

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

**APPLICATION OF DEVON ENERGY
PRODUCTION COMPANY, L.P. FOR
COMPULSORY POOLING, EDDY**

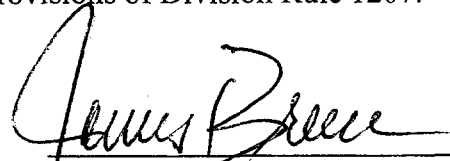
Case No. 13,732

AFFIDAVIT OF NOTICE

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

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

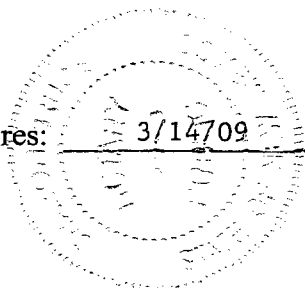
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Devon Energy Production Company, L.P., and have personal knowledge of the matters stated herein.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses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



James Bruce

SUBSCRIBED AND SWORN TO before me this 17th day of July, 2006 by James Bruce.

My Commission Expires: _____





Notary Public

OIL CONSERVATION DIVISION

CASE NUMBER

EXHIBIT NUMBER 2

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruce@aol.com

June 1, 2006

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P., regarding the W½ of Section 22, Township 19 South, Range 31 East, N.M.P.M., Eddy County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 22, 2006, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Thursday, June 15, 2006 if you intend to participate at the hearing.

Very truly yours,



James Bruce

Attorney for Devon Energy Production Company, L.P.

— EXHIBIT A —

EXHIBIT A

WORKING INTEREST OWNERS

**ARENOSO 22 FED. COM. WELL NO. 1
W/2 SECTION 22-T19S-R31E
EDDY COUNTY, NEW MEXICO**

ABC RENTAL TOOL CO. INC.
P O BOX 1500
HOBBS NM 88241

BEN ALEXANDER
4002 16TH ST #4315
LUBBOCK TX 79416

DASCO ENERGY CORPORATION
c/o AMERICAN ST BANK TRUST DEPT
P O BOX 1401
LUBBOCK TX 79408

EGL RESOURCES INC.
P O BOX 10886
MIDLAND TX 79702

FONAY OIL & GAS LLC
P O BOX 1708
HOBBS NM 88241

KENT GABEL
C/O SUDAN FEEDYARD
P O BOX 9
SUDAN TX 79371

LOTHIAN OIL INC.
ATTN VINCE BORELLO
P O BOX 13
MIDLAND TX 79702

LYNX PETROLEUM CONSULTANTS INC.
P O BOX 1708
HOBBS NM 88241

MARBOB ENERGY CORPORATION
P O BOX 227
ARTESIA NM 88211-0227

MCVAY DRILLING COMPANY
P O DRAWER 1348
HOBBS NM 88241

MOUTRAY PROPERTIES LLC
P O BOX 1598
CARLSBAD NM 88241

POWDER HORN INVESTMENTS LLC
P O BOX 2503
HOBBS NM 88241

LARRY R SCOTT
P O BOX 1708
HOBBS NM 88241

SHACKLEFORD OIL COMPANY
P O BOX 10665
MIDLAND TX 79702

WATSON TRUCK & SUPPLY INC.
P O BOX 10
HOBBS NM 88241

U.S. Postal Service
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our web site at www.usps.com

OFFICIAL USE

UNIT ID: 0574

Postage: 0.63

Postmark Here: 3007 7-2-40

Return Fee (Endorsement Required): 1.80

Restricted Fee (Endorsement Required): 1.80

Clerk: QX8800

06/01/06

Total Postage & Fees: \$

Sent To: LARRY R SCOTT
Street, Apt. No., or PO Box No.: P O BOX 1708
City, State, ZIP+4: HOBBS NM 88241

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LOTHIAN OIL INC
ATTN VINCE BORELLO
P O BOX 13
MIDLAND TX 79702

2. Article Number
(Transfer from service label)

7005 2570 0000 4603 6010

PS Form 3811, February 2004

Domestic Return Receipt D-A 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LARRY R SCOTT
P O BOX 1708
HOBBS NM 88241

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Larry R Scott*

B. Received by (Printed Name): *L Scott*

C. Date of Delivery: *6/1/06*

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number
(Transfer from service label)

7005 2570 0000 4604 3506

PS Form 3811, February 2004

Domestic Return Receipt D-A 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Larry R Scott*

B. Received by (Printed Name): *Vince Borello*

C. Date of Delivery: *06/01/06*

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number
(Transfer from service label)

7005 2570 0000 4603 6010

PS Form 3811, February 2004

Domestic Return Receipt D-A 102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our web site at www.usps.com

UNIT ID: 0574

Postage: 0.63

Certified Fee: 2.40

Return Receipt Fee (Endorsement Required): 1.80

Restricted Delivery Fee (Endorsement Required): 1.80

Total Postage & Fees: \$ 4.85

Sent To: LOTHIAN OIL INC
Street, Apt. No., or PO Box No.: ATTN VINCE BORELLO
City, State, ZIP+4: MIDLAND TX 79702

Sent To

LOTHIAN OIL INC
ATTN VINCE BORELLO
P O BOX 13
MIDLAND TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 0.63 UNIT ID: 0574
 Certified Fee 2.40
 Return Receipt Fee (Endorsement Required) 1.25
 Restricted Delivery Fee (Endorsement Required) 4.00
 Total Postage & Fees 8.28

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

EGT RESOURCES INC
 P.O. BOX 10886
 MIDLAND TX 79702

Postmark Here
 Clerk: 06/01/06

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4603 5983

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4603 5983

PS Form 3811, February 2004

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4603 5990

PS Form 3811, February 2004

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4603 5983

PS Form 3811, February 2004

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Signature]
☐ Agent
☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 0.63 UNIT ID: 0574
 Certified Fee 2.40
 Return Receipt Fee (Endorsement Required) 1.25
 Restricted Delivery Fee (Endorsement Required) 4.00
 Total Postage & Fees 8.28

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

EGT RESOURCES INC
 P.O. BOX 10886
 MIDLAND TX 79702

Postmark Here
 Clerk: 06/01/06

1. Article Addressed to:
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4603 5990

PS Form 3811, February 2004

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

POSTNET MAIL

JAMES BRUCE
P.O. BOX 1066
SANTA FE, NM 87504

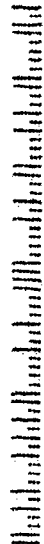
7005 2570 0000 4604 3513

1ST NOTICE 06-26-06
2ND NOTICE 7-11
RETURN 7-11



SHACKLEFORD OIL COMPANY
P O BOX 10665
MIDLAND TX 79702

7970247665-6978924/1036



64

U.S. POSTAGE
PAID
TESQUILA, NM
JUN 04-06
AMOUNT
\$4.88
9261 79702
00075525-04

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

MIDLAND TX 79702 OFFICIAL USE

	Postage \$	0.63	UNIT ID: 0574
Certified Fee	0.63		
Return Receipt Fee (Endorsement Required)	1.85		
Restricted Delivery Fee (Endorsement Required)	2.40		
Total Postage & Fees	4.88		

Sent To
SHACKLEFORD OIL COMPANY
P O BOX 10665
MIDLAND TX 79702
City, State, ZIP+4

Postmark Date
JUN 1 2006
9002-1-CAW
06/01/06

PS Form 3800, June 2002 See Reverse for Instructions

7005 2570 0000 4604 3513

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

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

OFFICIAL USE

Postage \$ 6.03 Postmark Here

Return Receipt Fee (Endorsement Required) 2.40

Restricted Delivery Fee (Endorsement Required) 1.85

Total Postage & Fees \$ 10.28

Sent To

BEN ALEXANDER
 4002 18TH ST #4315
 LUBBOCK TX 79416

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BEN ALEXANDER
 4002 18TH ST #4315
 LUBBOCK TX 79416

2. Article Number
 (Transfer from service label)

7005 2570 0000 4603 5969

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ABC RENTAL TOOL CO INC
 P O BOX 1500
 HOBBS NM 88241

2. Article Number
 (Transfer from service label)

7005 2570 0000 4603 5952

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Mandy Ortiz ☒ Agent ☐ Addressee

B. Received by (Printed Name) Mandy Ortiz C. Date of Delivery 6-5-04

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

If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) Jessica Buato C. Date of Delivery 6/6/06

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

If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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

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

OFFICIAL USE

Postage 0.63 Postmark Here 6-5-04

Certified 2.40

Return Receipt Fee 1.85

Restricted Delivery Fee (Endorsement Required) 4.88

Total Postage & Fees \$ 9.76

UNIT ID: 0574

Clerk: 018800

06/01/06

Sent To

ABC RENTAL TOOL CO INC
 P O BOX 1500
 HOBBS NM 88241

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information, visit our website at www.usps.com.

HOBBS, NM 88241 OFFICIAL USE

Postage \$	0.63	UNIT ID: 0574
Certified Fee	3.18	
Return Receipt Fee (Endorsement Required)	4.40	
Restricted Delivery Fee (Endorsement Required)	1.85	
Total Postage & Fees \$	9.06	

Postmark Here
 9002 1 - NPFK: 0X8800
 06/01/06

Sent To
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4[®]
 MCWAY DRILLING COMPANY
 P O DRAWER 1348
 HOBBS NM 88241

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 MOUTRAY PROPERTIES LLC
 P O BOX 1598
 CARLSBAD NM 88241

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4604 3476

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 JIM C. Date of Delivery
 06/01/06

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

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Domestic Return Receipt **D-A**
 102596-02-M-1540

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 MCWAY DRILLING COMPANY
 P O DRAWER 1348
 HOBBS NM 88241

2. Article Number
 (Transfer from service label)
 7005 2570 0000 4604 3476

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 JIM C. Date of Delivery
 06/01/06

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

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Domestic Return Receipt **D-A**
 102596-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information, visit our website at www.usps.com.

HOBBS, NM 88241 OFFICIAL USE

Postage \$	0.63	UNIT ID: 0574
Certified Fee	2.40	
Return Receipt Fee (Endorsement Required)	9.06	
Restricted Delivery Fee (Endorsement Required)	1.85	
Total Postage & Fees \$	13.94	

Postmark Here
 9002 1 - NPFK: 0X8800
 06/01/06

Sent To
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4[®]
 MOUTRAY PROPERTIES LLC
 P O BOX 1598
 CARLSBAD NM 88241

7005 2570 0000 4604 3476

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance or Coverage Provided)
For delivery information visit our Web site at www.usps.com

OFFICIAL USE
HOBBS, NM 88241

Postage	\$ 4.88
Certified Fee	\$ 1.40
Return Receipt Fee (Endorsement Required)	\$ 1.85
Restricted Delivery Fee (Endorsement Required)	\$ 4.88
Total Postage & Fees	\$ 12.91

Postmark Here
06/01/06
Clerk: M99900

Sent To
LYNX PETROLEUM CONSULTANTS INC
Street, Apt. No.,
P.O. Box No. 88241
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7005 2570 0000 0252 5005

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

KENT GABEL
C/O SUDAN FEEDYARD
P.O. BOX 9
SUDAN TX 79371

2. Article Number
(Transfer from service label)

7005 2570 0000 4603 6003

PS Form 3811, February 2004

Domestic Return Receipt D-A

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LYNX PETROLEUM CONSULTANTS INC
P.O. BOX 1708
HOBBS NM 88241

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

2. Article Number
(Transfer from service label)

7005 2570 0000 4603 6027

PS Form 3811, February 2004

Domestic Return Receipt D-A

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

PS Form 3800, June 2002 See Reverse for Instructions

Sent To
Street, Apt. No.,
or P.O. Box No.
City, State, ZIP+4
KENT GABEL
C/O SUDAN FEEDYARD
P.O. BOX 9
SUDAN TX 79371

Postage	\$ 0.63
Certified Fee	\$ 1.40
Return Receipt Fee (Endorsement Required)	\$ 1.85
Restricted Delivery Fee (Endorsement Required)	\$ 4.88
Total Postage & Fees	\$ 8.76

Postmark
06/01/06
Clerk: M99900

OFFICIAL USE
SUDAN TX 79371

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance or Coverage Provided)
For delivery information visit our Web site at www.usps.com

7005 2570 0000 4603 6003

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 0.63 UNIT ID: 0574

Postmark Here
 JUN 5 2006
 79408

Clerk: 0X8800
 06/01/06

Sent To
 WATSON TRUCK & SUPPLY INC
 P O BOX 10
 HOBBS NM 88241

Street, Apt. No.,
 or PO Box No.

City, State, ZIP+4

PS Form 3811, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DASCO ENERGY CORPORATION
 60 AMERICAN ST BANK TRUST DEPT
 P O BOX 1401
 LUBBOCK TX 79408

2. Article Number
 (Transfer from service label)

7005 2570 0000 4603 5976

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Sonia Lopez

B. Received by (Printed Name)
 Sonia Lopez

C. Date of Delivery
 JUN - 5 2006

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

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Domestic Return Receipt **D-A**

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

WATSON TRUCK & SUPPLY INC
 P O BOX 10
 HOBBS NM 88241

2. Article Number
 (Transfer from service label)

7005 2570 0000 4604 3520

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Sonia Lopez

B. Received by (Printed Name)
 Sonia Lopez

C. Date of Delivery
 06/06/06

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

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Domestic Return Receipt **D-A**

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 1.85
 Certified Fee \$ 1.85
 Return Receipt Fee (Endorsement Required) \$ 4.88
 Restricted Delivery Fee (Endorsement Required) \$ 4.88
 Total Postage & Fees \$ 13.46

Postmark Here
 JUN 5 2006
 79408

Clerk: 0X8800
 06/01/06

Sent To
 DASCO ENERGY CORPORATION
 60 AMERICAN ST BANK TRUST DEPT
 P O BOX 1401
 LUBBOCK TX 79408

Street, Apt. No.,
 or PO Box No.

City, State, ZIP+4

PS Form 3811, June 2002 See Reverse for Instructions

7005 2570 0000 4604 3520

7005 2570 0000 4603 5976

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

ARTESIA NM 88211-0227
OFFICIAL USE

Postage	\$ 0.63
Certified Fee	\$ 2.40
Return Receipt Fee (Endorsement Required)	\$ 1.85
Restricted Delivery Fee (Endorsement Required)	\$ 3.00
Total Postage & Fees	\$ 7.88

Sent To
Street, Apt. No., or PO Box No.
MARBOR ENERGY CORPORATION
P O BOX 227
ARTESIA NM 88211-0227
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

POWDER HORN INVESTMENTS LLC
P O BOX 2803
HOBBS NM 88241

2. Article Number
(Transfer from service label)

7005 2570 0000 4604 3490

PS Form 3811, February 2004

Domestic Return Receipt D-A

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Certified Mail
☐ Express Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MARBOR ENERGY CORPORATION
P O BOX 227
ARTESIA NM 88211-0227

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

2. Article Number
(Transfer from service label)
7005 2570 0000 4604 3469

PS Form 3811, February 2004

Domestic Return Receipt D-A

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Certified Mail
☐ Express Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

2. Article Number
(Transfer from service label)
7005 2570 0000 4604 3469

PS Form 3811, February 2004

Domestic Return Receipt D-A

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

ARTESIA NM 88211-0227
OFFICIAL USE

Postage	\$ 0.63
Certified Fee	\$ 2.40
Return Receipt Fee (Endorsement Required)	\$ 1.85
Restricted Delivery Fee (Endorsement Required)	\$ 3.00
Total Postage & Fees	\$ 7.88

Sent To
Street, Apt. No., or PO Box No.
POWDER HORN INVESTMENTS LLC
P O BOX 2803
HOBBS NM 88241
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions