

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

**APPLICATION OF DEVON ENERGY PRODUCTION
COMPANY, L.P. FOR APPORVAL OF FIVE NON-
STANDARD GAS SPACING AND PRORATION
UNITS, SAN JUAN COUNTY, NEW MEXICO.**

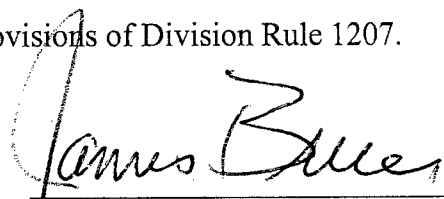
Case No. 13,899

AFFIDAVIT OF NOTICE

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

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

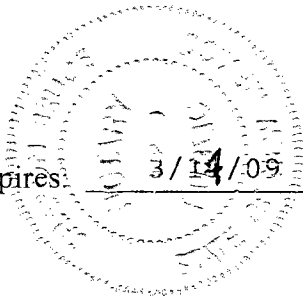
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Devon Energy Production Company, L.P.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the working interest owners entitled to receive notice 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.

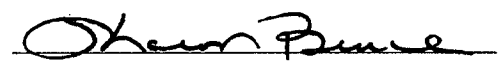


James Bruce

SUBSCRIBED AND SWORN TO before me this 11th day of April, 2007 by James Bruce.

My Commission Expires: _____





Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 9

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

March 22, 2007

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons listed on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for approval of five non-standard gas spacing and proration units, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P. The well units are located within the Northeast Blanco Unit, located in San Juan and Rio Arriba Counties, New Mexico, as more particularly described in the application. This matter is scheduled for hearing at 8:15 a.m. on Thursday, April 12, 2007, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an offset interest owner, 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, April 5, 2007 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

BP America Production Company
ATTN: Michael D. Rodgers
501 Westlake Park Blvd., 19.108 WL1
Houston, TX 77079

Canaan Resources, LLC
ATTN: Marsha Gore
One Leadership Square
211 North Robinson Avenue, Suite N1000
Oklahoma City, OK 73102

ConocoPhillips Company / Burlington Resources
Oil & Gas Company, LP
ATTN: J. Robert Helton, Jr.
P O Box 4289
Farmington, NM 87499-4289

Frank C. Davis, III
3219 Bryn Mawr Drive
Dallas, TX 75225

Diverse Energy Investments
ATTN: Paula Fleming
Two Galleria Tower
13455 Noel Road, Suite 2000
Dallas, TX 75240

Charles W. Gay
c/o James M. Raymond, AIF
P. O. Box 291445
Kerrville, TX 78029-1445

Lorrayn Gay Hacker
c/o James M. Raymond, AIF
P. O. Box 291445
Kerrville, TX 78029-1445

Maydell Miller Mast Trust
James M. Raymond, Trustee
P. O. Box 291445
Kerrville, TX 78029-1445

T. H. McElvain Oil & Gas Ltd Partnership
McElvain Oil & Gas Properties, Inc., GP
ATTN: Denise Greer
1050 17th Street, Suite 1800
Denver, CO 80265

J & M Raymond, Ltd.
c/o Raymond & Sons I, LLC
ATTN: James M. Raymond
P. O. Box 291445
Kerrville, TX 78029-1445

B & N Co., LP
c/o Devon Energy Production Company, L.P.
20 North Broadway
Oklahoma City, OK 73102

BN Non-Coal LLC
c/o Devon Energy Production Company, L.P.
20 North Broadway
Oklahoma City, OK 73102

Dugan Production Corp.
P.O. Box 420
Farmington, New Mexico 87499

Bolack Minerals Company
3901 Bloomfield Highway
Farmington, New Mexico 87401

Energen Resources Corporation
2198 Bloomfield Highway
Farmington, New Mexico 87401

Williams Production Company
ATTN: Vern Hansen
One Williams Center
P.O. Box 3102 MS 25-1
Tulsa, Oklahoma 74101

San Juan Basin Trust
ATTN: Real Property Administration
P.O. Box 7500
Bartlesville, Oklahoma 74004

Lee W. and Jo Ann Montgomery Moore
403 N. Marienfeld
Midland, Texas 79701

Douglas Cameron McLeod
PetroGulf Corporation
518 17th Street, Suite 1455
Denver, Colorado 80202

Lance Reemtsma
2601 Grant Street
Berkeley, California 94703-1915

David A. Pierce
P.O. Box 4140
Farmington, New Mexico 87499

David A Pierce
P.O. Box 2802
Farmington, New Mexico 87499

Robert P. Soens
808 Enderby Drive
Alexandria, VA 22302

Leslie Oshea
120 E. 79th Street, Apartment 11E
New York City, New York 10021

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:

Charles W. Gay
c/o James M. Raymond, AIF
P.O. Box 291445
Kerrville, TX 78029-1445

2. Article Number
(Transfer from service label)

7005 1820 0003 8432 4379

PS Form 3811, February 2004

Domestic Return Receipt **D-NAG**

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Robert P. Scaris C. Date of Delivery Feb 21 2004
- 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.

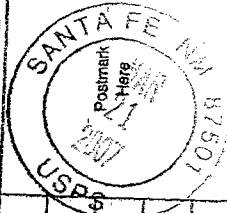
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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



Sent To

Charles W. Gay
c/o James M. Raymond, AIF
P.O. Box 291445
Kerrville, TX 78029-1445

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:

Robert P. Scaris
808 Embassy Drive
Alexandria, VA 22302

2. Article Number
(Transfer from service label)

7005 1820 0003 8432 4225

PS Form 3811, February 2004

Domestic Return Receipt **D-NAG**

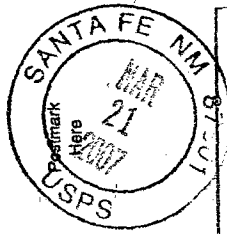
102595-02-M

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



Sent To

Robert P. Scaris
808 Embassy Drive
Alexandria, VA 22302

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.

Article Addressed to:

Frank C. Davis, III
 3219 Bryn Mawr Drive
 Dallas, TX 75225

3. Service Type

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

2. Article Number

(Transfer from service label)

7005 1820 0003 8432 4393

PS Form 3811, February 2004

Domestic Return Receipt

102598-02-M-1540

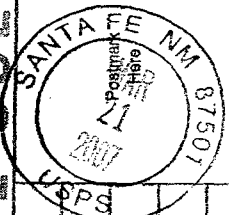
D-1284

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



Sent To

Street, Apt. No., or PO Box No.
 City, State, Zip+4
 Frank C. Davis, III
 3219 Bryn Mawr Drive
 Dallas, TX 75225

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

2. Article Number

(Transfer from service label)

7005 1820 0003 8432 4393

PS Form 3811, February 2004

Domestic Return Receipt

102598-02-M-1540

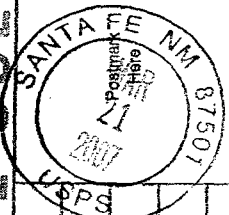
D-1284

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



Sent To

Street, Apt. No., or PO Box No.
 City, State, Zip+4
 Frank C. Davis, III
 3219 Bryn Mawr Drive
 Dallas, TX 75225

7005 1820 0003 8432 4393

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



Sent To
 Street, Apt. No., or PO Box No.
 City, State, Zip+4
 Larca Reamlama
 2001 Grant Street
 Berkeley, California 94703-1915

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:

Larca Reamlama
 2001 Grant Street
 Berkeley, California 94703-1915

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Larca Reamlama 4/2/07
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type

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

2. Article Number

(Transfer from service label)

7005 1820 0003 8432 4256

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

D-1284

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.

Article Addressed to:

Dugan Production Corp.
P.O. Box 420
Farmington, New Mexico 87499

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-14-1540

7005 1820 0003 8432 4324

D-NE99

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) Lee W. Moore C. Date of Delivery 3/24/07
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) Lee W. Moore C. Date of Delivery 3/24/07
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

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

Sent To

Dugan Production Corp.
P.O. Box 420
Farmington, New Mexico 87499
City, State, ZIP+4

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:

Lee W. and Jo Ann Montgomery Moore
403 N. Mainfield
Midland, Texas 79701

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

7005 1820 0003 8432 4270

D-NE99

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

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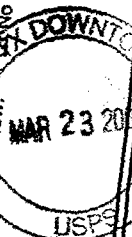
Lee W. and Jo Ann Montgomery Moore
403 N. Mainfield
Midland, Texas 79701
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) P. Bane C. Date of Delivery 3/23/07
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:



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

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

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Canaan Resources, LLC
ATTN: Marsha Gore
One Leadership Square
211 North Robinson Avenue, Suite N1000
Oklahoma City, OK 73102

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

Article Number
(Transfer from service label) 7005 1820 0003 8432 4416
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COMPLETE THIS SECTION ON DELIVERY

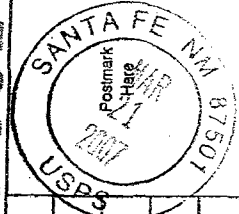
- A. Signature **X** *Marsha Gore* ☒ Agent ☐ Addressee
 B. Received by (Printed Name) *Marsha Gore* Date of Delivery *2-23-07*
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

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



Sent To
 Street, Apt. No., or PO Box No.
 City, State, Zip+4
 Canaan Resources, LLC
 ATTN: Marsha Gore
 One Leadership Square
 211 North Robinson Avenue, Suite N1000
 Oklahoma City, OK 73102

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:

Douglas Cameron McLeod
 PetroQuil Corporation
 818 17th Street, Suite 1455
 Denver, Colorado 80202

COMPLETE THIS SECTION ON DELIVERY

- A. Signature **X** *Douglas Cameron McLeod* ☒ Agent ☐ Addressee
 B. Received by (Printed Name) *Douglas Cameron McLeod* C. Date of Delivery *3/23/07*
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

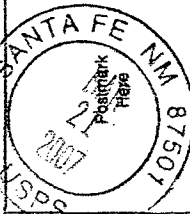
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label) 7005 1820 0003 8432 4263
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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To
 Street, Apt. No., or PO Box No.
 City, State, Zip+4
 Douglas Cameron McLeod
 PetroQuil Corporation
 818 17th Street, Suite 1455
 Denver, Colorado 80202

PS Form 3800, June 2002 See Reverse for Instructions

7005 1820 0003 8432 4416

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.

Article Addressed to:

Diverse Energy Investments
ATTN: Paula Fleming
Two Galleria Towers
13455 Noel Road, Suite 2000
Dallas, TX 75240

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
B. Received by (Printed Name) ☐ Addressee
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
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1820 0003 8432 4386

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

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

Santa Fe NM 87501
Postmark
21
USPS

Sent To
Diverse Energy Investments
ATTN: Paula Fleming
Two Galleria Towers
13455 Noel Road, Suite 2000
Dallas, TX 75240
City, State, ZIP+4

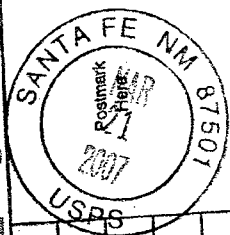
PS Form 3811, February 2004 See Reverse for Instructions

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



Sent To
San Juan Basin Trust
ATTN: Real Property Administration
P.O. Box 7500
Barleesville, Oklahoma 74004
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:

San Juan Basin Trust
ATTN: Real Property Administration
P.O. Box 7500
Barleesville, Oklahoma 74004

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
B. Received by (Printed Name) ☐ Addressee
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
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Transfer from service label) 7005 1820 0003 8432 4287

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

Domestic Return Receipt 0-NEG4

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:

David A Piersa
P.O. Box 2802
Farmington, New Mexico 87499

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

102595-02-M-1540

Domestic Return Receipt **D-N2894**

7005 1820 0003 8432 4232

COMPLETE THIS SECTION ON DELIVERY

A. Signature William Schuchler Agent ☒ Addressee ☐
B. Received by (Printed Name) William Schuchler C. Date of Delivery 4/23/07
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

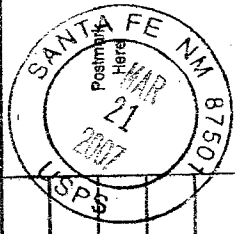
3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☒ Registered ☐ Insured Mail ☐ C.O.D. ☐ Yes ☐ No
4. Restricted Delivery? (Extra Fee) ☐ Yes

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OFFICIAL USE

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



Sent To

Street, Apt. No.,
or PO Box No. David A Piersa
P.O. Box 2802
Farmington, New Mexico 87499
City, State, ZIP+4

PS Form 3811, June 2002

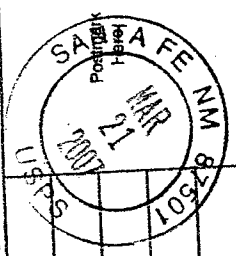
See Reverse for Instructions

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OFFICIAL USE

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



Sent To

J & M Raymond, Ltd.
c/o Raymond & Sons I, LLC
ATTN: James M. Raymond
P.O. Box 291443
Kernville, TX 76029-1445
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:

J & M Raymond, Ltd.
c/o Raymond & Sons I, LLC
ATTN: James M. Raymond
P.O. Box 291443
Kernville, TX 76029-1445

COMPLETE THIS SECTION ON DELIVERY

A. Signature Bob Velders Agent ☐ Addressee ☐
B. Received by (Printed Name) Bob Velders C. Date of Delivery 3/9/07
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☐ Registered ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number
(Transfer from service label)

PS Form 3811

Domestic Return Receipt **D-N2894**

7005 1820 0003 8432 4331

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.

Article Addressed to:

Leslie Oshes
120 E. 79th Street, Apartment 11E
New York City, New York 10021

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee
B. Received by (Printed Name) C. Date of Delivery
C. W. S. L. S. G. 3-23-07
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

Number 7005 1820 0003 8432 4218
from service label)
3811, February 2004 Domestic Return Receipt D-NE04 102595-02-M-1540

U.S. Postal Service[®] RECEIPT
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Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$

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

Postmark Here
MAR 2007
SANTA FE NM 87501

See Reverse for Instructions

Leslie Oshes
120 E. 79th Street, Apartment 11E
New York City, New York 10021

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OFFICIAL USE

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

Sent To
ConocoPhillips Company / Burlington Resources
Oil & Gas Company, LP
ATTN: J. Robert Helton, Jr.
P.O. Box 4289
Farmington, NM 87409-4289
City, State, ZIP+4

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:

ConocoPhillips Company / Burlington Resources
Oil & Gas Company, LP
ATTN: J. Robert Helton, Jr.
P.O. Box 4289
Farmington, NM 87409-4289

COMPLETE THIS SECTION ON DELIVERY

A. Signature Judith Dee ☒ Agent ☐ Addressee
B. Received by (Printed Name) Judith Dee C. Date of Delivery 3-23-07
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 7005 1820 0003 8432 4409
(Transfer from service label)
PS Form 3811, February 2004 Domestic Return Receipt 1820

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.

Article Addressed to:

T. H. McElvain Oil & Gas Ltd Partnership
McElvain Oil & Gas Properties, Inc., GP
ATTN: T. H. McElvain
1050 17th Street, Suite 1800
Denver, CO 80265

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1820 0003 8432 4348
 (Transfer from service label)
 PS Form 3811, February 2004 Domestic Return Receipt D-NE04 102596-02-M-1540

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OFFICIAL USE

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

Sent To

Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 T. H. McElvain Oil & Gas Ltd Partnership
 ATTN: T. H. McElvain
 1050 17th Street, Suite 1800
 Denver, CO 80265

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

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

MAR 23 2007

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number 7005 1820 0003 8432 4348
 (Transfer from service label)
 PS Form 3811, February 2004 Domestic Return Receipt D-NE04 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:

Williams Production Company
 ATTN: Vern Hansen
 One Williams Center
 P.O. Box 3102 MS 25-1
 Tulsa, Oklahoma 74101

3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number
 (Transfer from service label) 7005 1820 0003 8432 4294

PS Form 3811, February 2004 Domestic Return Receipt D-NE04 102596-02-M-1540

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OFFICIAL USE

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

Sent To

Williams Production Company
 ATTN: Vern Hansen
 One Williams Center
 P.O. Box 3102 MS 25-1
 Tulsa, Oklahoma 74101

PS Form 3800, June 2002 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) ☐ Date of Delivery
 C. 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

2. Article Number
 (Transfer from service label) 7005 1820 0003 8432 4294

PS Form 3811, February 2004 Domestic Return Receipt D-NE04 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, on the front if space permits.

Article Addressed to:

Ensign Resources Corporation
2188 Bloomfield Highway
Farmington, New Mexico 87401

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) F. Chavez 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 ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number 7005 1820 0003 8432 4300
 Domestic Return Receipt D-N449
 PS Form 3811, February 2004 102595-02-M-1540

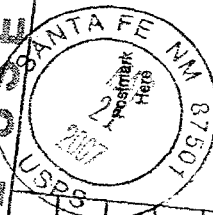
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Postage \$
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 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

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

Ensign Resources Corporation
2188 Bloomfield Highway
Farmington, New Mexico 87401



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

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

Boletk Minerals Company
3801 Bloomfield Highway
Farmington, New Mexico 87401

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:

Boletk Minerals Company
3801 Bloomfield Highway
Farmington, New Mexico 87401

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Theresa Kody 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 ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label)
7005 1820 0003 8432 4317
 Domestic Return Receipt D-N449
 PS Form 3811, February 2004 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.

Article Addressed to:

Lorrayn Gay Hacker
c/o James M. Raymond, Trustee
P.O. Box 291445
Kernville, TX 78029-1445

2. Article Number

(Transfer from service label)

7005 1820 0003 8432 4362

PS Form 3811, February 2004

Domestic Return Receipt 0-NE84

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Bob Vaden*
B. Received by (Printed Name)
Bob Vaden
C. Date of Delivery
3/26/07
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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

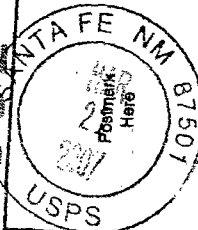
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OFFICIAL USE

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



Sent To

Maydel Miller Mail Trust
James M. Raymond, Trustee
P.O. Box 291445
Kernville, TX 78029-1445

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:

Maydel Miller Mail Trust
James M. Raymond, Trustee
P.O. Box 291445
Kernville, TX 78029-1445

2. Article Number
(Transfer from service label)

7005 1820 0003 8432 4355

PS Form 3811, February 2004

Domestic Return Receipt 0-NE84

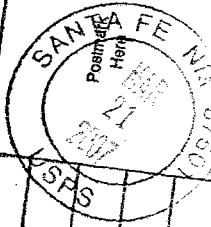
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Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$



Sent To

Lorrayn Gay Hacker
c/o James M. Raymond, AIF
P.O. Box 291445
Kernville, TX 78029-1445

PS Form 3800, June 2002

See Reverse for Instructions


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Track & Confirm

Search Results

Label/Receipt Number: 7005 1820 0003 8432 4423
Status: **Delivered**

Your item was delivered at 3:35 AM on March 26, 2007 in HOUSTON, TX 77079.

[Additional Details >](#)
[Return to USPS.com Home >](#)

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Enter Label/Receipt Number.

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Sent To BP America Production Company ATTN: Michael D. Rodgers 501 Westlake Park Blvd., 19.108 WL1 Houston, TX 77079 Street, Apt. No., or PO Box No. City, State, ZIP+4	
PS Form 3800, June 2002 See Reverse for Instructions	