><b>22044</b>         | Operator Name<br><b>McELVAIN ENERGY, INC</b>  | Elevation<br><b>3894</b>             |

Surface Location

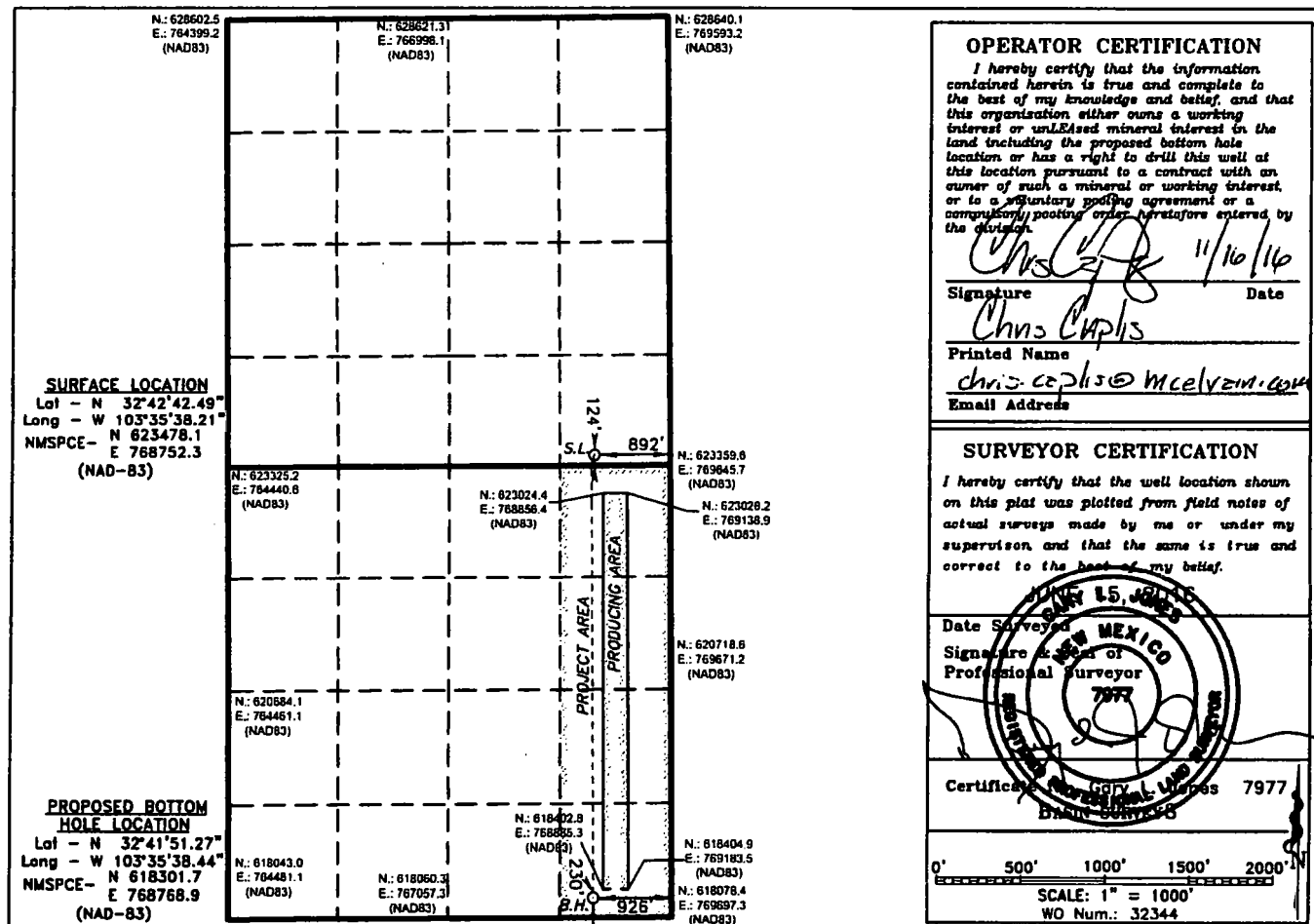
| UL or lot No. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| P             | 30      | 18 S     | 34 E  |         | 124           | SOUTH            | 892           | EAST           | LEA    |

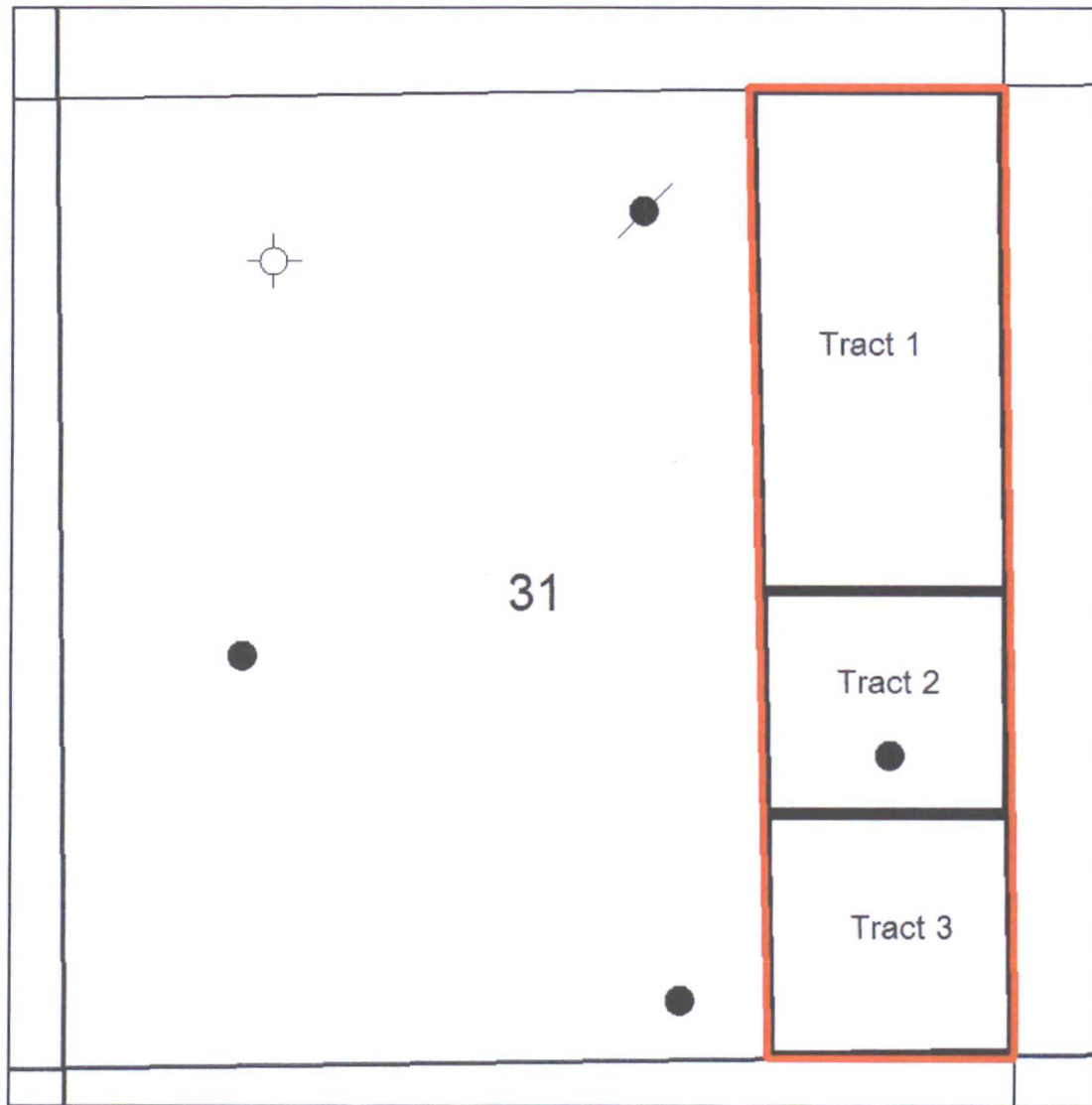
Bottom Hole Location If Different From Surface

| UL or lot No. | Section | Township | Range | Lot Idn | Feet from the | North/South line | Feet from the | East/West line | County |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| P             | 31      | 18 S     | 34 E  |         | 230           | SOUTH            | 926           | EAST           | LEA    |

|                                      |                 |                    |           |
|--------------------------------------|-----------------|--------------------|-----------|
| Dedicated Acres<br><b>160 - E2E2</b> | Joint or Infill | Consolidation Code | Order No. |
|--------------------------------------|-----------------|--------------------|-----------|

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION





| <b>EK 31 BS2 Federal Com #1H</b>                                                                                       |                                 |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------|
|                                                                                                                        |                                 |
| <b>Ownership</b>                                                                                                       | <b>Unit Interest Percentage</b> |
|                                                                                                                        |                                 |
| <b><u>Tract 1: E2NE</u></b>                                                                                            |                                 |
|                                                                                                                        |                                 |
| MAC RESOURCES, LLC<br>1050 17TH STREET, SUITE 2500<br>DENVER, CO 80265                                                 | 5.625000%                       |
|                                                                                                                        |                                 |
| McELVAIN ENERGY FUND 2011, LLC<br>1050 17TH STREET, SUITE 2500<br>DENVER, CO 80265                                     | 4.687500%                       |
|                                                                                                                        |                                 |
| PRIMA EXPLORATION, INC.<br>100 FILLMORE STREET, SUITE 450<br>DENVER, CO 80206                                          | 30.937500%                      |
|                                                                                                                        |                                 |
| MCELVAIN OIL COMPANY, L.P.<br>C/O DAVID P MCELVAIN<br>P O BOX 801888<br>DALLAS TX 75380-1888                           | 2.500000%                       |
|                                                                                                                        |                                 |
| JACQUELIN M WITHERS TR UAD 12/10/92<br>WILLIAM P WITHERS TRUSTEE<br>3429 DEVONSHIRE WAY<br>PALM BEACH GARDENS FL 33418 | 6.250000%                       |
|                                                                                                                        |                                 |
| <b><u>Tract 2: NESE</u></b>                                                                                            |                                 |
|                                                                                                                        |                                 |
| MEWBOURNE OIL COMPANY<br>500 W TEXAS, SUITE 1020<br>MIDLAND TX 79701                                                   | 25.000000%                      |
|                                                                                                                        |                                 |
| <b><u>Tract 3: SESE</u></b>                                                                                            |                                 |
|                                                                                                                        |                                 |
| CHISHOLM ENERGY OPERATING, LLC<br>801 CHERRY STREET, SUITE 1200, UNIT 20<br>FORT WORTH TX 76102                        | 25.000000%                      |
|                                                                                                                        |                                 |
| <b>TOTAL</b>                                                                                                           | <b>100.000000%</b>              |
|                                                                                                                        |                                 |
| <b>Compulsory Pool Parties</b>                                                                                         |                                 |

# McELVAIN ENERGY, INC.

1050 17TH STREET, SUITE 2500  
DENVER, COLORADO 80265-2080

RICK HARRIS  
LAND MANAGER

TELEPHONE 303-962-6487  
FAX 855-613-9139  
E-MAIL: RICK.HARRIS@MCELVAIN.COM

April 19, 2017

Mewbourne Oil Company  
Attn: Lee Scarborough  
500 W. Texas, Suite 1020  
Midland, TX 79701

RE: Drilling Proposal  
EK 31 BS2 Federal Com #1H  
Township 18 South, Range 34 East, N.M.P.M.  
Section 31: E2E2 (Pooled Unit)  
SHL: SESE of Section 30-18S-34E, 124' FSL; 892' FEL  
BHL: SESE of Section 31-18S-34E, 230' FSL, 926' FEL  
Lea County, New Mexico

Dear Mr. Scarborough:

McElvain Energy, Inc., as general partner and operator for T. H. McElvain Oil & Gas LLLP ("McElvain"), hereby proposes the drilling of the referenced horizontal 2<sup>nd</sup> Bone Spring formation well as further described on the enclosed Authorization for Expenditure ("AFE"). The well will be drilled with a single lateral to a vertical depth of 10,119' or a depth sufficient to penetrate the 2<sup>nd</sup> Bone Spring formation and thereafter drilled horizontally in the 2<sup>nd</sup> Bone Spring formation to a total measured depth of 14,825'.

The enclosed AFE shows the estimated costs of drilling and completing the captioned well, along with your estimated working interest percentage which is subject to change upon receipt of the final Drilling Title Opinion. Please indicate on the Election Page, whether or not you desire to participate. If your election is to participate, please execute the AFE and return the executed AFE, Election Page and any well data requirements to my attention at the letterhead address.

Upon request, McElvain will forward a copy of the proposed Joint Operating Agreement covering the Pooled Unit for this well. In lieu of participating in this well, McElvain would be interested in acquiring your interest in this spacing unit and the surrounding area. If you would like to discuss a potential deal with McElvain or if you have any questions regarding this proposal please do not hesitate to contact the undersigned at 303-962-6487.

Very truly yours,

McElvain Energy, Inc.



Rick Harris  
Land Manager

Enclosures

BEFORE THE OIL CONSERVATION  
DIVISION  
Santa Fe, New Mexico  
Exhibit No. 3  
Submitted by: MCELVAIN ENERGY, INC  
Hearing Date: August 3, 2017

**McELVAIN ENERGY, INC.**

**AUTHORITY for EXPENDITURE**

April 14, 2017

| CATEGORY<br>NUMBER | EK 31 BS2 Federal Com 1H<br>Lea County, New Mexico<br>Drill to 14,825' MD (10,119' TVD) | COMPLETED<br>WELL  |
|--------------------|-----------------------------------------------------------------------------------------|--------------------|
| 4004               | Staking, Permitting, Title Work & Survey                                                | \$25,000           |
| 4011               | Surface Damages, ROW                                                                    | \$15,000           |
| 4015               | Location, Road and Restoration                                                          | \$75,000           |
| 4111               | Daywork 1,500 HP rig (25 Days @ \$17,500/Day)                                           | \$437,500          |
| 4116               | Rig MOB & DEMOB                                                                         | \$75,000           |
| 4118               | Rig Fuel (25 Overall Days @ 1,500 gals/Day @ \$2.50/gal)                                | \$93,750           |
| 4119               | DP Inspection (Rig's & Rental + DBR'd joints at end of contract)                        | \$75,000           |
| 4120               | Drill Water                                                                             | \$60,000           |
| 4125               | Drilling Fluids                                                                         | \$100,000          |
| 4135               | Bits                                                                                    | \$75,000           |
| 4204               | Mud logger/Geologist (25 Days @ \$2,000/day incl RURD & Analysis)                       | \$50,000           |
| 4216               | Directional Drilling Services (Possibly RSS)                                            | \$180,000          |
| 4220               | Open Hole Logs                                                                          | \$20,000           |
| 4225               | Cementing Services (Surface, Intermediate)                                              | \$75,000           |
| 4250               | Rentals (Camp, DP, MMs, Buster, Solids Control, Forklift, Misc.)                        | \$235,000          |
| 4408               | Casing Crew (13-3/8", 9-5/8")                                                           | \$15,000           |
| 4480               | Trucking and Transportation                                                             | \$40,000           |
| 4515               | Contract Labor (Eng/Welder/Roust/PULD Machine/Cln Insp tubulars)                        | \$100,000          |
| 4611               | Closed Loop System                                                                      | \$225,000          |
| 4615               | Field Supervision (35 Days @ \$3,000/Day)                                               | \$105,000          |
| 4620               | Drilling Overhead (25 Days @ \$600/Day)                                                 | \$15,000           |
| 4715               | Other Drilling Costs                                                                    | \$25,000           |
|                    | <b>Total Intangible Drilling</b>                                                        | <b>\$2,116,250</b> |
| 5004               | Legal Fees (DO Title Opinion)                                                           | \$10,000           |
| 5011               | Surface Damages, ROW (Battery Fees, ROW Pymnts)                                         | \$15,000           |
| 5015               | Location, Road                                                                          | \$50,000           |
| 5111               | Drilling, Daywork - CT Unit/Service Unit (Bit scraper run, TCP, Drill outs)             | \$150,000          |
| 5112               | Completion Unit (4 Days @ \$4,000/Day)                                                  | \$16,000           |
| 5121               | Completion Water (150,000 bbls @ \$1.00/bbl)                                            | \$150,000          |
| 5126               | Fluid Disposal (30% load recovery = 45,000 bbls X \$1.80/bbl)                           | \$81,000           |
| 5127               | Water Truck Services                                                                    | \$5,000            |
| 5220               | Cased Hole Logging & Perforating (Includes CBL, TCP, Frac Plugs & stage perforating)    | \$125,000          |
| 5225               | Cement & Cementing Tools                                                                | \$75,000           |
| 5250               | Tool & Equip Rental (Camp, Tanks, Foam Unit if needed)                                  | \$75,000           |
| 5408               | Casing Crew (5 1/2" Production Casing)                                                  | \$20,000           |
| 5480               | Trucking & Transportation                                                               | \$30,000           |
| 5515               | Roustabouts & Contract Labor (Flowback, Tester, Drywatch)                               | \$150,000          |
| 5520               | Stimulation (23 Frac Stages, 6,700 bbls/stg, 300,000 lbs proppant/stg)                  | \$1,200,000        |
| 5550               | Slickline Services (frac plugs)                                                         | \$25,000           |
| 5560               | Hot Oil Service                                                                         | \$10,000           |
| 5580               | Misc Materials & Supplies                                                               | \$5,000            |
| 5609               | Electrical Installation (\$55k/mi for overhead power & facility install)                | \$50,000           |
| 5610               | Regulatory Compliance                                                                   | \$5,000            |
| 5615               | Field Supervision and Engineering Services (20 days @ \$2,500/day with Expenses)        | \$53,500           |
| 5620               | Completion Overhead (20 days @ \$200/day)                                               | \$4,000            |
| 5715               | Other Completion Costs                                                                  | \$25,000           |
|                    | <b>Total Intangible Completion</b>                                                      | <b>\$2,329,500</b> |
|                    | <b>Total Intangibles</b>                                                                | <b>\$4,445,750</b> |
| 8005               | Surface Casing (1,750' 13-3/8" 54.5# J-55 BTC @ \$36.55/ft)                             | \$64,000           |
| 8010               | Intermediate Casing (4,900' 9-5/8" 40# J-55 BTC @ \$24.11/ft)                           | \$119,000          |
| 8015               | Production Casing (14,825' 5.5", 20#, P110, GBCD @ \$17.25/ft)                          | \$255,731          |
| 8025               | Tubing (10,000' 2 7/8", 6.5#, L80 @ \$4.92/ft)                                          | \$49,200           |
| 8026               | Tubing Equipment and Accessories                                                        | \$7,500            |
| 8205               | Wellheads                                                                               | \$30,000           |
| 8220               | Separation Equipment                                                                    | \$110,000          |
| 8230               | Storage Facility (4-500 bbl Oil, 2-FG H2O)                                              | \$100,000          |
| 8250               | Valves, Line pipe and Fittings for Battery (flatwire for ESP)                           | \$175,000          |
| 8303               | Electric Motor (ESP then followed by Hi Prime for Pumping Unit)                         | \$125,000          |
| 8410               | Metering Equipment (SCADA, PL Tie-in)                                                   | \$90,000           |
| 8505               | Construction and Equipment Install (including gas line)                                 | \$100,000          |
| 8506               | Trucking for Equipment                                                                  | \$25,000           |
| 8705               | Non-Controllable Equipment (& misc)                                                     | \$60,000           |
|                    | <b>Total Tangibles</b>                                                                  | <b>\$1,310,431</b> |

**Total Well Cost      \$5,756,181**

APPROVALS:

McElvain Energy, Inc.



Date: 4/14/17

# Affidavit of Publication

STATE OF NEW MEXICO  
COUNTY OF LEA

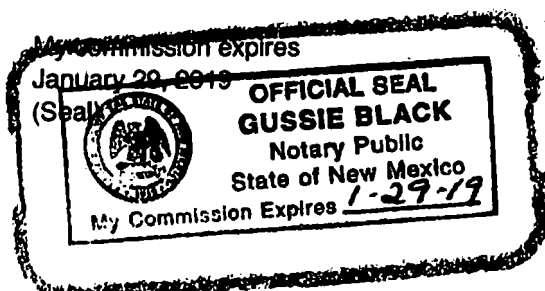
I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated  
June 20, 2017  
and ending with the issue dated  
June 20, 2017.

  
Publisher

Sworn and subscribed to before me this  
20th day of June 2017.

  
Business Manager



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL NOTICE  
JUNE 20, 2017

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

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on July 6, 2017, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 805-478-3458 or through the New Mexico Relay Network, 1-800-659-1778 by June 28, 2017. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:  
All named parties and persons  
having any right, title, interest  
or claim in the following cases  
and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

To: Mawbourn Oil Co., and its successors, heirs and/or devisees; Jacqueline M. Withers TR UAD 12/10/92 William P. Withers Trustee, and their successors, heirs and/or devisees; and Chisholm Energy Operating, LLC, and its successors, heirs and/or devisees.

CASE 16743: Application of McElvain Energy Inc. for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order (1) non-standard 160-acre, more or less, spacing and proration unit in the Bone Spring formation (EK-Bone Spring Pool) comprised of the E/2 E/2 of Section 31, Township 18 South, Range 34 East, NMPM, Lea County, New Mexico, and (2) pooling all uncommitted interests in the Bone Spring formation underlying this acreage. Said non-standard unit is to be dedicated to the applicant's proposed EK 31 BS2 Federal Com No. 1H Well, which will be drilled horizontally from the SE/4 SE/4 (Unit P) of Section 30 to a non-standard bottomhole location in the SE/4 SE/4 (Unit P) of Section 31. The Special Rules for the EK-Bone Spring Pool require 80-acre spacing units and that the completed interval for a well be located within 150 feet of the center of the quarter-quarter section. The Division previously issued Administrative Order N9L-7503 approving an unorthodox location for the subject well. McElvain also requests a non-standard, 160-acre spacing unit comprised of the E/2 E/2 of Section 31, Township 18 South, Range 34 East, NMPM, Lea County, New Mexico. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the well and, pursuant to NMRA 19.15.1.36, the imposition of a 200% risk charge against the working interest of any party that elects not to participate in this project. Said area is located approximately 30 miles west of Hobbs New Mexico #31665

67100754

00195107

HOLLAND & HART LLC  
PO BOX 2208  
SANTA FE,, NM 87504-2208

BEFORE THE OIL CONSERVATION  
DIVISION  
Santa Fe, New Mexico  
Exhibit No. 4  
Submitted by: MCELVAIN ENERGY, INC  
Hearing Date: August 3, 2017

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

**APPLICATION OF MCELVAIN ENERGY, INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT AND COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.**

**CASE NO. 15743**

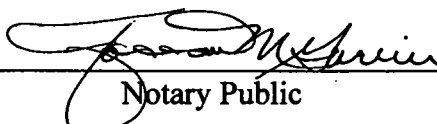
**AFFIDAVIT**

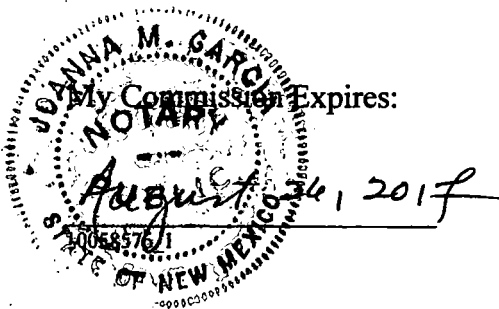
STATE OF NEW MEXICO   )  
                                          ) ss.  
COUNTY OF SANTA FE   )

Jordan L. Kessler, attorney in fact and authorized representative of McElvain Energy, Inc.,  
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.

  
\_\_\_\_\_  
Jordan L. Kessler

SUBSCRIBED AND SWORN to before me this 2nd day of August, 2017 by Jordan L.  
Kessler.

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



**BEFORE THE OIL CONSERVATION  
DIVISION  
Santa Fe, New Mexico  
Exhibit No. 5  
Submitted by: MCELVAIN ENERGY, INC  
Hearing Date: August 3, 2017**



**HOLLAND & HART**



**Jordan L. Kessler**

**Associate**

**Phone (505) 988-4421**

**Fax (505) 983-6043**

**JLKessler@hollandhart.com**

June 16, 2017

**VIA CERTIFIED MAIL**

**CERTIFIED RECEIPT REQUESTED**

**TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS**

**Re: Application of McElvain Energy Inc. for a non-standard spacing and  
proration unit and compulsory pooling, Lea County, New Mexico.  
EK 31 BS2 Federal Com No. 1H Well**

Ladies & Gentlemen:

This letter is to advise you that McElvain Energy, Inc. 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 July 6, 2017. 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 Rick Harris, at (303) 962-6487 or Rick.Harris@McElvain.com.

Sincerely,

Jordan L. Kessler

**ATTORNEY FOR MCELVAIN ENERGY, INC.**

**Holland & Hart**

**Phone (505) 988-4421 Fax (505) 983-6043 [www.hollandhart.com](http://www.hollandhart.com)**

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

**Albuquerque, Boulder, Carson City, Colorado Springs, Denver, Denver Tech Center, Billings, Boise, Cheyenne, Jackson Hole, Las Vegas, Reno, Salt Lake City, Santa Fe, Washington, D.C.**

**HOLLAND & HART**



**Jordan L. Kessler**  
**Associate**

**Phone (505) 988-4421**

**Fax (505) 983-6043**

**JLKessler@hollandhart.com**

June 16, 2017

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO: AFFECTED PARTIES AND OFFSETS**

**Re: Application of McElvain Energy Inc. for a non-standard spacing and  
proration unit and compulsory pooling, Lea County, New Mexico.  
EK 31 BS2 Federal Com No. 1H Well**

This letter is to advise you that McElvain Energy, Inc. 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 due to McElvain's request for a non-standard spacing unit and pooling.

This application has been set for hearing before a Division Examiner at 8:15 AM on July 6, 2017. 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 Rick Harris, at (303) 962-6487 or Rick.Harris@McElvain.com.

Sincerely,

Jordan L. Kessler

**ATTORNEY FOR MCELVAIN ENERGY, INC.**

**Holland & Hart LLP**

**Phone (505) 988-4421 Fax (505) 983-6043 [www.hollandhart.com](http://www.hollandhart.com)**

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

**Branches: Boulder, Colorado City, Colorado Springs, Denver, Denver Tech Center, El Paso, El Paso, Texas, Fort Collins, Colorado, Houston, Texas, Los Angeles, California, Miami, Florida, New York, New York, Phoenix, Arizona, San Francisco, California, Seattle, Washington, Washington, D.C., Wichita, Kansas**

**McElvain/EK 31 BS2 Federal Com #1H**  
**Pooled Parties / Case No. 15743**

MCELVAIN OIL COMPANY, L.P.  
C/O DAVID P MCELVAIN  
P O BOX 801888  
DALLAS, TX 75380-1888

MEWBOURNE OIL COMPANY  
PO BOX 7698  
TYLER TX, 75711

JACQUELIN M WITHERS TR UAD 12/10/92  
WILLIAM P WITHERS TRUSTEE  
3429 DEVONSHIRE WAY  
PALM BEACH GARDENS, FL 33418

CHISHOLM ENERGY OPERATING, LLC  
801 CHERRY STREET  
SUITE 1200, UNIT 20  
FORT WORTH, TX 76102

**McElvain/EK 31 BS2 Federal Com #1H**  
**Pooled Parties / Case No. 15743**

MCELVAIN OIL COMPANY, L.P.  
C/O DAVID P MCELVAIN  
P O BOX 801888  
DALLAS, TX 75380-1888

MEWBOURNE OIL COMPANY  
PO BOX 7698  
TYLER TX, 75711

JACQUELIN M WITHERS TR UAD 12/10/92  
WILLIAM P WITHERS TRUSTEE  
3429 DEVONSHIRE WAY  
PALM BEACH GARDENS, FL 33418

CHISHOLM ENERGY OPERATING, LLC  
801 CHERRY STREET  
SUITE 1200, UNIT 20  
FORT WORTH, TX 76102

7015 3010 0001 8827 1109

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

For delivery information, visit **Fed Com #1H** or **Case #15743**

**OFFICE** JUN 16 2017

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 to **MEWBOURNE OIL COMPANY**  
**PO BOX 7698**  
**TYLER, TX 75711**

PS Form 3800, April 2015 PSN 7530-02-000-9053

- 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:

MEWBOURNE OIL COMPANY  
 PO BOX 7698  
 TYLER, TX 75711

9590 9401 0126 5225 1925 98

2. 7015 3010 0001 8827 1109

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

A. Signature Eric M. Stowell ☒ Agent ☐ Addressee

B. Received by (Printed Name) Eric M. Stowell C. Date of Delivery 6/20/17

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

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

7015 1520 0002 0438 8246

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

For delivery information, visit **Fed Com #1H** or **Case #15743**

**OFFICE** JUN 16 2017

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 \$

Sent to **JACQUELIN M WITHERS TR**  
**UAD 12/10/92 WILLIAM P**  
**WITHERS TRUSTEE**  
**3429 DEVONSHIRE WAY**  
**PALM BEACH GARDENS, FL 33418**

PS Form 3800, April 2015 PSN 7530-02-000-9053

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:

JACQUELIN M WITHERS TR  
 UAD 12/10/92 WILLIAM P  
 WITHERS TRUSTEE  
 3429 DEVONSHIRE WAY  
 PALM BEACH GARDENS, FL 33418

9590 9401 0126 5225 1923 45

2. Article Number (Transfer from service label)

7015 1520 0002 0438 8246

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Jacqueline Withers ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6/20

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

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

## Domestic Mail Only

For delivery information, visit

**McElvain/JLK/EK 31 BS2**

**Fed Com #IN / [illegible]**

/ ~~Case~~ No. 15743

**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

8

**Total Postage**

1.

**Sent To**

\_\_\_\_\_

**Street and A;**

157-212-74

CHISHOLM ENERGY OP., LLC

801 CHERRY STREET

SUITE 1200, UNIT 20

FORT WORTH, TX 76102

CS-Expt. 1800 April 2015 ISBN: 978-0-990-900-90-1

See Reverse for Instructions

2016 2070 0000 4815 5680

**McElvail/EK 30 BS2 Federal Com #1H**  
**Offset Parties / Case No. 15473**

Prima Exploration, Inc.  
100 Fillmore Street  
Suite 450  
Denver, CO 80206

Jacquelin M. Withers, Trustee of the  
Jacquelin M. Withers Trust under agreement  
dated December 10, 1992  
3429 Devonshire way  
Palm Beach Gardens, FL 33418

Seely Oil Company  
815 West 10th Street  
Fort Worth, TX 76102

AZL Resources  
600 N. Dairy Ashford  
Houston, Texas 77079

McElvain Energy Fund 2011, LLC  
1050 17th Street, Suite 2500  
Denver, CO 80265

The Gross Family LP  
P.O. Box 358  
Roswell, NM 88202

Mexco Energy Corporation  
P.O. Box 10502  
Midland, TX 79702

Mika Petroleum LLC  
P.O. Box 600490  
Dallas, TX 75360

MBOE, Inc  
4925 Greenville Avenue  
Suite 915  
Dallas, TX 75206

PetroVest Group Inc  
2409 Kirby Road  
Rowlett, TX 75088

Brady M. Lowe  
308 Comet

Austin, TX 78734

Larry K. Lowe  
2313 Broadway  
Lubbock, TX 79401

Loretta D. Lowe  
7235 Villa Maria Lane  
Austin, TX 78759

HOG Partnership LP  
(Verdad Oil & Gas, General Partner)  
5950 Cedar Springs Road  
Suite 242  
Dallas, TX 75235

Kaiser-Francis Oil Company  
P.O. Box 21468  
Tulsa, OK 74121

The Gross Family LP  
P.O. Box 358  
Roswell, NM 88202

Mika Petroleum LLC  
P.O. Box 600490  
Dallas, TX 75360

MBOE, Inc  
4925 Greenville Avenue  
Suite 915  
Dallas, TX 75206

PetroVest Group Inc  
2409 Kirby Road  
Rowlett, TX 75088

Boswell Interests Ltd.  
1320 Lake Street  
Fort Worth, Texas, 76102

Burnett Oil Company  
801 Cherry Street, Suite 1500  
Fort Worth, Texas 76102-6881

CEB Oil Company  
1320 Lake Street  
Ft. Worth, Texas 76102



EAB Oil Company  
1320 Lake Street  
Ft. Worth, Texas 76102

Express Air Drilling Inc.  
3838 Oak Lawn Avenue, Suite 1525  
Dallas, Texas 75219

Michael J. Havel  
14902 Preston Road #408-768  
Dallas, Texas 75254

David L. Henderson  
815 W. 10<sup>th</sup> Street  
Fort Worth, Texas 76102

Dawn Henderson  
815 W. 10<sup>th</sup> Street  
Fort Worth, Texas 76102

COG Operating LLC  
One Concho Center  
600 W. Illinois Avenue  
Midland, Texas 79701

EGL Resources Inc.  
508 West Wall Street, Suite 1250  
Midland, TX 79701

Sempra US Gas & Power, LLC  
2925 Briarpark Drive, Suite 850  
Houston, Texas 77042

Trainer Partners Ltd.  
P.O. Box 3788  
Midland, TX 79702

Ibex Partnership, Ltd.  
300 N. Breckenridge Avenue  
Breckenridge, Texas 76424

MitchOil  
17878 W. 75<sup>th</sup> Street N.  
Haskell, Oklahoma 74436-5048

Sharbro Oil Ltd. Company  
423 West Main Street  
Artesia, New Mexico 88210

Thomaston, LLC  
1050 17<sup>th</sup> Street, Suite 2500  
Denver, Colorado 80265

Kaiser-Francis Oil Company  
6733 S. Yale Avenue  
Tulsa, Oklahoma 74136

Los Siete Exploration Inc.  
215 West Third Street  
Roswell, New Mexico 88201

J. Cleo Thompson and James Cleo Thompson, Jr. LP  
325 N. St. Paul, Suite 4300  
Dallas, Texas 75201

Chevron North America E&P  
1500 Louisiana Street  
Houston, Texas, 77002

Nearburg Exploration Company, LLC  
P.O. Box 823085  
Dallas, TX 75382

Patricia Dean Boswell, Trustee  
Under Revocable Trust Agreement dated June 13, 1988  
1320 Lake Street  
Ft. Worth, Texas 76102

PVB Oil Company  
1320 Lake Street  
Fort Worth, Texas 76102

JKS Resources, LLC  
3012 Diamond A Drive  
Roswell, New Mexico 88201

HOG Partnership, LP  
Verdad Oil & Gas, Gen Partner  
5950 Cedar Springs Road, Ste.242  
Dallas, Texas 75235

Heath Asset Management LP  
4925 Greenville Avenue, Suite 965  
Dallas, Texas 75206

Magnum Hunter Production, Inc.  
600 E. Colinas Blvd., Suite 1100  
Irving, Texas 75039

LDH Holdings, LLC  
P.O. Box 183- Country Drive  
New Vernon, New Jersey 07976

LJS Resources, LLC  
33 Eagle Nest Road  
Morristown, New Jersey 07960

Menpart Associates  
Palisades Hudson Financial Group,  
Agent for WGM Resource Holdings, LLC  
2 Overhill Road, Suite 100  
Scarsdale, New York 10583

Leesburg Investments, Ltd.  
Manx Holdings, Inc., General Partner  
500 N. Akard Street, Ste.1900  
Dallas, Texas 75201

Gretchen B. Nearburg  
1129 Challenger  
Lakeway, Texas 78734

Lucie Investments, LP  
1590 S.E. Ballantrae Court  
Port St. Lucie, Florida 34952

JB III Partners, LP  
21 Lord William Penn Drive  
Morristown, New Jersey 07960-3214

R-N Limited Partnership  
3755 East Grand Plains Road  
Roswell, New Mexico 88201

Holsum, Inc.  
P.O. Box 2527  
Roswell, New Mexico 88208

Herbert R. Willis  
4910 Rustic Trail  
Midland, Texas 79707

Duadav Resources, LLC  
6441 Waggoner Drive  
Dallas, Texas 75230-5144

Roy G. Niederhoffer

1700 Broadway, 39<sup>th</sup> Floor  
New York, New York 10019

Duke Roush  
1706 Coventry Lane  
Midland, Texas 79705

Elliott Industries LP  
P.O. Box 1328  
Santa Fe, New Mexico 87504

Elliott Hall Company, LP  
P.O. Box 1231  
Ogden, Utah 84402

Magnum Hunter Production, Inc.  
1700 Lincoln Street, Ste. 3700  
Denver, Colorado 80203-4518

Eau Rogue, LLC  
5447 Glen Lakes Drive  
Dallas, Texas 75231

Charles E. Nearburg  
5447 Glen Lakes Drive  
Dallas, Texas 75231

Roy G. Niederhoffer  
1700 Broadway, 39<sup>th</sup> Floor  
New York, New York 10019

Roca Exploration Ltd.  
3300 N. A Street  
Midland, Texas 79705

Menpart Associates  
Palisades Hudson Financial Group,  
Agent for WGM Resource Holdings, LLC  
2 Overhill Road, Suite 100  
Scarsdale, New York 10583

Cimarex  
1700 Lincoln Street, Suite 3700  
Denver, Colorado 80203

Duadav Resources, LLC  
6441 Waggoner Drive  
Dallas, Texas 75230-5144

Lagniappe Properties 5, LLC  
8911 Edenbridge Street  
Spring, Texas 77379

Robert E. Landreth  
110 W. Louisiana Ave. Suite 404  
Midland, Texas 79701

Mario Picon  
4910 North Sycamore Avenue  
Roswell, New Mexico 88201

Lucie Investments, LP  
1590 S.E. Ballantrae Court  
Port St. Lucie, Florida 34952

Leesburg Investments, Ltd.  
Manx Holdings, Inc., General Partner  
500 N. Akard Street, Ste. 1900  
Dallas, Texas 75201

Gretchen B. Nearburg  
1129 Challenger  
Lakeway, Texas 78734

YMC Royalty Company, LP  
15603 Kuykendahl, Suite 200  
Houston, Texas 77090

Buckeye Royalty Holdings, LLC  
544 East Liberty Street  
Wooster, Ohio 44691

McKay Petroleum Corporation  
P.O. Box 2014  
Roswell, New Mexico 88202

MTT, LLC  
2706 Gaye Drive  
Roswell, New Mexico 88201

Matador Resources Company  
5400 LBJ Freeway, Suite 1500  
Dallas, Texas 75240

Michael S. Braun  
P.O. Box 11171  
Midland, Texas 79702

Nuevo Seis L.P.  
PO Box 2588  
Roswell, New Mexico 88202

Morris E. Schertz  
P.O. Box 2588  
Roswell, NM 88002-2588

Rolla R. Hinkle  
105 West 3rd  
Roswell, NM 88002

Charles R. Wiggins  
110 N. Marienfield, Suite 160  
Midland, TX 79701

Keenan C. Schertz  
1407 S. Sunset Avenue  
Roswell, New Mexico 88203-2626

Cayle A. Schertz  
PO Box 2588  
Roswell, New Mexico 88202

Cecil W. Rounsaville  
2399 Cuthbert Ave.  
Midland, Texas 79701

Joyce M. Snider  
4506 Norwood Street  
Midland, Texas 79707

Lou Ellen Reneau Matson, Trustee  
Matson Revocable Trust Agreement dated December 14, 2005  
600 Helen Greathouse Circle  
Midland, Texas 79707

Lou Ellen Reneau Matson, Trustee  
Of the Marital Trust  
600 Helen Greathouse Circle  
Midland, Texas 79707

Rhombus Operating Co. LTD  
PO Box 627  
Littleton, CO 80160

McElvain Energy, Inc.  
1050 17<sup>th</sup> Street, Suite 2500  
Denver, CO 80265

Seely Oil Company  
815 West 10th Street  
Fort Worth, TX 76102

Magnum Hunter Production Company, Inc.  
909 Lake Carolyn Parkway #600  
Irving, Texas 75039

7016 2070 0000 4815 4041

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

For delivery information, visit [usps.com](http://usps.com) #11401

**OFFICIAL** Articles / Case No. 15743

Certified Mail Fee \$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total Postage \$ 0.00

Sent To Prima Exploration, Inc.

Street or 100 Fillmore Street, Ste 450

City, State Denver, CO 80206

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

JUN 16 2017  
Postmark  
Here

USPS

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Prima Exploration, Inc.  
100 Fillmore Street, Ste 450  
Denver, CO 80206

9590 9402 1505 5362 6132 76

2. Article Number (Transfer from service label)  
7016 2070 0000 4815 4041

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 6/16/2017

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

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

☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery

Restricted Delivery

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

7016 2070 0000 4815 4058

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

For delivery information, visit [usps.com](http://usps.com) #11401

**OFFICIAL** Articles / Case No. 15743

Certified Mail Fee \$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total Postage \$ 0.00

Sent To Jacquelin M. Withers, Trustee of the

Street or Jacquelin M. Withers Trust under

City, State agreement dated December 10, 1992

3429 Devonshire way

Palm Beach Gardens, FL 33418

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

JUN 16 2017  
Postmark  
Here

USPS

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jacquelin M. Withers, Trustee of the  
Jacquelin M. Withers Trust under  
agreement dated December 10, 1992  
3429 Devonshire way  
Palm Beach Gardens, FL 33418

9590 9402 1505 5362 6132 69

2. Article Number (Transfer from service label)  
7016 2070 0000 4815 4058

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 6/20

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

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

☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery

Restricted Delivery

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



7016 2070 0000 4815 4065

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL MAIL**

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

Postage \$ 2.40

Total Post \$ 5.85

Sent To  
 Street and  
 City, State, ZIP+4<sup>®</sup>

Seely Oil Company  
 815 West 10th Street  
 Fort Worth, TX 76102

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 4072

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL MAIL**

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

Postage \$ 2.40

Total Post \$ 5.85

Sent To  
 Street and  
 City, State, ZIP+4<sup>®</sup>

AZL Resources  
 600 N. Dairy Ashford  
 Houston, Texas 77079

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Seely Oil Company  
 815 West 10th Street  
 Fort Worth, TX 76102

9590 9402 1505 5362 6132 52

2

7016 2070 0000 4815 4065

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

Domestic Return Receipt

## 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

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery  
☐ Restricted Delivery (over \$500)
- ☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

## SENDER: COMPLETE

- 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:

AZL Resources  
 600 N. Dairy Ashford  
 Houston, Texas 77079

9590 9402 1505 5362 6132 45

2

7016 2070 0000 4815 4072

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

Domestic Return Receipt

## 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

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery  
☐ Restricted Delivery (over \$500)
- ☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

7016 2070 0000 4815 4089

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

For delivery information, see **Official Use** stamp.

**OFFICIAL USE**  
 JUN 16 2017  
 Postmark Here

**The Gross Family LP**  
**P.O. Box 358**  
**Roswell, NM 88202**

PS Form 3800, April 2013 PSN 7530-02-000-9053

**COMPLETE THIS SECTION**

1. 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.

**The Gross Family LP**  
**P.O. Box 358**  
**Roswell, NM 88202**

9590 9402 1505 5362 6132 38

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 4089**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Diane Costello* Agent

B. Received by (Printed Name)  
*Diane Costello*

C. Date of Delivery  
 JUN 16 2017

D. Is delivery address different from item 1? ☒ Yes  
 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

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

Domestic Return Receipt

7016 2070 0000 4815 4096

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/JLK/EK 31 BS2**  
 For delivery information, visit **Fed Com #1H /offset**  
**OFFICIAL** Parties / Case No. 15743  
 Certified Mail Fee \$ **34.15**  
 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 Paid \$  
 Sent To **Mexco Energy Corporation**  
**P.O. Box 10502**  
 Street or **Midland, TX 79702**  
 City, St  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 3990

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/JLK/EK 31 BS2**  
 For delivery information, visit **Fed Com #1H /offset**  
**OFFICIAL** Parties / Case No. 15743  
 Certified Mail Fee \$ **34.15**  
 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 Paid \$  
 Sent To **Mika Petroleum LLC**  
**P.O. Box 600490**  
 Street or **Dallas, TX 75360**  
 City, St  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Mexco Energy Corporation  
 P.O. Box 10502  
 Midland, TX 79702

9590 9402 1505 5362 6132 21

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4096

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

**X Dana Howard** ☐ Agent  
☒ Addressee

B. Received by (Printed Name)

**Dana Howard** ☐ Yes  
 C. Date of Delivery **6/30/17** ☐ No

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

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>TM</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>TM</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over good)

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:

Mika Petroleum LLC  
 P.O. Box 600490  
 Dallas, TX 75360

9590 9402 1505 5362 6133 20

2. Article Number (Transfer from service label)

7016 2070 0000 4815 3990

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

**X Rick Stille** ☐ Agent  
☒ Addressee

B. Received by (Printed Name)

**Frank Stille** ☐ Yes  
 C. Date of Delivery **7/20/17** ☐ No

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

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>TM</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>TM</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4119

U.S. Postal Service®  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only **CEIVAIN/JLK/EX-31-452**  
 For delivery information, read Com #1H / Offset  
**OFFICIAL** Articles / Case No. 1743  
 Certified Mail Fee \$ **3.50**  
 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 Fee \$  
 Sent To **MBOE, Inc**  
 Street and **4925 Greenville Ave., Ste 915**  
 City, State **Dallas, TX 75206**  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 4126

U.S. Postal Service®  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only **CEIVAIN/JLK/EX-31-452**  
 For delivery information, read Com #1H / Offset  
**OFFICIAL** Articles / Case No. 1743  
 Certified Mail Fee \$ **3.50**  
 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 \$  
 To **PetroVest Group Inc**  
 Street and **2409 Kirby Road**  
 City, State **Rowlett, TX 75088**  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: CC

- 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:

MBOE, Inc  
 4925 Greenville Ave., Ste 915  
 Dallas, TX 75206

9590 9402 1505 5362 6132 07

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4119

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

A. Signature

X

☐ Agent☒ Addressee

B. Received by (Printed Name)

**Brennan Patton**

C. Date of Delivery

**6/20/17**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☐ Mail☐ Mail Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Returned

7016 2070 0000 4815 4133

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

For delivery information, visit **McElvain/JLK/EK 31 BS2**  
 Fed Com #1H Offset  
 Parties / Case No. 15743

**OFFICIAL**

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 Post \$

Sent To **Brady M. Lowe**  
**308 Comet**  
**Austin, TX 78734**

City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7016 2070 0000 4815 3945

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

For delivery information, visit **McElvain/JLK/EK 31 BS2**  
 Fed Com #1H Offset  
 Parties / Case No. 15743

**OFFICIAL**

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 Post \$

Sent To **Larry K. Lowe**  
**2313 Broadway**  
**Lubbock, TX 79401**

City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
**Larry K. Lowe**  
**2313 Broadway**  
**Lubbock, TX 79401**

2. Article Number (Number on back of mailpiece)  
**9590 9402 1505 5362 6133 75**

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

4. Signature  
☒ Agent  
☐ Addressee

5. Received by (Printed Name)  
**Mary Brambila**

6. Date of Delivery  
**JUN 16 2017**

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

PS Form 3811, July 2015 PSN 7530-02-000-9053 (over 5500)

Domestic Return Receipt

7016 2070 0000 4815 3952

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only (McElvain/JLK/EK 31 852)

For delivery information, Fed Com #1H (Offset)  
**OFFICIAL** Parties / Case No. 15748 83501

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage rate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total For \$

Sent To Loretta D. Lowe  
 Street and 7235 Villa Maria Lane  
 City, State Austin, TX 78759

PS Form 3811, July 2015 PSN 7530-02-900-9053 See Reverse for Instructions

JUN 16 2017  
 USPS

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:

Loretta D. Lowe  
 7235 Villa Maria Lane  
 Austin, TX 78759

9590 9402 1505 5362 6133 68

2. Article Number (Transfer from service label)

7016 2070 0000 4815 3952

PS Form 3811, July 2015 PSN 7530-02-900-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *M. A. Green* ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

M. A. Green 6-20-17

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 ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 3969

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only (McElvain/JLK/EK 31 852)

For delivery information, Fed Com #1H (Offset)  
**OFFICIAL** Parties / Case No. 15748 83501

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage rate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total For \$

Sent To HOG Partnership LP  
 (Verdad Oil & Gas, General Partner)  
 Street and 5950 Cedar Springs Rd., Ste 242  
 City, State Dallas, TX 75235

PS Form 3811, July 2015 PSN 7530-02-900-9053 See Reverse for Instructions

JUN 16 2017  
 USPS

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:

HOG Partnership LP  
 (Verdad Oil & Gas, General Partner)  
 5950 Cedar Springs Rd., Ste 242  
 Dallas, TX 75235

9590 9402 1505 5362 6133 51

2. Article Number (Transfer from service label)

7016 2070 0000 4815 3969

PS Form 3811, July 2015 PSN 7530-02-900-9053

A. Signature

X *M. A. Green* ☐ 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

RECEIVED  
 JUN 19 2017  
 BY:

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4010

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

For delivery information, visit **Fed Com #11501**  
**OFFICIAL** Part 157 Case No. 15743

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 \$

Postage  
 \$ 16.00

**USPS**  
 JUN 16 2017  
 Postmark Here

Kaiser-Francis Oil Company  
 P.O. Box 21468  
 Tulsa, OK 74121

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Kaiser-Francis Oil Company  
 P.O. Box 21468  
 Tulsa, OK 74121

9590 9402 1505 5362 6133 06

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4010

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)

Kaiser-Francis Oil Company JUN 19 2017

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

Total Delivery

Domestic Return Receipt

7016 2070 0000 4815 3983

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

For delivery information, visit **Fed Com #11501**  
**OFFICIAL** Part 157 Case No. 15743

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 \$

Postage  
 \$ 16.00

**USPS**  
 JUN 16 2017  
 Postmark Here

The Gross Family LP  
 P.O. Box 358  
 Roswell, NM 88202

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

## SENDER: COMPLETE

- 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:

The Gross Family LP  
 P.O. Box 358  
 Roswell, NM 88202

9590 9402 1505 5362 6133 37

2. Article

7016 2070 0000 4815 3983

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

## CERTIFIED MAIL

A. Signature

X [Signature]

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Diane Coston

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

Total Delivery

Domestic Return Receipt

7016 2070 0000 4815 4102

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only  
 For delivery information, visit [usps.com](http://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 P \$  
 Sent To  
 Street  
 City, St  
 PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

McElvain/JLK/EK 31 B52  
 Fed Com #1H Offset  
 Parties / Case No. 19743  
 JUN 16 2017  
 USPS

Mika Petroleum LLC  
 P.O. Box 600490  
 Dallas, TX 75360

7016 2070 0000 4815 4003

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only  
 For delivery information, visit [usps.com](http://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 P \$  
 Sent To  
 Street  
 City, St  
 PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

McElvain/JLK/EK 31 B52  
 Fed Com #1H Offset  
 Parties / Case No. 19743  
 JUN 16 2017  
 USPS

PetroVest Group Inc  
 2409 Kirby Road  
 Rowlett, TX 75088

NEVER 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.

1. Article Addressed to:

Mika Petroleum LLC  
 P.O. Box 600490  
 Dallas, TX 75360

9590 9402 1505 5362 6132 14

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4102

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

Domestic Return Receipt

A. Signature

X *[Signature]*
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Frank Strunk

C. Date of Delivery

7/20/17

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

☐ Yes  
☐ No

3. Service Type

- ☐
- Adult Signature
- 
- ☐
- Adult Signature Restricted Delivery
- 
- ☒
- Certified Mail
- <sup>®</sup>
- 
- ☐
- Certified Mail Restricted Delivery
- 
- ☐
- Collect on Delivery
- 
- ☐
- Collect on Delivery Restricted Delivery

- ☐
- Priority Mail Express
- <sup>®</sup>
- 
- ☐
- Registered Mail
- <sup>™</sup>
- 
- ☐
- Registered Mail Restricted Delivery
- 
- ☐
- Return Receipt for Merchandise
- 
- ☐
- Signature Confirmation
- <sup>™</sup>
- 
- ☐
- Signature Confirmation Restricted Delivery

*Returned*



7016 2070 0000 4815 3976

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only  
 For delivery information: Fed Com #1H Offset  
 Parties / Case No. 15743  
**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 \$  
 Sent  
 City  
 Kaiser-Francis Oil Company  
 P.O. Box 21468  
 Tulsa, OK 74121  
 JUN 16 2017  
 USPS  
 PS Form 3811, July 2015 PSN 7530-02-000-9053  
 See Reverse for Instructions

7016 2070 0000 4815 4027

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only  
 For delivery information: Fed Com #1H Offset  
 Parties / Case No. 15743  
**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 \$  
 Sent  
 City  
 Boswell Interests Ltd.  
 1320 Lake Street  
 Fort Worth, Texas, 76102  
 JUN 16 2017  
 USPS  
 PS Form 3811, July 2015 PSN 7530-02-000-9053  
 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:

Kaiser-Francis Oil Company  
 P.O. Box 21468  
 Tulsa, OK 74121

9590 9402 1505 5362 6133 44

2. Article Number (Transfer from service label)

7016 2070 0000 4815 3976

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) JUN 19 2017  
 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

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:

Boswell Interests Ltd.  
 1320 Lake Street  
 Fort Worth, Texas, 76102

9590 9402 1505 5362 6132 90

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4027

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

A. Signature  
 X  
☐ Agent  
☐ Addressee  
 B. Received by (Printed Name) MAR 20 2017  
 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

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:

Burnett Oil Company  
801 Cherry Street, Suite 1500  
Fort Worth, Texas 76102-6881

9590 9402 1505 5362 6132 83

2. *7016 2070 0000 4815 4034*  
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)

*Senniter McGee* C. Date of Delivery *6/20/17*

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  
☐ Insured Mail ☐ Insured Mail Restricted Delivery

Domestic Return Receipt

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

Fed Com #114 / Offsets

OFFICIAL Parties / Case No. 15743

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

\$

Sent to

Street

City, State

Zip

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

Fed Com #114 / Offsets

OFFICIAL Parties / Case No. 15743

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

\$

Sent to

Street

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

City, State

CEB Oil Company  
1320 Lake Street  
Ft. Worth, Texas 76102

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:

CEB Oil Company  
1320 Lake Street  
Ft. Worth, Texas 76102

9590 9402 1505 5362 6134 14

2. Article Number (Transfer from sender's label)

7016 2070 0000 4815 3846

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

A. Signature

*Margot Hooper* ☒ Agent  
☐ Addressee

B. Received by (Printed Name)

*MARGOT HOOPER* C. Date of Delivery *6/20/17*

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  
☐ Insured Mail ☐ Insured Mail Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 3853

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/ILK/ER 31 BS2**  
 For delivery information, visit **Fed Com #1H / Offset**  
**OFFICIAL USE** Parties / Case No. 15743  
 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 \$  
 Postage \$  
 EAB Oil Company  
 1320 Lake Street  
 Ft. worth, Texas 76102  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

EAB Oil Company  
 1320 Lake Street  
 Ft. worth, Texas 76102

2. A

9590 9402 1505 5362 6134 67

7016 2070 0000 4815 3853

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

**X Margo Hooper** ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Margo Hooper

C. Date of Delivery

6/20/17

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

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>  
☐ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 2070 0000 4815 3860

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/ILK/ER 31 BS2**  
 For delivery information, visit **Fed Com #1H / Offset**  
**OFFICIAL USE** Parties / Case No. 15743  
 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 \$  
 Postage \$  
 Express Air Drilling Inc.  
 3838 Oak Lawn Ave, Ste 1525  
 Dallas, Texas 75219  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Express Air Drilling Inc.  
 3838 Oak Lawn Ave, Ste 1525  
 Dallas, Texas 75219

2. Article Number (Transfer from mailpiece)

9590 9402 1505 5362 6134 50

7016 2070 0000 4815 3860

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

**X Whitney Long** ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Whitney Long

C. Date of Delivery

6/19/17

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

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>  
☐ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 2070 0000 4815 3877

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/JLK/EK 31 BS2**

For delivery information, visit **Fed Com #1H 10152**

**OFFICIAL** Parties / Case No. 15743

Certified Mail Fee \$ **3.45**

Extra Services & Fees (check box, add fees 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 Post \$

Sent To **Michael J. Havel**

Street and **14902 Preston Road #408-768**

City, State **Dallas, Texas 75254**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

JUN 16 2017

USPS

7016 2070 0000 4815 3884

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/JLK/EK 31 BS2**

For delivery information, visit **Fed Com #1H 10152**

**OFFICIAL** Parties / Case No. 15743

Certified Mail Fee \$ **3.45**

Extra Services & Fees (check box, add fees 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 \$

Sent To **David L. Henderson**

Street **815 W. 10th Street**

City, State **Fort Worth, Texas 76102**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

JUN 16 2017

USPS

## 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:

Michael J. Havel  
 14902 Preston Road #408-768  
 Dallas, Texas 75254

## 2. Article

9590 9402 1505 5362 6134 43

7016 2070 0000 4815 3877

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

Domestic Return Receipt

## A. Signature

X

☐ 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

14902 Preston Rd  
 Ste 404, Dallas TX  
 75245

## 3. Service Type

|                                                                  |                                                                     |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express <sup>®</sup>         |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail <sup>™</sup>               |
| <input checked="" type="checkbox"/> Certified Mail <sup>®</sup>  | <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 <sup>™</sup>        |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

## 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:

David L. Henderson  
 815 W. 10th Street  
 Fort Worth, Texas 76102

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

9590 9402 1505 5362 6134 36

7016 2070 0000 4815 3884

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

Domestic Return Receipt

## A. Signature

X

☐ 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

|                                                                  |                                                                     |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express <sup>®</sup>         |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail <sup>™</sup>               |
| <input checked="" type="checkbox"/> Certified Mail <sup>®</sup>  | <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 <sup>™</sup>        |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

7016 2070 0000 4815 3891

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only  
 For delivery information, visit [usps.com](http://usps.com)  
**OFFICIAL USE**  
 Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as indicated)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Fee \$  
 Sent To  
 Street  
 City, State

**Postmark Here**  
 JUN 16 2017  
 USPS

Dawn Henderson  
 815 W. 10th Street  
 Fort Worth, Texas 76102

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 3907

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only  
 For delivery information, visit [usps.com](http://usps.com)  
**OFFICIAL USE**  
 Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as indicated)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Fee \$  
 Sent To  
 Street  
 City, State

**Postmark Here**  
 JUN 16 2017  
 USPS

COG Operating LLC  
 One Concho Center  
 600 W. Illinois Avenue  
 Midland, Texas 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**CERTIFIED MAIL**

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Dawn Henderson  
 815 W. 10th Street  
 Fort Worth, Texas 76102

9590 9402 1505 5362 6134 29

7016 2070 0000 4815 3891

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

**Domestic Return Receipt**

A. Signature  
☒ Agent  
☐ Addressee

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

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

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

**CERTIFIED MAIL**

SENDER: COMPLETE THIS

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 COG Operating LLC  
 One Concho Center  
 600 W. Illinois Avenue  
 Midland, Texas 79701

9590 9402 150. 5362 6134 12

7016 2070 0000 4815 3907

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

**Domestic Return Receipt**

A. Signature  
☒ Agent  
☐ Addressee

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

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

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

7016 2070 0000 4815 3914

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

For delivery information, visit **Fed Com #1H/Offset**  
 Parties / Case No. **15743**

**OFFICIAL U.S. MAIL**

Certified Mail Fee  
 \$ **3.85**

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  
 \$

**JUN 16 2017**  
 Postmark Here

**EGL Resources Inc.**  
**508 West Wall Street, Ste 1250**  
**Midland, TX 79701**

PS Form 3800, April 2015 PSN 7530-02-800-9053 See Reverse for Instructions

RETURNED

7016 2070 0000 4815 3921

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

For delivery information, visit **Fed Com #1H/Offset**  
 Parties / Case No. **15743**

**OFFICIAL U.S. MAIL**

Certified Mail Fee  
 \$ **3.85**

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  
 \$

**JUN 16 2017**  
 Postmark Here

**Sempre US Gas & Power, LLC**  
**2925 Briarpark Drive, Ste 850**  
**Houston, Texas 77042**

PS Form 3800, April 2015 PSN 7530-02-800-9053 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:  
**Sempre US Gas & Power, LLC**  
**2925 Briarpark Drive, Ste 850**  
**Houston, Texas 77042**

9590 9402 1505 5362 6133 99

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 3921**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**X Rath Serna** ☐ 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 ☐ 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  
☐ Insured Mail ☐ Restricted Delivery

7016 2070 0000 4815 3938

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

For delivery information, visit [usps.com](http://usps.com)

**OFFICE** McElvain/JLK/EK 3-1-17  
Fed Com #1H/Offset  
Parties Case No. 15743

Certified Mail Fee \$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

**JUN 16 2017**  
Postmark Here

**USPS**

**Trainer Partners Ltd.**  
P.O. Box 3788  
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

7016 2070 0000 4815 4645

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

For delivery information, visit [usps.com](http://usps.com)

**OFFICE** McElvain/JLK/EK 3-1-17  
Fed Com #1H/Offset  
Parties Case No. 15743

Certified Mail Fee \$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

**JUN 16 2017**  
Postmark Here

**USPS**

**Ibex Partnership, Ltd.**  
300 N. Breckenridge Avenue  
Breckenridge, Texas 76424

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**Trainer Partners Ltd.**  
P.O. Box 3788  
Midland, TX 79702

9590 9402 1505 5362 6133 82

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 3938**

PS Form 3811, July 2015 PSN 7530-02-000-9083

**COMPLETE THIS SECTION ON DELIVERY**

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

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

C. Date of Delivery  
**6-22-17**

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

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

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:

**Ibex Partnership, Ltd.**  
300 N. Breckenridge Avenue  
Breckenridge, Texas 76424

9590 9402 1505 5362 6135 73

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 4645**

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)  
**SHERA DAVIS**

C. Date of Delivery  
**6-19-17**

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

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

Restricted Delivery

Domestic Return Receipt

7015 0640 0003 5400 9950

# U.S. Postal Service® CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

**OFFICIAL**McElvain/JLK/EK 31 BS2  
Fed Com #1H/Offset  
Parties / Case No. 15743

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 P

Sent To

Street

City, St

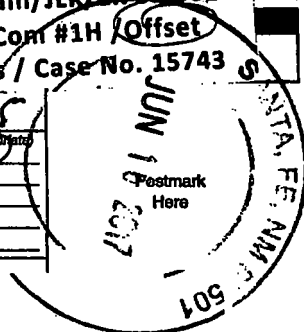
MitchOil

17878 W. 75th Street N.

Haskell, Oklahoma 74436-5048

PS Form 3800, April 2015 PSN 7530-02-000-9050

See Reverse for Instructions



7016 1370 0000 0804 1848

# U.S. Postal Service® CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

**OFFICIAL**McElvain/JLK/EK 31 BS2  
Fed Com #1H/Offset  
Parties / Case No. 15743

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

Sent To

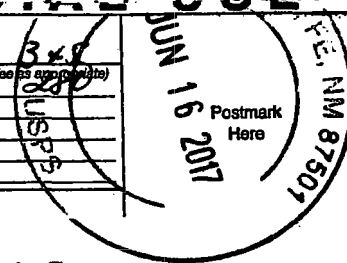
Street

City

Sharbro Oil Ltd. Company  
423 West Main Street  
Artesia, New Mexico 88210

PS Form 3800, April 2015 PSN 7530-02-000-9050

See Reverse for Instructions



SENDER COMPLETE

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.

1. Article Addressed to:

MitchOil  
17878 W. 75th Street N.  
Haskell, Oklahoma 74436-5048

9590 9402 1505 5362 6135 66

2. Article Number (Transfer from service label)

7015 0640 0003 5400 9950

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

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Dustin Markham

C. Date of Delivery

6/19/17

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

Restricted Delivery

RETURNED



7015 0640 0003 5400 9967

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

For delivery information, visit **Fed Com #11K/Offset**

**OFFICIAL** Partles / Case No. 15743

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 Fee \$

Thomaston, LLC  
 1050 17th Street, Suite 2500  
 Denver, Colorado 80265

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Thomaston, LLC  
 1050 17th Street, Suite 2500  
 Denver, Colorado 80265

9590 9402 1505 5362 6135 42

2. Article Number (Transfer from service label)

7015 0640 0003 5400 9967

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Mark Nunez

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

06/17/2017

 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  
☐ 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

Domestic Return Receipt

7015 0640 0003 5400 9974

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

For delivery information, visit **Fed Com #11K/Offset**

**OFFICIAL** Partles / Case No. 15743

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 Fee \$

Kaiser-Francis Oil Company  
 6733 S. Yale Avenue  
 Tulsa, Oklahoma 74136

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Kaiser-Francis Oil Company  
 6733 S. Yale Avenue  
 Tulsa, Oklahoma 74136

9590 9402 1505 5362 6135 35

2. Article Number (Transfer from service label)

7015 0640 0003 5400 9974

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Patricia Sims

☐ 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  
☐ 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 0640 0003 5400 9998

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

For delivery information, visit **Fed Com #1H Offset**

**OFFIC** Parties / Case No. 15743

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 \$

Sent: Los Siete Exploration Inc.  
 Street: 215 West Third Street  
 City, State, ZIP+4: Roswell, New Mexico 88201

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

RETURNED

7015 0640 0003 5400 9998

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

For delivery information, visit **Fed Com #1H Offset**

**OFFIC** Parties / Case No. 15743

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 \$

Sent: J. Cleo Thompson and James  
 Street: Cleo Thompson, Jr. LP  
 City, State, ZIP+4: 325 N. St. Paul, Suite 4300 Dallas, Texas 75201

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

SENDER: COMPLETE THIS

■ 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:  
 J. Cleo Thompson and James  
 Cleo Thompson, Jr. LP  
 325 N. St. Paul, Suite 4300  
 Dallas, Texas 75201

2. Article Number (Transfer from service label)  
 9590 9402 1505 5362 6135 11

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

A. Signature  
 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

7015 0640 0003 5400 9998

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

7016 2070 0000 4815 3815

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only  
 RECEIVAIN/JLK/EK 31 BS2  
 For delivery information, visit **Fed Com #1H/Offset**  
**OFFICIAL** Parties / Case No. 15743  
 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 \$  
 Sent To  
 Street  
 City, State  
 Chevron North America E&P  
 1500 Louisiana Street  
 Houston, Texas, 77002  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Chevron North America E&P  
 1500 Louisiana Street  
 Houston, Texas, 77002

9590 9402 1505 5362 6135 04

2. Article Number (Transfer from service label)

7016 2070 0000 4815 3815

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)  
 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 ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 3822

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only  
 RECEIVAIN/JLK/EK 31 BS2  
 For delivery information, visit **Fed Com #1H/Offset**  
**OFFICIAL** Parties / Case No. 15743  
 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 \$  
 Sent To  
 Street  
 City, State  
 Nearburg Exploration  
 Company, LLC  
 P.O. Box 823085  
 Dallas, TX 75382  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Nearburg Exploration  
 Company, LLC  
 P.O. Box 823085  
 Dallas, TX 75382

9590 9402 1505 5362 6134 98

2. Article Number (Transfer from service label)

7016 2070 0000 4815 3822

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)  
 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 ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 3839

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

McElvain/JLK/EK 31 BSZ  
 Fed Com #1H/Offset  
 Parties / Case No. 15743

For delivery information, visit **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 \$  
 Sent To Patricia Dean Boswell, Trustee  
 Agreement dated June 13, 1988  
 Street and 1320 Lake Street  
 City, State Ft. Worth, Texas 76102

PS Form 3800, April 2015 PSN 7530-02-000-9053 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 Dean Boswell, Trustee  
 Under Revocable Trust  
 Agreement dated June 13, 1988  
 1320 Lake Street  
 Ft. Worth, Texas 76102

9590 9402 1505 5362 6134 81

## 2. Article Number (Transfer from back of mailpiece)

7016 2070 0000 4815 3839

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

COMPLETE THIS SECTION ON DELIVERY

## A. Signature

Margo Hooper

By Agent

☐ Addressee

## B. Received by (Printed Name)

MARGO HOOPER

## C. Date of Delivery

6/20/17

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<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

(over \$500)

Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4546

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

McElvain/JLK/EK 31 BSZ  
 Fed Com #1H/Offset  
 Parties / Case No. 15743

For delivery information, visit **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 \$  
 Sent To PVB Oil Company  
 1320 Lake Street  
 Street and Fort Worth, Texas 76102  
 City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

PVB Oil Company  
 1320 Lake Street  
 Fort Worth, Texas 76102

9590 9402 1505 5362 6136 72

## 2. Article Number (Transfer from back of mailpiece)

7016 2070 0000 4815 4546

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

COMPLETE THIS SECTION ON DELIVERY

## A. Signature

Margo Hooper

By Agent

☐ Addressee

## B. Received by (Printed Name)

MARGO HOOPER

## C. Date of Delivery

6/20/17

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<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

(over \$500)

Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4553

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only  
 For delivery information, visit **Fed Com #1H/Offset**  
**OFFICIAL** Parties / Case No. 15743  
 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 \$  
 Sent To  
 Street  
 City, State  
 JKS Resources, LLC  
 3012 Diamond A Drive  
 Roswell, New Mexico 88201  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 4560

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only  
 For delivery information, visit **Fed Com #1H/Offset**  
**OFFICIAL** Parties / Case No. 15743  
 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 \$  
 Sent To  
 Street  
 City, State  
 HOG Partnership, LP  
 Verdad Oil & Gas, Gen Partner  
 5950 Cedar Springs Rd, Ste. 242  
 Dallas, Texas 75235  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

JKS Resources, LLC  
 3012 Diamond A Drive  
 Roswell, New Mexico 88201

9590 9402 1505 5362 6136 65

2. Article Number / Transfer from service label  
 7016 2070 0000 4815 4553

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

A. Signature

X *Kathy Smith* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

*KATHY SMITH* C. Date of Delivery *6-19-17*

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

Restricted Delivery

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE

- 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:

HOG Partnership, LP  
 Verdad Oil & Gas, Gen Partner  
 5950 Cedar Springs Rd, Ste. 242  
 Dallas, Texas 75235

9590 9402 1505 5362 6136 58

2. Article Number / Transfer from service label

7016 2070 0000 4815 4560

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

A. Signature

X *Kathy Smith* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

*KATHY SMITH* C. Date of Delivery *6-19-17*

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

**RECEIVED**  
 JUN 19 2017  
 BY:

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

Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4577

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/JLK/EK 31 BS2**

For delivery information, visit **Fed Com #114/offset**  
**OFFICE** Parties / Case No. **15749**

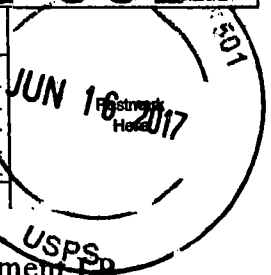
Certified Mail Fee  
 \$ **3.45**

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 To  
 Street  
 City, St

**Heath Asset Management LP**  
**4925 Greenville Ave, Ste 965**  
**Dallas, Texas 75206**

PS Form 3800, April 2015 PSN 7530-02-000-8053 See Reverse for Instructions



7016 2070 0000 4815 4584

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only **McElvain/JLK/EK 31 BS2**

For delivery information, visit **Fed Com #114/offset**  
**OFFICE** Parties / Case No. **15749**

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 To  
 Street  
 City, St

**Magnum Hunter Production, Inc.**  
**600 E. Colinas Blvd., Ste 1100**  
**Irving, Texas 75039**

PS Form 3800, April 2015 PSN 7530-02-000-8053 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:

**Heath Asset Management LP**  
**4925 Greenville Ave, Ste 965**  
**Dallas Texas 75206**

9590 9402 1505 5362 6136 41

## 2. Article Number (Optional)

7016 2070 0000 4815 4577

PS Form 3811, July 2015 PSN 7530-02-000-8053

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *[Signature]*☐ Agent☒ Addressee

## B. Received by (Printed Name)

*Brennan Patton*

## C. Date of Delivery

*6/20/17*

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 <sup>®</sup>         |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail <sup>™</sup>               |
| <input checked="" type="checkbox"/> Certified Mail <sup>®</sup>  | <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 <sup>™</sup>        |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

Domestic Return Receipt

*Returned*

7016 2070 0000 4815 4591

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

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

**OFFICIAL RECEIPT** Part 1 Case No. 157447501

Certified Mail Fee \$ 3.65

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

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

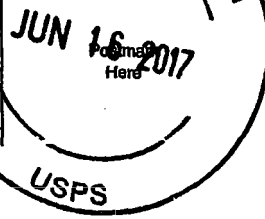
**Total** \$

Sent To **LDH Holdings, LLC**

Street **P.O. Box 183- Country Drive**

City, St **New Vernon, NJ 07976**

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

LDH Holdings, LLC  
 P.O. Box 183- Country Drive  
 New Vernon, NJ 07976

9590 9402 1505 5362 6136 27

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4591

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

BY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>

☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>

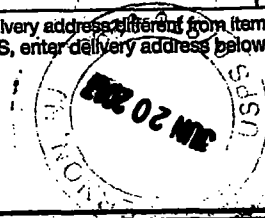
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>

☐ Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500) Restricted Delivery



7016 2070 0000 4815 4607

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

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

**OFFICIAL RECEIPT** Part 1 Case No. 157447501

Certified Mail Fee \$ 3.65

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

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

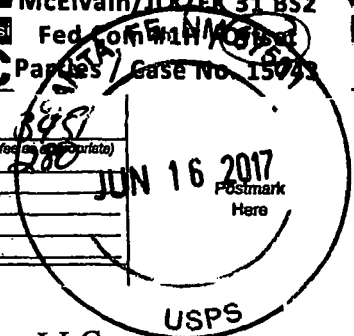
**Total** \$

Sent To **LJS Resources, LLC**

Street **33 Eagle Nest Road**

City, St **Morristown, NJ 07960**

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

LJS Resources, LLC  
 33 Eagle Nest Road  
 Morristown, NJ 07960

9590 9402 1505 5362 6136 10

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4607

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

BY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery 6/19/17

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>

☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>™</sup>

☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>

☐ Restricted Delivery ☐ Signature Confirmation Restricted Delivery

7016 2070 0000 4815 4614

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only MCElvain/JLK/ES 31 BS2  
 For delivery information, visit **Fed Com #1H / Offset**  
**OFFICIAL** Parties / Case No. 157430  
 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 \$  
 Sent To Menpart Associates  
 Palisades Hudson Financial Group,  
 Agent for WGM Resource Holdings,  
 LLC  
 Street 2 Overhill Road, Suite 100  
 City, St Scarsdale, New York 10583  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

7016 2070 0000 4815 4621

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only MCElvain/JLK/EK 31 BS2  
 For delivery information, visit **Fed Com #1H / Offset**  
**OFFICIAL** Parties / Case No. 15743  
 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 \$  
 Sent To Leesburg Investments, Ltd.  
 Manx Holdings, Inc., General  
 Partner  
 Street 500 N. Akard Street, Ste.1900  
 City, St Dallas, Texas 75201  
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

CERTIFIED MAIL

1. 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:

Menpart Associates  
 Palisades Hudson Financial Group,  
 Agent for WGM Resource Holdings,  
 LLC  
 2 Overhill Road, Suite 100  
 Scarsdale, New York 10583

9590 9402 1505 5362 6136 03

2. 7016 2070 0000 4815 4614

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

Domestic Return Receipt

1. 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:

Leesburg Investments, Ltd.  
 Manx Holdings, Inc., General  
 Partner  
 500 N. Akard Street, Ste.1900  
 Dallas, Texas 75201

9590 9402 1505 5362 6135 97

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4621

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

Domestic Return Receipt

A. Signature

X *Boiselle Ann*

Agent

Addressee

B. Received by (Printed Name)

L. Con

C. Date of Delivery

5/27

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

Yes  
 No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

very Restricted Delivery (over \$500)



7016 2070 0000 4815 4638

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

For delivery information, see PS Form 3800, April 2015 PSN 7530-02-000-9053

OFFICIAL MAIL / Particles / Case No. 15743

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 \$

Sent to \$

Street \$

City, State, ZIP+4®

Gretchen B. Nearburg  
 1129 Challenger  
 Lakeway, Texas 78734

Postmark JUN 16 2017

USPS

PS Form 3800, April 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Gretchen B. Nearburg  
 1129 Challenger  
 Lakeway, Texas 78734

9590 9402 1505 5362 6135 80

2. Article Number (Transfer from service label)  
 7016 2070 0000 4815 4638

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☒ Addressee

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

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

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

restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4447

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

For delivery information, see PS Form 3800, April 2015 PSN 7530-02-000-9053

OFFICIAL MAIL / Particles / Case No. 15743

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 \$

Sent to \$

Street \$

City, State, ZIP+4®

Lucie Investments, LP  
 1590 S.E. Ballantrae Court  
 Port St. Lucie, Florida 34952

Postmark JUN 16 2017

USPS

PS Form 3800, April 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Lucie Investments, LP  
 1590 S.E. Ballantrae Court  
 Port St. Lucie, Florida 34952

9590 9402 1505 5362 6146 79

2. Article Number (Transfer from service label)  
 7016 2070 0000 4815 4447

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☒ Addressee

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

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

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

restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4454

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL**

McElvain/JLK/ER 31-352

Fed Com #111/1155

Parties / Case No. 157M

Certified Mail Fee

\$ 345

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

☐ Return Receipt (hardcopy) \$ 2.00

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total \$

Sent To

Street a

City, St

JB III Partners, LP

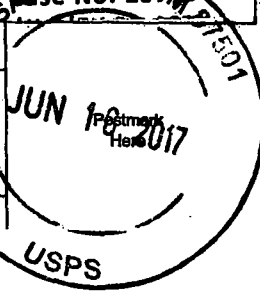
21 Lord William Penn Drive

Morristown, New Jersey

07960-3214

PS Form 3800, April 2015 PSN 7530-02-000-9033

See Reverse for Instructions



7016 2070 0000 4815 4461

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL**

McElvain/JLK/ER 31-352

Fed Com #111/1155

Parties / Case No. 15743

Certified Mail Fee

\$ 345

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

☐ Return Receipt (hardcopy) \$ 2.00

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total \$

Sent

Street

City, St

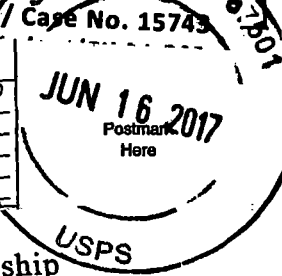
R-N Limited Partnership

3755 East Grand Plains Road

Roswell, New Mexico 88201

PS Form 3800, April 2015 PSN 7530-02-000-9033

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:

R-N Limited Partnership  
 3755 East Grand Plains Road  
 Roswell, New Mexico 88201

9500 9402 1505 5362 6146 55

2. A

7016 2070 0000 4815 4461

COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Margot Eichholtz* ☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

*MARGOT EICHHOLTZ* *JUN 16 2017*

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

If YES, enter delivery address below:

PS Form 3811, July 2015 PSN 7530-02-000-9033

Domestic Return Receipt

7016 2070 0000 4815 4478

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

For delivery information, visit **Fed Com #1H/Office**

**OFFICE** (Parties / Case No. 15743)

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 Post \$

Sent To **Holsum, Inc.**

Street and **P.O. Box 2527**

City, State **Roswell, New Mexico 88208**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 4485

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

For delivery information, visit **Fed Com #1H/Office**

**OFFICE** (Parties / Case No. 15743)

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 Post \$

Sent To **Herbert R. Willis**

Street and **4910 Rustic Trail**

City, State **Midland, Texas 79707**

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**Holsum, Inc.**  
**P.O. Box 2527**  
**Roswell, New Mexico 88208**

9590 9402 1505 5362 6146 48

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 4478**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** **McClain**

B. Received by (Printed Name) **Edson** Date of Delivery **6/17/17**

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

☐ Insured Mail

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

restricted Delivery

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:

**Herbert R. Willis**  
**4910 Rustic Trail**  
**Midland, Texas 79707**

9590 9402 1505 5362 6146 31

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 4485**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** **Willis**

B. Received by (Printed Name) **Herbert Willis** Date of Delivery **6/22/17**

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

restricted Delivery

7016 2070 0000 4815 4492

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

For delivery information, visit **FedEx.com**

**OFFICIAL** Parties / Case No. 15744M

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 \$

Postage \$  
 Total \$  
 Sen \$  
 Str \$  
 City

Duadav Resources, LLC  
 6441 Waggoner Drive  
 Dallas, Texas 75230-5144

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 4508

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

For delivery information, visit **FedEx.com**

**OFFICIAL** Parties / Case No. 15744M

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 \$

Postage \$  
 Total \$  
 Sen \$  
 Str \$  
 City

Roy G. Niederhoffer  
 1700 Broadway, 39th Floor  
 New York, New York 10019

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Duadav Resources, LLC  
 6441 Waggoner Drive  
 Dallas, Texas 75230-5144

9590 9402 1505 5362 6146 24

2. Article Number (Transfer from service label)  
 7016 2070 0000 4815 4492

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

COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☒ Agent  
☒ Addressee

## B. Received by (Printed Name)

P. L. DAVIS

## C. Date of Delivery

6-19-17

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

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE

- 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:

Roy G. Niederhoffer  
 1700 Broadway, 39th Floor  
 New York, New York 10019

9590 9402 1505 5362 6146 17

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4508

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

DELIVERY

## A. Signature

☒ Agent  
☒ Addressee

## B. Received by (Printed Name)

R. G. NIEDERHOFER

## C. Date of Delivery

6/19/17

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

Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4515

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **Fed Com #1H / Offset**  
**OFFICIAL** Parties / Case No. 15743

MCeivain/JLK/EK 31 BS2

Certified Mail Fee \$ 3.85

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 \$ 2.80

**Total** \$ 6.65

Sent to **Duke Roush**  
**1706 Coventry Lane**  
**Midland, Texas 79705**

City, State, ZIP+4<sup>®</sup>

Postmark Here  
 JUN 16 2017  
 NM 87501

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for instructions

7016 2070 0000 4815 4522

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **Fed Com #1H / Offset**  
**OFFICIAL** Parties / Case No. 15743

MCeivain/JLK/EK 31 BS2

Certified Mail Fee \$ 3.85

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 \$ 2.80

**Total** \$ 6.65

Sent to **Elliott Industries LP**  
**P.O. Box 1328**  
**Santa Fe, New Mexico 87504**

City, State, ZIP+4<sup>®</sup>

Postmark Here  
 JUN 16 2017  
 NM 87501

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for instructions

RECEIVED MAIL

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature ☒ Agent ☐ Addressee  
 X Cherry Roush

B. Received by (Printed Name) Cherry Roush

C. Date of Delivery 6/20/17

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

Duke Roush  
 1706 Coventry Lane  
 Midland, Texas 79705

9590 9402 1505 5362 6146 00

2. Article Number (Transfer from outside label)  
 7016 2070 0000 4815 4515

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

RECEIVED MAIL

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature ☒ Agent ☐ Addressee  
 X Ryan Morahan

B. Received by (Printed Name) Ryan Morahan

C. Date of Delivery 6/20/17

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

Elliott Industries LP  
 P.O. Box 1328  
 Santa Fe, New Mexico 87504

9590 9402 1505 5362 6145 9422

2. Article Number (Transfer from outside label)  
 7016 2070 0000 4815 4522

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

7016 2070 0000 4815 4539

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

For delivery information, visit **Fed Com #111 Offset**

**OFFICIAL** Partles / Case No. 1574

Certified Mail Fee \$ 3.45

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 \$ 0.00

**Postmark Here** JUN 16 2017

**Elliott Hall Company, LP**  
 P.O. Box 1231  
 Ogden, Utah 84402

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**Elliott Hall Company, LP**  
 P.O. Box 1231  
 Ogden, Utah 84402

9590 9402 1505 5362 6145 87

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 4539**

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) J. Johnson

C. Date of Delivery JUN 19 2017

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 |
| <input type="checkbox"/> Insured Mail                            |                                                                     |

**Domestic Return Receipt**

7016 2070 0000 4815 5659

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

For delivery information, visit **Fed Com #111 Offset**

**OFFICIAL** Partles / Case No. 45743

Certified Mail Fee \$ 3.45

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 \$ 0.00

**Postmark Here** JUN 16 2017

**Magnum Hunter Production, Inc.**  
 1700 Lincoln Street, Ste. 3700  
 Denver, Colorado 80203-4518

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**Magnum Hunter Production, Inc.**  
 1700 Lincoln Street, Ste. 3700  
 Denver, Colorado 80203-4518

9590 9402 1505 5362 6125 52

2. Article Number (Transfer from label)  
**7016 2070 0000 4815 5659**

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) JUN 19 2017

C. Date of Delivery 6/19/17

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 |
| <input type="checkbox"/> Insured Mail                            |                                                                     |

**Domestic Return Receipt**

9995 5194 0000 4815 5666 7016 2070 0000 0202 9702

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICE** Fed Com. 11/16/2017  
 Parties / Case No. 15743

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 \$

Sent To Eau Rogue, LLC  
 Street 5447 Glen Lakes Drive  
 City, St. Dallas, Texas 75231

PS Form 3800, April 2013

7016 2070 0000 4815 5673 9702

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICE** Fed Com. 11/16/2017  
 Parties / Case No. 15743

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 \$

Sent To Charles E. Nearburg  
 Street 5447 Glen Lakes Drive  
 City, St. Dallas, Texas 75231

PS Form 3800, April 2013

RECEIVED: COMPLETE THIS SECTION

1. Complete Items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Eau Rogue, LLC  
 5447 Glen Lakes Drive  
 Dallas, Texas 75231

9590 9402 1505 5362 6125 45

2. Article Number

PS Form 3800, April 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 X A Yin ☐ 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 ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>TM</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery

Signature Confirmation<sup>TM</sup>  
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

RECEIVED: COMPLETE THIS SECTION

1. Complete Items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
 Charles E. Nearburg  
 5447 Glen Lakes Drive  
 Dallas, Texas 75231

9590 9402 1505 5362 6125 38

2. Article Number

PS Form 3800, April 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 X A. Yin ☐ 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 ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail<sup>TM</sup>  
☒ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery

Signature Confirmation<sup>TM</sup>  
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 5697

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

MCelvain/JLK/EK 31 BSZ  
 Fed Com 311 Offset  
 Parties/ Case No. 15743

**OFFICIAL**

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 \$

Sent To Roca Exploration Ltd.  
 3300 N. A Street  
 Midland, Texas 79705

City, State

PS Form 3800, April 2015 PSN 7530-02-000-8053 See Reverse for Instructions

7016 2070 0000 4815 5703

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

MCelvain/JLK/EK 31 BSZ  
 Fed Com 311 Offset  
 Parties/ Case No. 15743

**OFFICIAL**

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 \$

Sent To Menpart Associates  
 Palisades Hudson Financial Group,  
 Agent for WGM Resource Holdings, LLC  
 2 Overhill Road, Suite 100  
 Scarsdale, New York 10583

City, State

PS Form 3800, April 2015 PSN 7530-02-000-8053 See Reverse for Instructions

**CERTIFIED MAIL**

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Menpart Associates  
 Palisades Hudson Financial Group,  
 Agent for WGM Resource Holdings, LLC  
 2 Overhill Road, Suite 100  
 Scarsdale, New York 10583

9590 9402 1203 5246 0774 96

2. Article Number (Transfer from label)

7016 2070 0000 4815 5703

PS Form 3811, July 2015 PSN 7630-02-000-8053 Domestic Return Receipt

A. Signature  
 B. Received by (Printed Name)  
 C. Date of Delivery  
 D. Is delivery address different from item 1? If YES, enter delivery address below:

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



7016 2070 0000 4815 4409

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

For delivery information, visit **usps.com**

**OFFICIAL USE**

MC/ELVAIN/JLK/ER 3188  
 Fed Com #1H / Offset 001  
 Parties / Case No. 15743

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 \$

**Cimarex**  
 Sent To 1700 Lincoln Street, Ste 3700  
 Street in Denver, Colorado 80203  
 City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 4416

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

For delivery information, visit **usps.com**

**OFFICIAL USE**

MC/ELVAIN/JLK/ER 3188  
 Fed Com #1H / Offset 001  
 Parties / Case No. 15743

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 \$

**Duadav Resources, LLC**  
 Sent To 6441 Waggoner Drive  
 Street in Dallas, Texas 75230-5144  
 City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

**Cimarex**  
 1700 Lincoln Street, Ste 3700  
 Denver, Colorado 80203

9590 9402 1203 5246 0774 89

2. Article Number (Transfer from service label)

7016 2070 0000 4815 4409

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

RECEIVED

☐ 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

**CIMAREX ENERGY CO.**

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

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:

**Duadav Resources, LLC**  
 6441 Waggoner Drive  
 Dallas, Texas 75230-5144

9590 9402 1203 5246 0774 72

2. Article Number

7016 2070 0000 4815 4416

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

XR

☐ 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

Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 4423

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**

Domestic Mail Only

MICELVAIN/JLK/EK 31 B52

For delivery information, visit [usps.com](http://usps.com)

Fed Com #1H / Offset

**OFFICIAL**

Parties / Case No. 15743

Certified Mail Fee

\$

Extra Services &amp; 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

\$

Sent To

Street

City, State

Lagniappe Properties 5, USPS

8911 Edenbridge Street

Spring, Texas 77379

PS Form 3800, April 2015 PSN 7530-02-000-9033

See Reverse for Instructions

7016 2070 0000 4815 4430

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**

Domestic Mail Only

MICELVAIN/JLK/EK 31 B52

For delivery information, visit [usps.com](http://usps.com)

Fed Com #1H / Offset

**OFFICIAL**

Parties / Case No. 15743

Certified Mail Fee

\$

Extra Services &amp; 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 Pos

\$

Sent To

Street

City, State

Robert E. Landreth

110 W. Louisiana Ave. Ste 404

Midland, Texas 79701

PS Form 3800, April 2015 PSN 7530-02-000-9033

See Reverse for Instructions

**CERTIFIED MAIL**

SENDER: COMPLETE

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.

1. Article Addressed to:

Robert E. Landreth  
 110 W. Louisiana Ave. Ste 404  
 Midland, Texas 79701

9590 9402 1203 5246 0774 58

2. If delivery is to a business, please print label:

7016 2070 0000 4815 4430

PS Form 3811, July 2015 PSN 7530-02-000-9033

Domestic Return Receipt

A. Signature

X *Judith L. Carter*☐ Agent☐ Addressee

B. Received by (Printed Name)

LINDA CARTER

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<sup>®</sup>☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>™</sup>☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation<sup>™</sup>☐ Signature Confirmation Restricted Delivery

Restricted Delivery

7016 2070 0000 4815 5550

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

For delivery information, visit [usps.com](http://usps.com) or call 800-837-5829

**OFFICE** of the Postmaster General  
 Articles / Case No. 15743

Certified Mail Fee \$ 3.45

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 Pk \$

Sent To **Mario Picon**  
 4910 North Sycamore Avenue  
 Roswell, New Mexico 88201

City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7016 2070 0000 4815 5567

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

For delivery information, visit [usps.com](http://usps.com) or call 800-837-5829

**OFFICE** of the Postmaster General  
 Articles / Case No. 15743

Certified Mail Fee \$ 3.45

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 Pos \$

Sent To **Lucie Investments, LP**  
 1590 S.E. Ballantrae Court  
 Port St. Lucie, Florida 34952

City, State

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: C. Picon, 4910 North Sycamore Avenue, Roswell, NM 88201

1. Complete items 1, 2, and 3.  
 2. Print your name and address on the reverse so that we can return the card to you.  
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lucie Investments, LP  
 1590 S.E. Ballantrae Court  
 Port St. Lucie, Florida 34952

9590 9402 1505 5362 6126 44

2. Article Number:

7016 2070 0000 4815 5567

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

A. Signature [Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) Lucie Investments, LP C. Date of Delivery 6-19-17

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 type="checkbox"/> Certified Mail Restricted Delivery              | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Certified Mail Restricted Delivery (over \$500) | <input type="checkbox"/> Signature Confirmation™                    |
|                                                                          | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Domestic Return Receipt

7016 2070 0000 4815 5574

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

For delivery information, see back of mailpiece.

**OFFICIAL**

Ed Com #1H/Offset NM 8752  
 articles / Case No. 15743

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 \$

Sent To  
 Street  
 City, State

Leesburg Investments, Ltd.  
 Manx Holdings, Inc., General  
 Partner  
 500 N. Akard Street, Ste.1900  
 Dallas, Texas 75201

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

JUN 16 2017  
 Postmark Here

SENDER: COMPI

N 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.

## 1. Article Addressed to:

Leesburg Investments, Ltd.  
 Manx Holdings, Inc., General  
 Partner  
 500 N. Akard Street, Ste.1900  
 Dallas, Texas 75201

9590 9402 1505 5362 6126 37

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

7016 2070 0000 4815 5574

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

## A. Signature

x D. McLeod

☐ Agent☐ Addressee

## B. Received by (Printed Name)

D. McLeod

## C. Date of Delivery

6/20/17

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☐ Insured Mail☐ Priority Mail Express®☒ Registered Mail™☐ Registered Mail-Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery☐ Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 5581

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL** **Case No. 15743**

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 Post** \$

**Sent To** YMC Royalty Company, LP  
 15603 Kuykendahl, Suite 200  
 Houston, Texas 77090

**Street and**  
**City, State**

**Postmark Here** JUN 16 2017  
 USPS

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

7016 2070 0000 4815 5581

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL** **Case No. 15743**

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 Post** \$

**Sent To** Buckeye Royalty Holdings, LLC  
 544 East Liberty Street  
 Wooster, Ohio 44691

**Street and**  
**City, State**

**Postmark Here** JUN 14 2017  
 USPS

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

SENDER: COMPLETE THIS SECTION

LIVERY

- 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 [Signature]☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-19-17

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

1. Article Addressed to:

YMC Royalty Company, LP  
 15603 Kuykendahl, Suite 200  
 Houston, Texas 77090

9590 9402 1505 5362 6126 20

2. Article Number (Transfer from service label)  
 7016 2070 0000 4815 5581

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail<sup>®</sup>☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Delivery Restricted Delivery☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>TM</sup>☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation<sup>TM</sup>☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

LIVERY

- 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 Judy Frank☐ Agent☐ Addressee

B. Received by (Printed Name)

Judy Frank

C. Date of Delivery

6-19-17

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

1. Article Addressed to:

Buckeye Royalty Holdings, LLC  
 544 East Liberty Street  
 Wooster, Ohio 44691

9590 9402 1505 5362 6126 13

2. Article Number (Transfer from service label)

7016 2070 0000 4815 5581

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail<sup>®</sup>☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>TM</sup>☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation<sup>TM</sup>☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt

7016 2070 0000 4815 5604

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

For delivery information, visit [usps.com](http://usps.com)

McElvain/JLK/EK 31 BS2  
 Fed Com #1H (Offset)  
 Parties / Case No. 15743

**OFFICIAL USE**

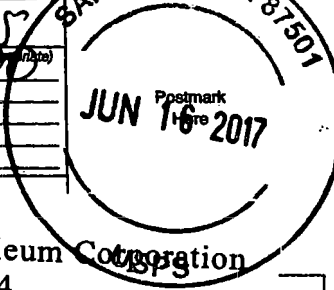
Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total Postage \$

Sent To McKay Petroleum Corporation  
 P.O. Box 2014  
 Roswell, New Mexico 88202

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

McKay Petroleum Corporation  
 P.O. Box 2014  
 Roswell, New Mexico 88202

9590 9402 1505 5362 6126 06

## 2. Article

7016 2070 0000 4815 5604

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)

[Signature]

## C. Date of Delivery

6-19-17

- 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

Date of Delivery

Domestic Return Receipt

7016 2070 0000 4815 5611

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

For delivery information, visit [usps.com](http://usps.com)

McElvain/JLK/EK 31 BS2  
 Fed Com #1H (Offset)  
 Parties / Case No. 15743

**OFFICIAL USE**

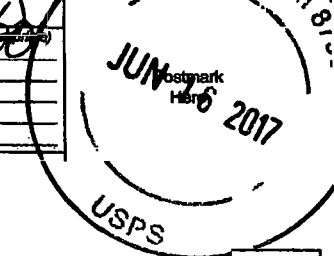
Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total Postage \$

Sent To MTT, LLC  
 2706 Gaye Drive  
 Roswell, New Mexico 88201

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

MTT, LLC  
 2706 Gaye Drive  
 Roswell, New Mexico 88201

9590 9402 1505 5362 6125 90

## 2. Article

7016 2070 0000 4815 5611

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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X [Signature]

- ☐
- Agent
- 
- ☐
- Addressee

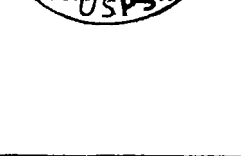
## B. Received by (Printed Name)

Tanner Tall

## C. Date of Delivery

6-19-17

- 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

Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7016 2070 0000 4815 5628

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only MCElvain/JLK/EK 31 BS2

For delivery information, visit **Fed Com #1H Offset**  
**OFFICE** Parties / Case No. 15743

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 \$  
 Sent To  
 Street  
 City, State

Matador Resources Company  
 5400 LBJ Freeway, Suite 1500  
 Dallas, Texas 75240

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 5635

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only MCElvain/JLK/EK 31 BS2

For delivery information, visit **Fed Com #1H Offset**  
**OFFICE** Parties / Case No. 15743

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 \$  
 Sent To  
 Street and  
 City, State

Michael S. Brann  
 P.O. Box 11171  
 Midland, Texas 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Matador Resources Company  
 5400 LBJ Freeway, Suite 1500  
 Dallas, Texas 75240

9590 9402 1505 5362 6125 83

2. Article Number (over \$500)  
 7016 2070 0000 4815 5628

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X *Josh* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Josh* C. Date of Delivery *6/19/17*

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

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

Domestic Return Receipt

RETURNED

7016 2070 0000 4815 5642

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only (McElvain/JLK/EK 31 BS2)  
 For delivery information: Fed Com #114/Offset  
 Parties / Case No. 15743

**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 \$  
 Sent To: Nuevo Seis L.P.  
 PO Box 2588  
 Street: Roswell, New Mexico 88202  
 City, St:

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 5451

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only (McElvain/JLK/EK 31 BS2)  
 For delivery information: Fed Com #114/Offset  
 Parties / Case No. 15743

**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 \$  
 Sent To: Morris E. Schertz  
 P.O. Box 2588  
 Street: Roswell, NM 88002-2588  
 City, St:

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Nuevo Seis L.P.  
 PO Box 2588  
 Roswell, New Mexico 88202

9590 9402 1505 5362 6125 69

2. 7016 2070 0000 4815 5642

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

VERY

A. Signature  
 B. Received by (Printed Name)  
 C. Date of Delivery  
 D. Is delivery address different from item 1? Yes No  
 If YES, enter delivery address below:

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ 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:

Morris E. Schertz  
 P.O. Box 2588  
 Roswell, NM 88002-2588

9590 9402 2002 6123 0740 34

2. 7016 2070 0000 4815 5451

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

A. Signature  
 B. Received by (Printed Name)  
 C. Date of Delivery  
 D. Is delivery address different from item 1? Yes No  
 If YES, enter delivery address below:

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



7016 2070 0000 4815 5468

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, see PS Form 3800, April 2015 PSN 7530-02-000-9053

Official Receipt for Delivery Information  
 Ed Com #1H / OFFICIAL  
 Articles / Case No. 157435, N

**OFFICIAL**

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 \$

Sent To  
 Street and  
 City, State

Rolla R. Hinkle  
 105 West 3rd  
 Roswell, NM 88002

Postmark  
 JUN 16 2017  
 USPS

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE

IVERY

- 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:

Rolla R. Hinkle  
 105 West 3rd  
 Roswell, NM 88002

9590 9402 2002 6123 0740 41

2. Article Number (Transfer from service label)

7016 2070 0000 4815 5468

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

Domestic Return Receipt

A. Signature

Ami Moody

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Ami Moody

C. Date of Delivery

6/19/17

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

☐ Yes  
☐ No

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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

Domestic Return Receipt

7016 2070 0000 4815 5475

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, see PS Form 3800, April 2015 PSN 7530-02-000-9053

Official Receipt for Delivery Information  
 Ed Com #1H / OFFICIAL  
 Articles / Case No. 157435, N

**OFFICIAL**

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 \$

Sent To  
 Street and  
 City, State

Charles R. Wiggins  
 110 N. Marienfield, Suite 160  
 Midland, TX 79701

Postmark  
 JUN 16 2017  
 USPS

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE

IVERY

- 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:

Charles R. Wiggins  
 110 N. Marienfield, Suite 160  
 Midland, TX 79701

9590 9402 2002 6123 0740 58

2. Article Number (Transfer from service label)

7016 2070 0000 4815 5475

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

A. Signature

Charles R. Wiggins

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Charles R. Wiggins

C. Date of Delivery

6/19/17

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

☐ Yes  
☐ No

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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

Domestic Return Receipt

7016 2070 0000 4815 5482

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL USE**

McElvain/JLK/EK 31 852  
 Fed Com #1H / Offset  
 Parties / Case No. 15743

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

Postage \$  
 Total \$

Sent To  
 Street Keenan C. Schertz  
 City, St Roswell, New Mexico 88203-2626

Postmark JUN 18 2017

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 5499

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICIAL USE**

McElvain/JLK/EK 31 852  
 Fed Com #1H / Offset  
 Parties / Case No. 15743

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

Postage \$  
 Total \$

Sent To  
 Street Cayle A. Schertz  
 City, St Roswell, New Mexico 88202

Postmark JUN 18 2017

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 8.
- 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:

Keenan C. Schertz  
 1407 S. Sunset Avenue  
 Roswell, New Mexico 88203-2626

9590 9402 2002 6123 0740 65

## 2. Article

7016 2070 0000 4815 5482

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

## A. Signature

X

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

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

- ☐ Yes  
☐ No

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail
- ☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Total 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:

Cayle A. Schertz  
 PO Box 2588  
 Roswell, New Mexico 88202

9590 9402 2002 6123 0740 72

## 2. Article

7016 2070 0000 4815 5499

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

## A. Signature

X

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

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

- ☐ Yes  
☐ No

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Total Delivery

(over \$500)

Domestic Return Receipt

7016 2070 0000 4815 5505

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **OFFICIAL** Fed Com #14 / Offset  
 Parties Case No. 15743

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 \$

Sent to: Cecil W. Rounsaville  
 2399 Cuthbert Ave.  
 Street Midland, Texas 79701  
 City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9055 See Reverse for Instructions

RETURNED

7016 2070 0000 4815 5512

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **OFFICIAL** Fed Com #14 / Offset  
 Parties Case No. 15743

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 \$

Sent to: Joyce M. Snider  
 4506 Norwood Street  
 Street Midland, Texas 79707  
 City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9055 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:

Joyce M. Snider  
 4506 Norwood Street  
 Midland, Texas 79707

9590 9402 2002 6123 0740 96

2. Article:

7016 2070 0000 4815 5512

PS Form 3811, July 2015 PSN 7530-02-000-9055

A. Signature ☒ Agent  
 X Joyce Snider Address

B. Received by (Printed Name) C. Date of Delivery  
 Joyce Snider 6/20/17

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

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express<sup>®</sup>  
☐ Adult Signature Restricted Delivery ☒ Registered Mail<sup>™</sup>  
☐ Certified Mail<sup>®</sup> ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation<sup>™</sup>  
☐ Insured Mail Restricted Delivery (over \$500) ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 5529

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information: **McElvain/JLK/ET 31-DB2**  
**Fed Com #1H/Offset**  
**Parties / Case No. 15743**

**OFFICIAL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee to postage):  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$ 2.80

**Total Post** \$ 6.25

**Sent To** Lou Ellen Reneau Matson, Trustee  
 Matson Revocable Trust Agreement  
 dated December 14, 2005  
**Street and** 600 Helen Greathouse Circle  
**City, State** Midland, Texas 79707

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 5536

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information: **McElvain/JLK/ET 31-DB2**  
**Fed Com #1H/Offset**  
**Parties / Case No. 15743**

**OFFICIAL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee to postage):  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$ 2.80

**Total P** \$ 6.25

**Sent To** Lou Ellen Reneau Matson,  
 Trustee Of the Marital Trust  
 600 Helen Greathouse Circle  
 Midland, Texas 79707

PS Form 3800, April 2015 PSN 7530-02-000-9053 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:

Lou Ellen Reneau Matson, Trustee  
 Matson Revocable Trust Agreement  
 dated December 14, 2005  
 600 Helen Greathouse Circle  
 Midland, Texas 79707

9590 9402 2002 6123 0741 02

2. Article Number (Transfer from service label)

7016 2070 0000 4815 5529

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

A. Signature

X Lou R. Matson

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Lou R. Matson

C. Date of Delivery

6-21-17

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<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☒ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

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:

Lou Ellen Reneau Matson,  
 Trustee Of the Marital Trust  
 600 Helen Greathouse Circle  
 Midland, Texas 79707

9590 9402 2002 6123 0741 19

2. Article Number (Transfer from service label)

7016 2070 0000 4815 5536

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

DELIVERY

A. Signature

X Lou R. Matson

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Lou R. Matson

C. Date of Delivery

6-21-17

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<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☒ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 5543

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only MCEIVAIN/JLK/EK 31 852

For delivery information, visit **Fed Com #1A/Offset**  
**OFFICIAL** Parties / Case No. 19743

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 \$

Sent To  
 Street  
 City, St

Rhombus Operating Co. LTD  
 PO Box 627  
 Littleton, CO 80160

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

7015 1520 0002 0438 8239

U.S. Postal Service<sup>™</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only MCEIVAIN/JLK/EK 31 852

For delivery information, visit **Fed Com #1H/Offset**  
**OFFICIAL** Parties / Case No. 19743

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 Post \$

Sent To  
 Street and  
 City, State

Seely Oil Company  
 815 West 10th Street  
 Fort Worth, TX 76102

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

SENDER: COMPLETE

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.

Rhombus Operating Co. LTD  
 PO Box 627  
 Littleton, CO 80160

9590 9402 2002 6123 0741 26

2. Article Number (Transfer from outside label)

7016 2070 0000 4815 5543

Restricted Delivery

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

Domestic Return Receipt

A. Signature  
 X [Signature]  
☐ Agent  
☐ Addressee

B. Received by (Printed Name)  
 Leticia Chavez

C. Date of Delivery  
 6-23-17

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<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE

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.

1. Article Addressed to:

Seely Oil Company  
 815 West 10th Street  
 Fort Worth, TX 76102

9590 9401 0126 5225 1925 74

2. 7015 1520 0002 0438 8239

Restricted Delivery

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

Domestic Return Receipt

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Confirmation Restricted Delivery

7015 1520 0002 0438 8222

U.S. Postal Service<sup>®</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **Fed Com #1H / Offset**

**OFFICE** Part 15743

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 \$

**Magnum Hunter Production Company, Inc.**  
**909 Lake Carolyn Prkway #600**  
**Irving, Texas 75039**

PS Form 3800, April 2015 PSN 7530-02-000-9004 See Reverse for Instructions

McElvain/JLK/EK 31 B52

Fed Com #1H / Offset

Part 15743

SPS

JUN 16 2017

Postmark

JUN 16 2017

SPS

JUN 16 2017

SPS

JUN 16 2017

SPS

JUN 16 2017

SPS

JUN 16 2017

SPS

## DEF. 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 Company, Inc.**  
**909 Lake Carolyn Prkway #600**  
**Irving, Texas 75039**

9590 9401 0126 5225 1925 81

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

7015 1520 0002 0438 8222

PS Form 3800, July 2015 PSN 7530-02-000-9003

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *T. Allen*☐ Agent☐ Addressee

## B. Received by (Printed Name)

*T. Allen*

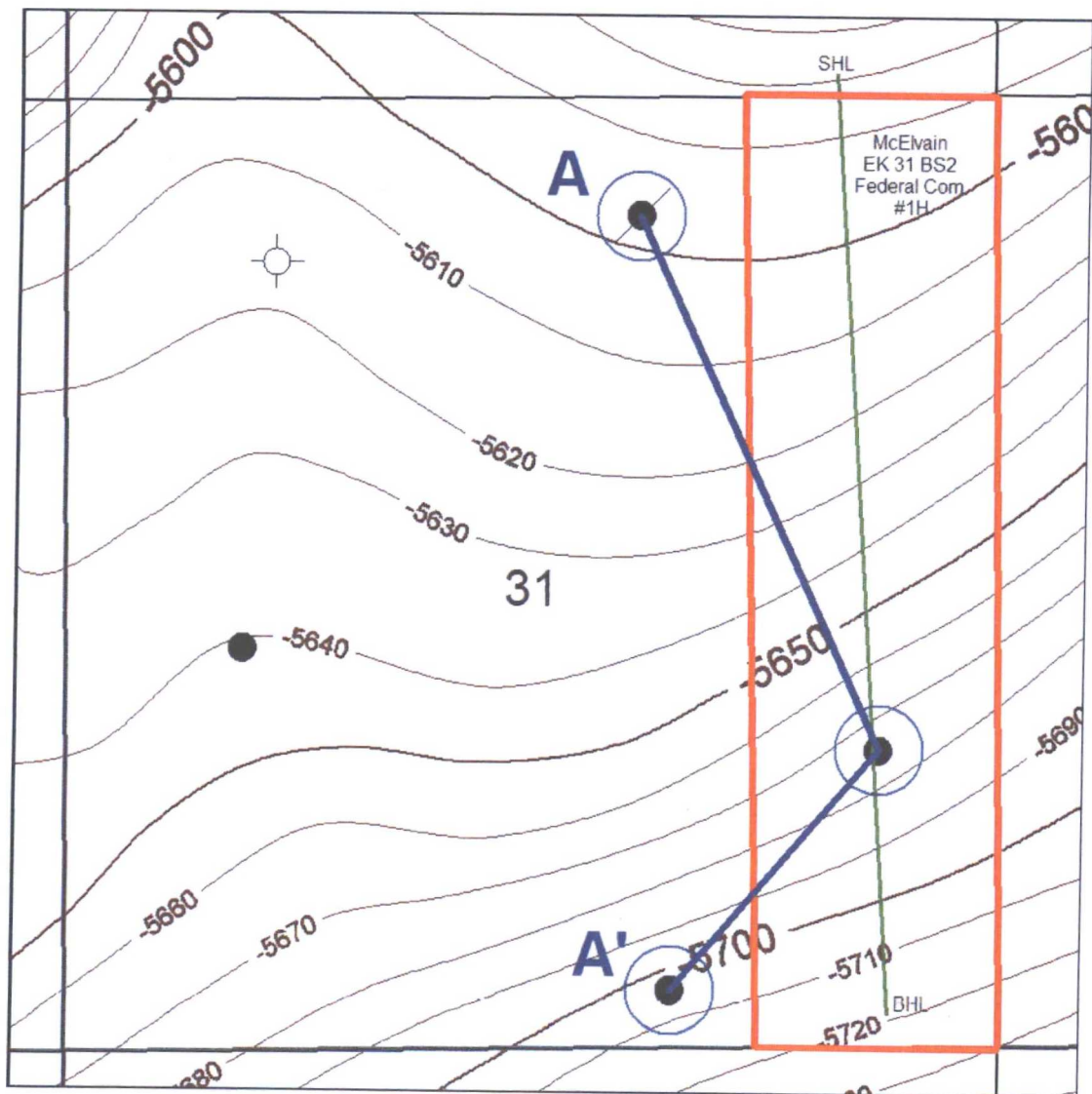
## C. Date of Delivery

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<sup>®</sup>☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Joint Delivery☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>™</sup>☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation<sup>™</sup>☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



Structure map on the top of the 2nd Bone Spring sand



A

30025251880000  
 KAISER-FRANCIS OIL COMPANY  
 MCELVAIN FEDERAL 2  
 660 FNL 1980 FEL  
 TWP: 18 S - Range: 34 E - Sec. 31

3250 ft

30025358410001  
 CHISOLM ENERGY  
 WAPITI 31 FEDERAL 1  
 S2 NE SE  
 TWP: 18 S - Range: 34 E - Sec. 31

1762 ft

30025376430000  
 CHISOLM ENERGY  
 WAPITI 31 FEDERAL 2  
 330 FSL 1830 FEL  
 TWP: 18 S - Range: 34 E - Sec. 31

A'

P &amp; A 7/31/1985

Produces from 1st Bone Spring sand at  
 9104'-9155'

