

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF EDGE PETROLEUM
EXPLORATION COMPANY FOR COMPULSORY
POOLING, LEA COUNTY, NEW MEXICO.

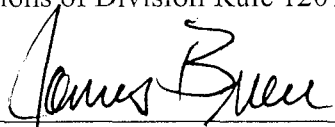
Case No. 13,924

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 Edge Petroleum Exploration Company, 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 letters 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 24th day of May, 2007 by James Bruce.

Notary Public

My Commission Expires: 3/14/09

Oil Conservation Division
Case No. _____
Exhibit No. 6

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruce@aol.com

May 2, 2007

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

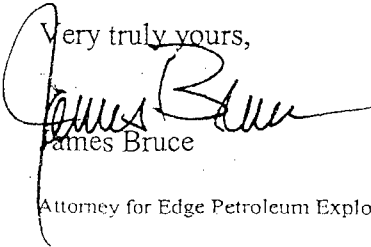
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Edge Petroleum Exploration Company, regarding the SW $\frac{1}{4}$ NW $\frac{1}{4}$ of Section 25, Township 16 South, Range 36 East, N.M.P.M., Lea County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 24, 2007, 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, May 17, 2007, if you intend to participate in the hearing.

Very truly yours,


James Bruce

Attorney for Edge Petroleum Exploration Company

EXHIBIT A

Page 9 of 13
S. Lovington "25" Well No. 1
Lea County, NM

Working Interest Owners:

Chisos, Ltd.

Attn: Ms. Sue Ann Craddock
670 Doña Ana Road, SW
Deming, New Mexico 88030

Pure Energy Group, Inc.

Attn: Mr. Larry Risley
153 Treeline Park, Suite 220
San Antonio, Tx 78209

Yates Petroleum Corporation

Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

Yates Drilling Company

Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

Abo Petroleum Corporation

Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

Myco Industries, Inc.

Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

Chesapeake Exploration Limited Partnership

Attn: Ms. Lynda Townsend
P. O. 18496
Oklahoma City, OK 73154-0496

EXHIBIT

A

Unleased Mineral Owners:

Mr. Anderson Carter, Trustor

Trustee of the Amended and Restated Trust Agreement dated June 7, 1999

P.O. Box 7190
Ruidoso, NM 88355
(505) 258-1878

Trustees of the Coates Energy Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Jenny Roberts Schimpff Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Catherine G. Roberts Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Barry Coates Roberts Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Lisa Stieren Hardeman Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Page 11 of 13
S. Lovington "25" Well No. 1
Lea County, NM

Trustee of the George L. Stieren Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Wendy Stieren Wirth Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Kelly Stieren Daniell Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

Trustee of the Amy E. Stieren Trust

Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
(210) 820-0113

**Bank of America, Trustee f/b/o Maggie Grisso, Pauline E. Martin, Wayne A. Grisso,
and D.H. Grisso Melissa A. Rickman Oil and Gas Management**

Utica Plaza Suite 150
2100 South Utica Avenue
Tulsa, Oklahoma 74114-1436
(918) 591-8015

Randy Geiselman

2700 Racquet Club Dr.
Midland, TX 79705
(432) 682-7900

Dorchester Minerals

Attn: Mr. Brad Ehrman
3838 Oak Lawn Avenue, Suite 300
Dallas, TX 75219-4541
(214) 559-0300

Page 12 of 13
S. Lovington "25" Well No. 1
Lea County, NM

Maecenas Minerals, LLP

Attn: Mrs. Linda Buckner
P.O. Box 176
Abilene, TX 79604
(325) 673-6429

**Mr. Larry B. Hall
c/o Hinkle Law Firm**

Mr. Bud Martin
P.O. Box 3580
Midland, TX 79702
(432) 683-4691

Myrtle Lee Malone

Executor of estate: Mr. Clarence L. Rosh
1630 Warren St.
San Fernando, CA 91340

Blackstone Minerals, LP

Attn: Mr. George Miller
1001 Fannin, Suite 2020
Houston, TX 77002-6709
(713) 445-3200

John W. Pilant & Jean H. Pilant, Trustees of Pilant Family Trust

1533 Sandra Drive
Boulder City, NV 89005

Mercantile Trading Corporation

2200 Ross Ave., Suite 4900 W
Dallas, TX 75201

The Long Trusts

Attn: Mr. Larry Long
P.O. Box 1700
Kilgore, TX 75663
(903) 988-3448

Tom R. Cone

P.O. Box 778
Jay, OK 74346

Cathy Auvenshine aka Cathy McCown

P.O. Box 507
Dripping Springs, TX 78620

Page 13 of 13
S. Lovington "25" Well No. 1
Lea County, NM

Kenneth G. Cone
P.O. Box 11310
Midland, TX 79702
(432) 687-4583

Annis Roberts, Successor Trustee
Vicki Jeanne Saari Special Needs Trust
1230 South 500 West, Apt. 9B
Bountiful, UT 84010


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[FAQs](#)

Track & Confirm

Search Results

Label/Receipt Number: 7006 3450 0001 4326 8454
 Status: Notice Left

We attempted to deliver your item at 2:52 PM on May 4, 2007 in MIDLAND, TX 79706 and a notice was left. It can be redelivered or picked up at the Post Office. If the item is unclaimed, it will be returned to the sender. Information, if available, is updated every evening. Please check again later.

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

Enter Label/Receipt Number.

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Notification Options

Track & Confirm by email

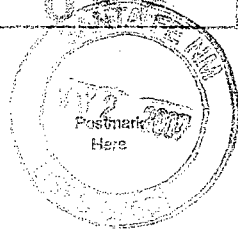
Get current event information or updates for your item sent to you or others by email.

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Preserving the Trust

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CERTIFIED MAIL™ RECEIPT	
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For delivery information, visit our website at www.usps.com	
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.	Kenneth G. Cone P.O. Box 11310
City, State, ZIP+4	Midland, TX 79702
PS Form 3800, August 2006 See Reverse for Instructions	

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

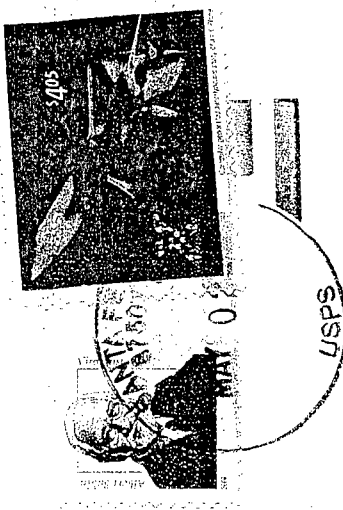
7006 3450 0001 4326 8041

1ST NOTICE 05-11-07
2ND NOTICE
RETURN

John W. Pilant & Jean H. Pilant, Trustees
1533 Sandra Drive
Boulder City, NV 89

NEXT 091 SE 1 39 05/06/07
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
EC: 87504105655 *0969-00569-02-43

4900533434 C006
6750401056



U.S. Postal Service
CERTIFIED MAIL RECEIPT
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For delivery information visit our website at www.usps.com
OFFICIAL USE

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



Sent To
Myrtle Lee Malone
Executor of estate: Mr. Clarence L. Rosh
Street, Apt. No.,
or PO Box No. 1630 Warren St.
City, State, ZIP+4 91340 San Fernando, CA

7006 3450 0001 4326 8041

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

1ST NOTICE 05-16-07
2ND NOTICE _____
RETURN _____

OTF

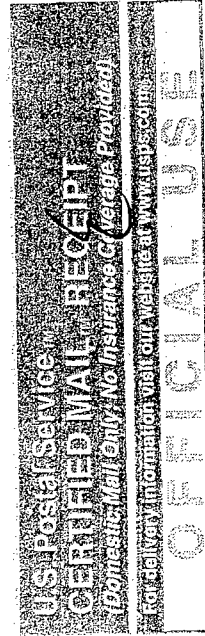
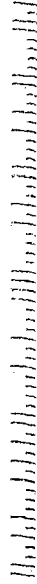
7006 3450 0001 4326 8027



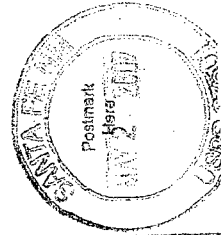
Myrtle Lee Malone
Executor of estate
1630 Warren St.
San Fernando, CA

NIXIE 919 SE 1 30 03/08/07
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
EC: 97504105655 *0960-00572-02-43

9134011641 0077 9750401056



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



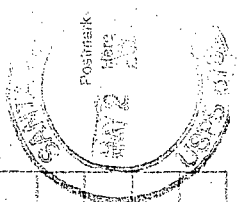
Sent to
John W. Plant & Jean H. Plant, Trustees of Plant Family Trust
1533 Sandra Drive
Boulder City, NV 89005
City, State, ZIP+4

7006 3450 0002 4326 8042

U.S. POSTAL SERVICE
CERTIFIED MAIL PERMIT NO. 1111
(Domestic Mail Only - Insurance Charge Provided)

For delivery information, call 1-800-375-8777
OFFICIAL USE

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



Sent To
Mercantile Trading Corporation
Street, Apt. No., 2200 Ross Ave, Suite 4500 W
or PO Box No. Dallas, TX 75201
City, State, ZIP+4

7006 3450 0000 1234 5678 9012

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:

Abco Petroleum Corporation
Attn: Mr. Chuck Mann
105 S Fourth St
Artesia, NM 88210

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 7846

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

Signature Kathy Donaghe ☐ Agent
B. Received by (Printed Name) KATHY DONAGHE 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 ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal Service

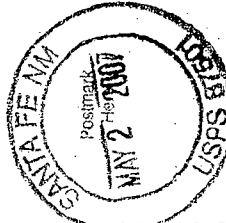
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OFFICIAL USE

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



Sent To
Abco Petroleum Corporation
Attn: Mr. Chuck Mann
105 S Fourth St
Artesia, NM 88210

9482 7224 1000 054E 9002

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Cover - provided)

OFFICIAL USE

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

Sent To
Randy Gettelman
2700 Racer Club Dr.
Midland, TX 79705

Postmark: SANTA FE NM MAY 2 2007

9482 7224 1000 054E 9002

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:

Randy Gettelman
2700 Racer Club Dr.
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature Randy Gettelman ☒ Agent
B. Received by (Printed Name) Randy Gettelman C. Date of Delivery 5-2-07
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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)

7006 3450 0001 4326 7983

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.

Article Addressed to:

Myco Industries, Inc.
Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

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

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 7006 3450 0001 4326 7853

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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



Myco Industries, Inc.
Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

Sent to

Street, Apt., Box, or P.O. Box No.
City, State, Zip+4

0982 9264 7000 0546 9002

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

Sent to

Chesapeake Exploration Limited Partnership
Attn: Ms. Lynda Townsend
P.O. 18496
Oklahoma City, OK 73154-0496

Postmark Here
MAY 2 2007
USPS 87501

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:

Chesapeake Exploration Limited Partnership
Attn: Ms. Lynda Townsend
P.O. 18496
Oklahoma City, OK 73154-0496

COMPLETE THIS SECTION ON DELIVERY

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

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 7006 3450 0001 4326 7860

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

0982 9264 7000 0546 9002

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:

Chiao, Ltd.
Attn: Ms. Sue Ann Craddock
670 Dona Ana Road, SW
Denver, New Mexico 88030

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 7532

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
Mr. Anderson Carter, Trustor 5-5-7
- 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

U.S. Postal Service

CERTIFIED MAIL RECEIPT

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

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

Sent to

Chiao, Ltd.
Attn: Ms. Sue Ann Craddock
670 Dona Ana Road, SW
Denver, New Mexico 88030



2292 9264 1000 0546 9002

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:

Mr. Anderson Carter, Trustor
Trustee of the Amended and Restated Trust Agreement dated June 7, 1999
P.O. Box 7190
Ruidoso, NM 88355

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 7677

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
Mr. Anderson Carter, Trustor 5-5-7
- 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

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:

Yates Drilling Company
Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 7839

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

3

COMPLETE THIS SECTION ON DELIVERY

Signature
Kathy Donaghe
Received by (Printed Name)
KATHY DONAGHE

Agent

Addressed
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

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

US Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only - No Insurance Coverage Permitted)

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

OFFICIAL USE

Package

Certified Fee

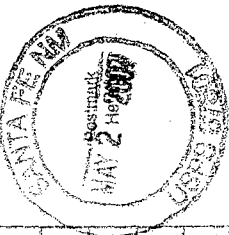
Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

Sent To

Yates Drilling Company
Attn: Mr. Chuck Moran
105 S Fourth St
Artesia, NM 88210



7006 3450 0001 4326 7839

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:

Trustees of the Coates Energy Trust
Ms. Sherie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 7884

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

3

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Ed Boyle

Agent

Addressed

B. Received by (Printed Name)
Ed Boyle

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

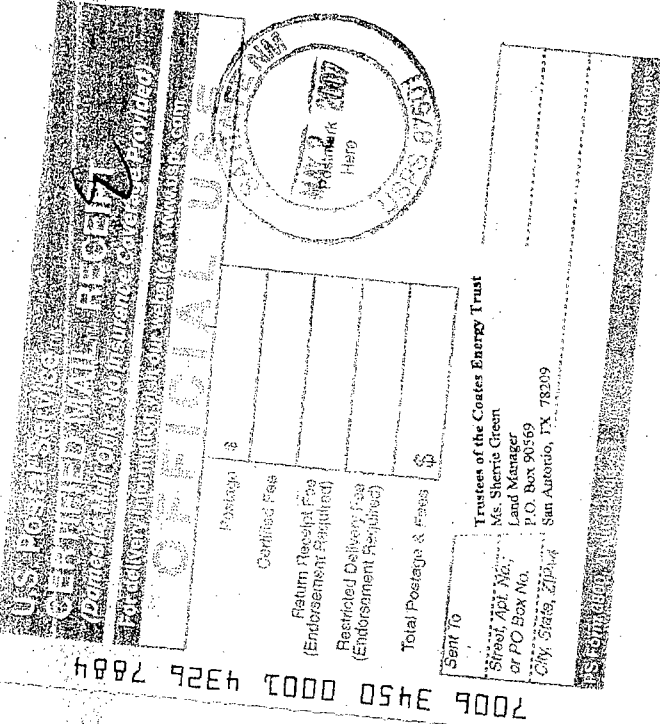
☐ Return Receipt for Merchandise

☐ 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:

Pure Energy Group, Inc.
Attn: Mr. Larry Risley
153 Tresline Park, Suite 220
San Antonio, TX 78209

2. Article Number

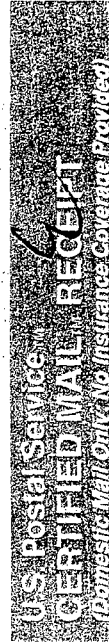
(Transfer from service label)

PS Form 3811, February 2004

7006 3450 0001 4326 7815

102595-02-M-1540

Domestic Return Receipt



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

Sent to

Postmark
MAY 2 2004
SAN ANTONIO, TX

Pure Energy Group, Inc.
Attn: Mr. Larry Risley
153 Tresline Park, Suite 220
San Antonio, TX 78209

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

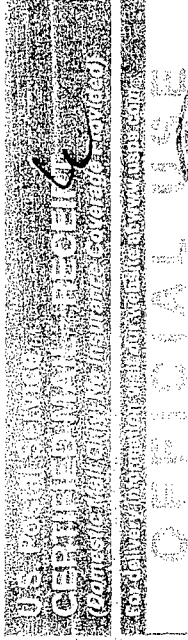
B. Received by (Printed Name) J. Kessler C. Date of Delivery 5/2/04

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

2292 92EH 1000 054E 9002



Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent to

Yates Petroleum Corporation
Attn: Mr. Chuck Moran
105 S Fourth St
Ardesia, NM 88210

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:

Yates Petroleum Corporation
Attn: Mr. Chuck Moran
105 S Fourth St
Ardesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature Kathy Donaghe ☐ Agent ☐ Addressee

B. Received by (Printed Name) KATHY DONAGHE 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

7006 3450 0001 4326 7822

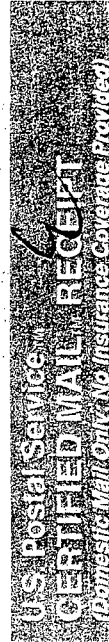
2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

5192 92EH 1000 054E 9002



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

Sent to

Postmark
MAY 2 2004
SAN ANTONIO, TX

Pure Energy Group, Inc.
Attn: Mr. Larry Risley
153 Tresline Park, Suite 220
San Antonio, TX 78209

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:

Trustee of the Jenny Roberts Schimpff Trust
Ms. Sherrill Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

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

Article Number 7006 3450 0001 4326 7891

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

COMPLETE THIS SECTION ON DELIVERY

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

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

Sent to
Trustee of the Catherine C. Roberts Trust
Ms. Sherrill Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
City, State, Zip+4

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

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

Sent to
Trustee of the Jenny Roberts Schimpff Trust
Ms. Sherrill Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209
City, State, Zip+4

7006 3450 0001 4326 7891

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:

Trustee of the Catherine C. Roberts Trust
Ms. Sherrill Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

COMPLETE THIS SECTION ON DELIVERY

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

2. Article Number 7006 3450 0001 4326 7891
(Transfer from service label)

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.

Article Addressed to:

Bank of America, Trustee f/b/o Maggie Griso, Pauline E. Martin, Wayne A. Griso,
and D.H. Griso Melissa A. Rickman Oil and Gas Management
Utica Plaza Suite 150
2100 South Utica Avenue
Tulsa, Oklahoma 74114-1436

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7006 3450 0001 4326 7976

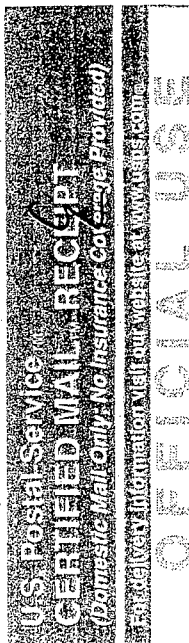
Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Ed Byle* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) Ed Byle C. Date of Delivery 2/11/04
- 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



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

Bank of America, Trustee f/b/o Maggie Griso, Pauline E. Martin, Wayne A. Griso,
and D.H. Griso Melissa A. Rickman Oil and Gas Management
Utica Plaza Suite 150
2100 South Utica Avenue
Tulsa, Oklahoma 74114-1436

9262 9264 1000 0546 9002

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:

Trustee of the Amy E. Sieren Trust
Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Ed Byle* ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Ed Byle C. Date of Delivery 2/11/04
- 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.

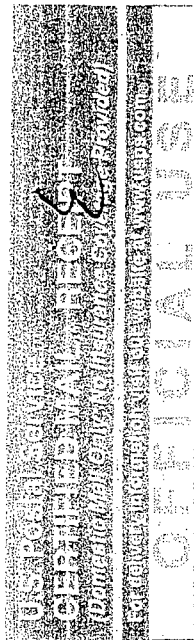
4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 3450 0001 4326 7969

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



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

Sent To

Trustee of the Amy E. Sieren Trust
Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

6962 9264 1000 0546 9002

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:

Maccus Minerals, LLP
Attn: Mrs. Linda Buckner
P.O. Box 176
Ablene, TX 79604

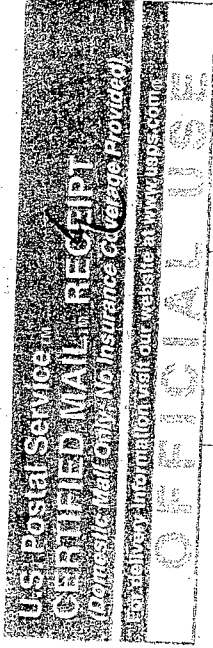
COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Linda Kinard*
- B. Received by (Printed Name) *LINDA KINARD* C. Date of Delivery *3/10/04*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

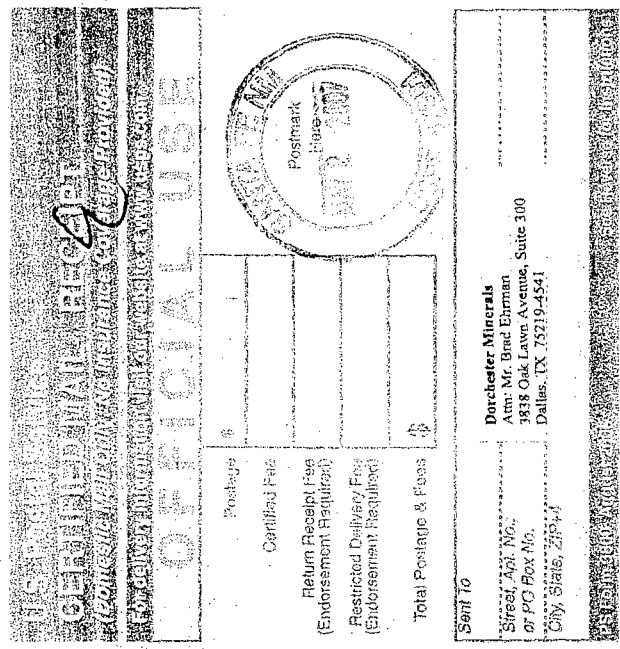
3. Service Type
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ C.O.D.
☐ Express Mail
☐ Return Receipt for Merchandise
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number **7006 3450 0001 4326 8003**

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



7006 3450 0001 4326 8003



0662 92EH 7000 054E 9002

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:

Dorchester Minerals
Attn: Mr. Brad Ehrman
3838 Oak Lawn Avenue, Suite 300
Dallas, TX 75219-4541

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Carol Crabtree* Age ☐ Adult ☐ Minor
- B. Received by (Printed Name) *CAROL CRABTREE* C. Date of Delivery *5-4-07*
- 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

2. Article Number **7006 3450 0001 4326 7990**

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:

Trustee of the Lisa Stieren Hardeman Trust
Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

2. Article Number

(Transfer from service label)
PS Form 3811, February 2004

102595-02-M-1540

7006 3450 0001 4326 7921

Domestic Return Receipt

3

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

☐ Express Mail

☐ Registered

☐ Insured Mail

☐ C.O.D.

☐ Restricted Delivery? (Extra Fee)

☐ Yes

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

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

\$

\$

Trustee of the Lisa Stieren Hardeman Trust

Ms. Sherrie Green

Land Manager

P.O. Box 90569

San Antonio, TX 78209

City, State, Zip

7006 3450 0001 4326 7921

7006 3450 0001 4326 7921

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:

Trustee of the Barry Coates Roberts Trust
Ms. Sherrie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

7006 3450 0001 4326 7914

102595-02-M-1540

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

☐ Express Mail

☐ Registered

☐ Insured Mail

☐ C.O.D.

☐ 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:

Annis Roberts, Successor Trustee
Vicki Jeanne Saari Special Needs Trust
1230 South 500 West, Apt. 9B
Bountiful, UT 84010

2. Article Number

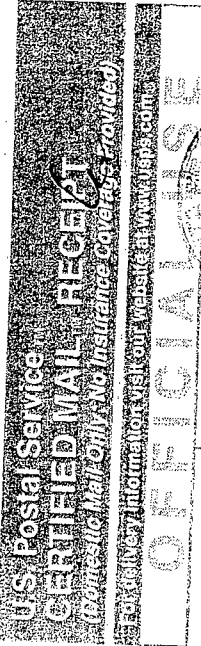
(Transfer from service label)

7006 3450 0001 4326 8447

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



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

Sent To

Annis Roberts, Successor Trustee
Vicki Jeanne Saari Special Needs Trust
1230 South 500 West, Apt. 9B
Bountiful, UT 84010

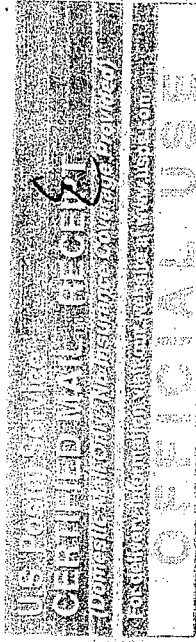
COMPLETE THIS SECTION ON DELIVERY

- A. Signature **X Vicki Vannus** Agent ☒ Addressee ☐
- B. Received by (Printed Name) **Vicki Vannus** C. Date of Delivery **5/8**
- 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. ☐ Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2562 9224 1000 054E 9002



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

Sent To

Trustee of the Kelly Stieren Daniel Trust
Ms. Sherie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

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:

Trustee of the Kelly Stieren Daniel Trust
Ms. Sherie Green
Land Manager
P.O. Box 90569
San Antonio, TX 78209

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 7952

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature **X Ed Boyle** Agent ☒ Addressee ☐
- B. Received by (Printed Name) **Ed Boyle** 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. ☐ 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.

1. Article Addressed to:

Mr. Larry B. Hall
c/o Hinkle Law Firm
Mr. Bud Martin
P.O. Box 3580
Midland, TX 79702

2. Article Number

(Transfer from service label)

7006 3450 0001 4326 8010

PS Form 3811, February 2004

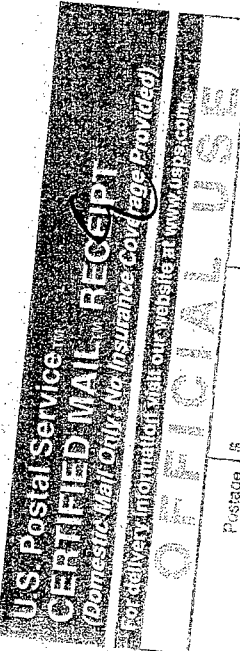
Domestic Return Receipt

102595-02-M-1540

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



Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Mr. Larry B. Hall
c/o Hinkle Law Firm
Mr. Bud Martin
P.O. Box 3580
Midland, TX 79702

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:

Blackstone Minerals, LP
Attn: Mr. George Miller
1001 Fannin, Suite 2020
Houston, TX 77002-6709

2. Article Number
(Transfer from service label)

7006 3450 0001 4326 8034

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, Insurance Coverage Provided)

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent to

Blackstone Minerals, LP
Attn: Mr. George Miller
1001 Fannin, Suite 2020
Houston, TX 77002-6709

City, State, Zip+4

Postmark Here

4E00 92E4 7000 054E 9002

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

4

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:

Tom R. Cone
P.O. Box 778
Jay, OK 74346

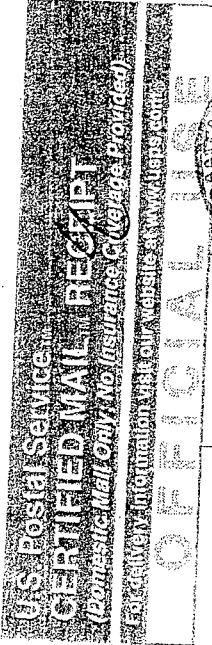
COMPLETE THIS SECTION ON DELIVERY

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

Article Number 7006 3450 0001 4326 8478
(Transfer from service label)
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



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

Tom R. Cone
P.O. Box 778
Jay, OK 74346

8478 4326 0001 4326 8478

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:

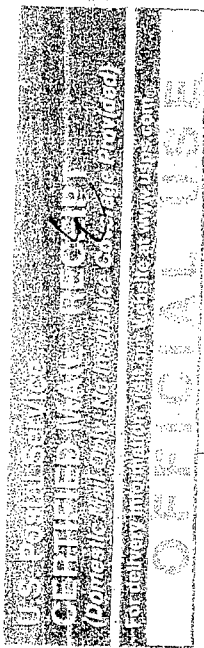
The Long Truitt
Attn: Mr. Larry Long
P.O. Box 1700
Kilgore, TX 75663

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

2. Article Number 7006 3450 0001 4326 8065
(Transfer from service label)
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



1948 92EH 1000 054E 9002

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

Sent to

Cathy Autenshine aka Cathy McCown
P.O. Box 307
Dripping Springs, TX 78620
City, State, Zip+4

SENT - 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:

Cathy Autenshine aka Cathy McCown
P.O. Box 307
Dripping Springs, TX 78620

2. Article Number

(Transfer from service)

7006 3450 0001 4326 8461

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Cathy McCown

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Cathy McCown

C. Date of Delivery

5/9/07

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

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

☐ O.O.D.

☐ Express Mail

☐ Return Receipt for Merchandise

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