

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

Case No. 14316

EXHIBIT

3

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF RSC RESOURCES LIMITED  
PARTNERSHIP FOR A NON-STANDARD OIL  
SPACING AND PRORATION UNIT AND COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.

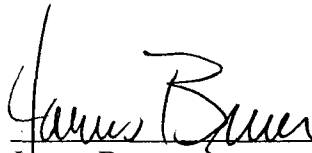
Case No. 14,316

AFFIDAVIT OF NOTICE

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

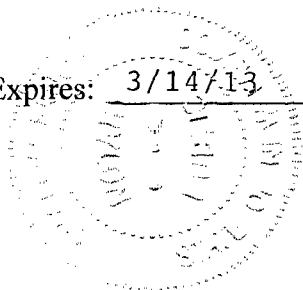
James Bruce, being duly sworn upon his oath, deposes and states:

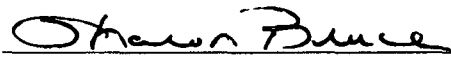
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for RSC Resources Limited Partnership.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the proper persons, 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 Rules NMAC 19.15.4.9 and 19.15.4.12.C.

  
James Bruce

SUBSCRIBED AND SWORN TO before me this 11th day of May, 2009 by James Bruce.

My Commission Expires: 3/14/13



  
Notary Public

Oil Conservation Division  
Case No. 3  
Exhibit No. 3

**JAMES BRUCE**  
ATTORNEY AT LAW

POST OFFICE BOX 1056  
SANTA FE, NEW MEXICO 87504

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

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

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

April 23, 2009

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, filed with the New Mexico Oil Conservation Division by RSC Resources Limited Partnership, regarding the N $\frac{1}{2}$ N $\frac{1}{2}$  of Section 31, Township 16 South, Range 28 East, N.M.P.M., Eddy County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, May 14, 2009, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators of the non-standard unit portion of this application. Please note that the well does not have an unorthodox location.** As an offset operator, 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 7, 2009 if you intend to participate in the hearing.

Very truly yours,

  
James Bruce

Attorney for RSC Resources Limited Partnership

EXHIBIT

**A**

EXHIBIT A

Cal-Mon Oil Company  
Suite 1200  
500 West Texas  
Midland, Texas 79701

Stratco Operating Co., Inc.  
400 Buckeye Trail  
Austin, Texas 78746

Marks and Garner Production Ltd. Co.  
P.O. Box 1089  
Hobbs, New Mexico 88241

Devon Energy Production Company, L.P.  
P.O. Box 108838  
Oklahoma City, Oklahoma 73101

JKM Energy, LLC  
26 East Compress Road  
Artesia, New Mexico 88210

COG Operating, LLC  
Suite 1300  
550 West Texas  
Midland, Texas 79701

Marshall & Winston, Inc.  
P.O. Box 50880  
Midland, Texas 79710

Judson Operating, Ltd.  
P.O. Box 3340  
Midland, Texas 79702

LAJ Exploration  
P.O. Box 100626  
Midland, Texas 79702

Sigmar, Inc.  
Suite 100  
400 North Marienfeld  
Midland, Texas 79701

Sargon Investments One Ltd.  
P.O. Box 11044  
Midland, Texas 79702

William Wallace  
P.O. Box 10354  
Midland, Texas 79702

Murchison Oil & Gas, Inc.  
1100 Mira Vista Boulevard  
Plano, Texas 75093

Yates Petroleum Corporation  
105 South Fourth Street  
Artesia, New Mexico 88210

Chase Oil Corporation  
P.O. Box 1767  
Artesia, New Mexico 88211

Capstone Oil & Gas Co., L.P.  
203 West Wall Street  
Midland, Texas 79701

Eagle Oil & Gas, Ltd.  
Suite 510  
2525 Kell Boulevard  
Wichita Falls, Texas 76308

Eagle Oil & Gas, Ltd.  
Suite 510  
2525 Kell Boulevard  
Wichita Falls, Texas 76308

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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

Stratco Operating Co., Inc.  
 400 Buckeye Trail  
 Austin, Texas 78746

PS Form 3800, August 2006 See Reverse for Instructions

6595 2984 7000 0050 8002

**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:

Eagle Oil & Gas, Ltd.  
 Suite 510  
 2525 Kell Boulevard  
 Wichita Falls, Texas 76308

2. Article Number  
*(Transfer from service label)* 7008 0500 0001 4883 1807

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *x John Gibson* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) *J. Gibson* C. Date of Delivery *4-27-09*  
 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

Domestic Return Receipt *ASC*

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:

Stratco Operating Co., Inc.  
 400 Buckeye Trail  
 Austin, Texas 78746

2. Article Number  
*(Transfer from service label)* 7008 0500 0001 4882 5653

PS Form 3811, February 2004 Domestic Return Receipt *ASC*

102595-02-M-1540

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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

Eagle Oil & Gas, Ltd.  
 Suite 510  
 2525 Kell Boulevard  
 Wichita Falls, Texas 76308

PS Form 3800, August 2006 See Reverse for Instructions

2087 6884 7000 0050 8002

U.S. Postal Service<sup>TM</sup>  
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Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees \$

Sent To

Marshall & Winston, Inc.  
P.O. Box 50880  
Midland, Texas 79710

Street, Apt. No.,  
or P.O. Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7008 0500 0001 4882 5530

- 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  
105 South Fourth Street  
Artesia, New Mexico 88210

2. Article Number

(Transfer from service label)

7008 0500 0001 4882 5530

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:

Marshall & Winston, Inc.  
P.O. Box 50880  
Midland, Texas 79710

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Marshall & Winston*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Marshall & Winston*

C. Date of Delivery

*4-28-09*

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

☐ C.O.D.

☐ Express Mail

☐ Return Receipt for Merchandise

☐ Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7008 0500 0001 4882 5608

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Marshall & Winston*

B. Received by (Printed Name)

*Marshall & Winston*

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

☐ C.O.D.

☐ Express Mail

☐ Return Receipt for Merchandise

☐ Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7008 0500 0001 4882 5530

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees \$

Sent To

Yates Petroleum Corporation  
105 South Fourth Street  
Artesia, New Mexico 88210

Street, Apt. No.,  
or P.O. Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

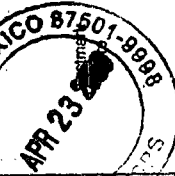
7008 0500 0001 4882 5530

APR 23 2009  
Here

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

Sent To  
Judson Operating, Ltd.  
P.O. Box 3340  
Midland, Texas 79702  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2655 2884 1000 0050 8002

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:

Judson Operating, Ltd.  
P.O. Box 3340  
Midland, Texas 79702

2. Article Number

(Transfer from service label)

7008 0500 0001 4882 5592

PS Form 3811, February 2004

Domestic Return Receipt RSC

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:

Marks and Garner Production Ltd. Co.  
P.O. Box 1089  
Hobbs, New Mexico 88241

2. Article Number  
(Transfer from service label)

PS Form 3811, February 2004

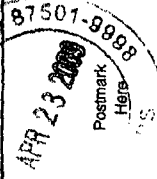
Domestic Return Receipt RSC

102595-02-M-1540

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

Sent To  
Marks and Garner Production Ltd. Co.  
P.O. Box 1089  
Hobbs, New Mexico 88241  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

9495 2884 1000 0050 8002

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

Sent to  
Murchison Oil & Gas, Inc.  
1100 Mira Vista Boulevard  
Plano, Texas 75093  
Street, Apt. No., or PO Box No.  
City, State, Zip+4

PS Form 3800, August 2006 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:

Murchison Oil & Gas, Inc.  
1100 Mira Vista Boulevard  
Plano, Texas 75093

2. Article Number  
(Transfer from service label)

7008 0500 0001 4882 5547

PS Form 3811, February 2004

Domestic Return Receipt *RSC*

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *X [Signature]* ☐ Agent ☐ Addressee  
B. Received by (Printed Name) *4-251* 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

**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:

Chase Oil Corporation  
P.O. Box 1767  
Artesia, New Mexico 88211

2. Article Number  
(Transfer from service label)

7008 0500 0001 4882 5523

PS Form 3811, February 2004

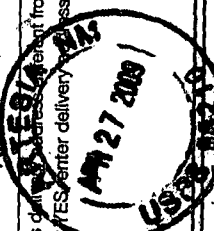
Domestic Return Receipt *RSC*

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

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



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

Sent to  
Chase Oil Corporation  
P.O. Box 1767  
Artesia, New Mexico 88211  
Street, Apt. No., or PO Box No.  
City, State, Zip+4

PS Form 3800, August 2006

See Reverse for Instructions

7008 0500 0001 4882 5523

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

Sent To  
Cal-Mon Oil Company  
Suite 1200  
500 West Texas  
Midland, Texas 79701  
Street, Apt. No.,  
or PO Box No.  
City, State, ZIP+4



See Reverse for Instructions

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### 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:

Cal-Mon Oil Company  
Suite 1200  
500 West Texas  
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7008 0500 0001 4882 5660

PS Form 3811, February 2004

Domestic Return Receipt **ASC**

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:

Sargon Investments One Ltd.  
P.O. Box 11044  
Midland, Texas 79702

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt **ASC**

7008 0500 0001 4882 5661

102595-02-M-1540

### COMPLETE THIS SECTION ON DELIVERY

A. Signature <b>X</b>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <b>Sargon Investments One Ltd.</b>	C. Date of Delivery <b>4-23-04</b>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	

3. Service Type	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail	<input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.
-----------------	--	---

4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes
-------------------------------------	------------------------------

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

Sent To  
Sargon Investments One Ltd.  
P.O. Box 11044  
Midland, Texas 79702  
Street, Apt. No.,  
or PO Box No.  
City, State, ZIP+4



PS Form 3800, August 2006

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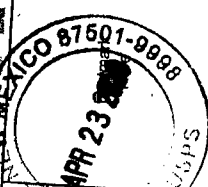
**OFFICIAL USE**

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. LAJ Exploration  
P.O. Box 100626  
City, State, ZIP+4 Midland, Texas 79702

PS Form 3800, August 2006

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:

William Wallace  
P.O. Box 10354  
Midland, Texas 79702

2. Article Number  
(Transfer from service label)

7008 0500 0001 4882 5554

PS Form 3811, February 2004

Domestic Return Receipt **ASC**

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:

LAJ Exploration  
P.O. Box 100626  
Midland, Texas 79702

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *Annex Martin*  
B. Received by (Printed Name): *Annex Martin*  
C. Date of Delivery: *4/23/04*  
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

2. Article Number  
(Transfer from service label)

7008 0500 0001 4882 5555

PS Form 3811, February 2004

Domestic Return Receipt **ASC**

102595-02-M-1540

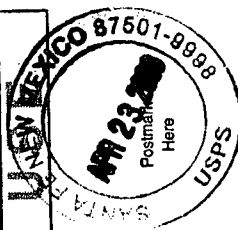
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Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$

Sent To  
Street, Apt. No.,  
or PO Box No. William Wallace  
P.O. Box 10354  
City, State, ZIP+4 Midland, Texas 79702



PS Form 3800, August 2006

See Reverse for Instructions

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**OFFICIAL USE**

Postage \$	7008 0500 0001 4882 5622
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To  
 JKM Energy, LLC  
 26 East Compress Road  
 Artesia, New Mexico 88210  
 Street, Apt. No., or PO Box No.  
 City, State, Zip+4

PS Form 3800, August 2006 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:

COG Operating, LLC  
 Suite 1300  
 550 West Texas  
 Midland, Texas 79701

2. Article Number  
 (Transfer from service label)

7008 0500 0001 4882 5622

PS Form 3811, February 2004

Domestic Return Receipt *RSC*

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:

JKM Energy, LLC  
 26 East Compress Road  
 Artesia, New Mexico 88210

2. Article Number  
 (Transfer from service label)

7008 0500 0001 4882 5622

PS Form 3811, February 2004

Domestic Return Receipt *RSC*

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Jack Matthews*  
 B. Received by (Printed Name) *Jack Matthews*  
 C. Date of Delivery *4-25-09*  
 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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *William Ellis*  
 B. Received by (Printed Name) *William Ellis*  
 C. Date of Delivery *4-22*  
 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

7008 0500 0001 4882 5622

Domestic Return Receipt *RSC*

102595-02-M-1540

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>TM</sup> RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

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

**OFFICIAL USE**



Postage \$	7008 0500 0001 4882 5622
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To  
 COG Operating, LLC  
 Suite 1300  
 550 West Texas  
 Midland, Texas 79701  
 Street, Apt. No., or PO Box No.  
 City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

# U.S. Postal Service<sup>TM</sup> RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)

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

**OFFICIAL USE**

Postage \$	APR 23 2004	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees \$		

Sent to  
Capstone Oil & Gas Co., L.P.  
203 West Wall Street  
Midland, Texas 79701

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

PS Form 3800, August 2005

See Reverse for Instructions

7008 0500 0001 4882 5516

## 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:

Sigmar, Inc.  
Suite 100  
400 North Marienfeld  
Midland, Texas 79701

2. Article Number  
(Transfer from service label)

7008 0500 0001 4882 5578

PS Form 3811, February 2004

Domestic Return Receipt **ASC**

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
**X** Gail Miller  
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 ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.  
4. Restricted Delivery? (Extra Fee) ☐ Yes

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
**X** L. C. Miller  
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 ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.  
4. Restricted Delivery? (Extra Fee) ☐ Yes

Capstone Oil & Gas Co., L.P.  
203 West Wall Street  
Midland, Texas 79701

2. Article Number  
(Transfer from service label)

7008 0500 0001 4882 5516

PS Form 3811, February 2004

Domestic Return Receipt **ASC**

102595-02-M-1540

# U.S. Postal Service<sup>TM</sup> RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)

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

**OFFICIAL USE**

Postage \$	APR 23 2004	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees \$		

Sent to  
Sigmar, Inc.  
Suite 100  
400 North Marienfeld  
Midland, Texas 79701  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4

PS Form 3800, August 2005

See Reverse for Instructions

7008 0500 0001 4882 5578

**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 this card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Devon Energy Production Company, L.P.  
P.O. Box 108838  
Oklahoma City, Oklahoma 73101

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature **BK** ☒ 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

2. Article Number

(Transfer from service label)

7008 0500 0001 4882 5639

PS Form 3811, February 2004

Domestic Return Receipt

RSC

102595-02-M-1540

U.S. Postal Service<sup>TM</sup>  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

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



Sent To

Devon Energy Production Company, L.P.  
P.O. Box 108838  
Oklahoma City, Oklahoma 73101

PS Form 3800, August 2006

See Reverse for Instructions