

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

**APPLICATION OF MARATHON OIL PERMIAN  
LLC FOR COMPULSORY POOLING AND APPROVAL  
OF NON-STANDARD SPACING UNIT  
EDDY COUNTY, NEW MEXICO**

**CASE NO. 25478**

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**Exhibit B      Self-Affirmed Statement of Jessica L. Pontiff**

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- C-1            Sample Notice Letter to All Interested Parties
- C-2            Chart of Notice to All Interested Parties
- C-3            Copies of Certified Mail Receipts and Returns
- C-4            Affidavit of Publication for July 22, 2025

Respectfully submitted,

**HINKLE SHANOR LLP**

By: /s/ Ann Cox Tripp  
Ann Cox Tripp  
Melinda A. Branin  
P.O. Box 10  
Roswell NM 88202-0010  
(575) 622-6510  
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## EXHIBIT A

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case: 25478	APPLICANT'S RESPONSE
Hearing Date: August 7, 2025	
Applicant	Marathon Oil Permian, LLC
Designated Operator & OGRID (affiliation if applicable)	Marathon Oil Permian, LLC (372098)
Applicant's Counsel:	Hinkle Shanor LLP
Case Title:	Application of Marathon Oil Permian for Compulsory Pooling and Approval of Non-Standard Spacing Unit, Eddy County, New Mexico
Entries of Appearance/Intervenors:	N/A
Well Family	Rick Vaughn Fed Com
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Bone Spring Formation
Pool Name and Pool Code:	Red Bluff; Bone Spring, South Pool [Code 51010]
Well Location Setback Rules:	statewide
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	638.4
Building Blocks:	quarter-quarter
Orientation:	South to North
Description: TRS/County	W/2 Sections 6 and 7, Township 26 South, Range 29 East, Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe <u>and is approval of non-standard unit requested in this application?</u>	No; Marathon requests approval of a non-standard spacing unit in this application.
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	N
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	Exhibit A-4
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

**EXHIBIT A**

Well #1	Rick Vaughn Fed Com 501H SHL: 88' FSL & 1394' FWL (Unit N) Section 7 T26S-R29E BHL: 50' FNL & 590' FWL (Lot 1) Section 6, T26S-R29E FTP: 100' FSL & 590' FWL (Lot 4) Section 7, T26S-R29E LTP: 100' FNL & 590' FWL (Lot 1) Section 6, T26S-R29E Completion Target: Bone Spring (TVD: ' ; MD: ' ) Well Orientation: South to North Completion Status:
Well #2	Rick Vaughn Fed Com 503H SHL: 88' FSL & 1494' FWL (Unit N) Section 7 T26S-R29E BHL: 50' FNL & 1840' FWL (Unit C) Section 6, T26S-R29E FTP: 100' FSL & 1840' FWL (Unit N) Section 7, T26S-R29E LTP: 100' FNL & 1840' FWL (Unit C) Section 6, T26S-R29E Completion Target: Bone Spring (TVD: ' ; MD: ' ) Well Orientation: South to North Completion Status:
Horizontal Well First and Last Take Points	See above discussion for each well.
Completion Target (Formation, TVD and MD)	See above discussion for each well.
<b>AFE Capex and Operating Costs</b>	
Drilling Supervision/Month \$	\$8,000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Ex A-6
Requested Risk Charge	200%
<b>Notice of Hearing</b>	
Proposed Notice of Hearing	Exhibit A-1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibits C-1, C-2, C-3
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit C-4
<b>Ownership Determination</b>	
Land Ownership Schematic of the Spacing Unit	Exhibit A-4
Tract List (including lease numbers and owners)	Exhibit A-4
If approval of Non-Standard Spacing Unit is requested, Tract List (including lease numbers and owners) of Tracts subject to notice requirements.	Exhibit A-4A
Pooled Parties (including ownership type)	Exhibit A-5



**EXHIBIT A**

Unlocatable Parties to be Pooled	N/A
Ownership Depth Severance (including percentage above & below)	N/A
<b>Joinder</b>	
Sample Copy of Proposal Letter	Exhibit A-6
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-4
Chronology of Contact with Non-Joined Working Interests	Exhibit A-7
Overhead Rates In Proposal Letter	Exhibit A-6
Cost Estimate to Drill and Complete	Exhibit A-6
Cost Estimate to Equip Well	Exhibit A-6
Cost Estimate for Production Facilities	Exhibit A-6
<b>Geology</b>	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit B-1
Gunbarrel/Lateral Trajectory Schematic	N/A
Well Orientation (with rationale)	Exhibit B
Target Formation	Exhibit B
HSU Cross Section	Exhibit B-3
Depth Severance Discussion	N/A
<b>Forms, Figures and Tables</b>	
C-102	Exhibit A-3
Tracts	Exhibit A-4
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-5
General Location Map (including basin)	Exhibit B-1
Well Bore Location Map	Exhibit B-1
Structure Contour Map - Subsea Depth	Exhibit B-2
Cross Section Location Map (including wells)	Exhibit B-3
Cross Section (including Landing Zone)	Exhibit B-4
<b>Additional Information</b>	
Special Provisions/Stipulations	N/A
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>	
<b>Printed Name</b> (Attorney or Party Representative):	ANN COX TRIPP
<b>Signed Name</b> (Attorney or Party Representative):	/s/ Ann Cox Tripp
<b>Date:</b>	7/31/2025

**EXHIBIT A-1**

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

APPLICATION OF MARATHON OIL PERMIAN LLC  
FOR COMPULSORY POOLING AND APPROVAL  
OF NON-STANDARD SPACING UNIT  
EDDY COUNTY, NEW MEXICO

CASE NO. 25478

**AMENDED APPLICATION**

In accordance with NMSA 1978, § 70-2-17 and NMAC 19.15.16.15(B)(5), Marathon Oil Permian, LLC (“Marathon” or “Applicant”), through its undersigned attorneys, files this Amended Application with the Oil Conservation Division (“Division”) seeking an order: (1) establishing a 638.40 acre, more or less, non-standard horizontal spacing unit comprised of the W/2 Sections 6 and 7, Township 26 South, Range 29 East, Eddy County, New Mexico (“Unit”); and (2) pooling all uncommitted overriding royalty, working, and record title interests in the Bone Spring formation underlying the Unit. In support of this application, Marathon states the following.

1. Applicant (OGRID No. 372098) is a working interest owner in the Unit and has the right to drill thereon.
2. Applicant seeks to dedicate the Unit to the following proposed wells (“Wells”):
  - a. **Rick Vaughn Fed Com 501H** (API No. 30-015-55481), which will be drilled from a surface hole location in the SE/4SW/4 (Unit N) of Section 7 to a bottom hole location in the NW/4NW/4 (Unit D/Lot 1) of Section 6, and produce from a first take point in SW/4SW/4 (Unit M/Lot 4) Section 7 to a last take point NW/4NW/4 (Unit D/Lot 1) Section 6; and
  - b. **Rick Vaughn Fed Com 503H** (API No. 30-015-55644), which will be drilled from a surface hole location in the SE/4SW/4 (Unit N) of Section 7 to a

## EXHIBIT A-1

bottom hole location in the NE/4NW/4 (Unit C) of Section 6, and produce from a first take point in SE/4SW/4 (Unit N) Section 7 to a last take point in NE/4NW/4 (Unit C) Section 6.

3. The completed intervals of the Wells will be orthodox.

4. There is not a depth severance in the Bone Spring formation within the Unit.

Accordingly, Marathon seeks to pool all interests in the Bone Spring formation, from the Red Bluff; Bone Spring, South Pool [Pool Code 51010], subject to statewide rules.

5. Applicant has sought and been unable to obtain voluntary agreement from all overriding royalty interest owners, working interest, and record title interest owners in the Bone Spring formation underlying the proposed Unit for the development of these lands or otherwise commit their interests to the wells.

6. The pooling of all interests in the Bone Spring formation underlying the proposed Unit will avoid the drilling of unnecessary wells, prevent waste, and protect correlative rights.

7. Approval of a non-standard horizontal spacing unit is necessary to prevent waste and protect correlative rights.

8. In order to permit Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted interests in the Unit should be pooled and Applicant should be designated the operator of the proposed horizontal wells and the Unit.

WHEREFORE, Applicant requests that this Amended Application be set for hearing before an Examiner of the Oil Conservation Division on August 7, 2025, and, after notice and hearing as required by law, the Division enter an order:

A. Approving a non-standard horizontal spacing unit pursuant to 19.15.16.15(B)(5) NMAC;

**EXHIBIT A-1**

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- B. Pooling all uncommitted interests in the Unit;
- C. Approving the initial wells in the Unit;
- D. Designating Applicant as the operator of the Unit and the horizontal wells to be drilled thereon;
- E. Authorizing Applicant to recover its costs of drilling, equipping, and completing the wells;
- F. Approving the actual operating charges and costs of supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- G. Imposing a 200% charge for the risk assumed by Applicant in drilling and completing the wells against any working interest owner who does not voluntarily participate in the drilling of the wells.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Ann Cox Tripp

Ann Cox Tripp

Melinda A. Branin

P.O. Box 10

Roswell, NM 88202-0010

Phone: (575) 622-6510

Facsimile: (575) 632-9223

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mbranin@hinklelawfirm.com

Counsel for Marathon Oil Permian, LLC

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## EXHIBIT A-1

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**CASE 25478: Application of Marathon Oil Permian, LLC, for Compulsory Pooling and Approval of Non-Standard Spacing Unit, Eddy County, New Mexico.** Applicant in the above-style cause seeks an order pooling a 638.40-acre, more or less, non-standard horizontal spacing unit in the Bone Spring Formation comprised of W/2 Sections 6 and 7, Township 26 South, Range 29 East, NMPM, Eddy County, New Mexico, initially dedicated to the proposed Rick Vaughn Fed Com 501H and Rick Vaughn Fed Com 503H wells to be horizontally drilled as follows:

- Rick Vaughn Fed Com 501H will be drilled from a surface hole location in the SE/4SW/4 (Unit N) of Section 7 to a bottom hole location in the NW/4NW/4 (Unit D/Lot 1) of Section 6, and produce from a first take point in SW/4SW/4 (Unit M/Lot 4) Section 7 to a last take point NW/4NW/4 (Unit D/Lot 1) Section 6; and
- Rick Vaughn Fed Com 503H will be drilled from a surface hole location in the SE/4SW/4 (Unit N) of Section 7 to a bottom hole location in the NE/4NW/4 (Unit C) of Section 6, and produce from a first take point in SE/4SW/4 (Unit N) Section 7 to a last take point in NE/4NW/4 (Unit C) Section 6.

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## EXHIBIT A-2

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

APPLICATION OF MARATHON OIL PERMIAN  
LLC FOR COMPULSORY POOLING AND APPROVAL  
OF NON-STANDARD SPACING UNIT  
EDDY COUNTY, NEW MEXICO

CASE NO. 25478

SELF-AFFIRMED STATEMENT  
OF JEFF STOUT, CPL

1. I am a Land Negotiator for ConocoPhillips, parent company of the wholly owned subsidiary Marathon Oil Permian, LLC. I am over 18 years of age, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division ("Division") and my credentials as an expert in petroleum land matters as a Certified Professional Landman were accepted and made a matter of record.

2. I am familiar with the land matters involved in the above-referenced case. Copies of the Application of Marathon Oil Permian, LLC ("Marathon") and proposed hearing notice are attached as **Exhibit A-1**.

3. None of the parties proposed to be pooled in this case indicated opposition to this matter proceeding by affidavit, therefore I do not expect any opposition at hearing.

4. Marathon seeks an order pooling all uncommitted overriding royalty, record title, and working interests in the Bone Spring formation underlying a 638.40-acre, more or less, non-

**EXHIBIT A-2**

standard horizontal spacing unit comprised of W/2 Sections 6 and 7, Township 26 South, Range 29 East, Lea County, New Mexico ("Unit").

5. The Unit will be dedicated to the following wells ("Wells"):

- **Rick Vaughn Fed Com 501H**, which will produce from a first take point located in the SW/4SW/4 (Lot 4) of Section 7 to a last take point located in the NW/4NW/4 (Lot 1) of Section 6, from approximately 8,332' to the base of the Bone Spring formation;
- **Rick Vaughn Fed Com 503H** wells, which will produce from a first take point located in the SE/4SW/4 (Unit N) of Section 7 to a last take point located in the NE/4NW/4 (Unit C) of Section 6, from approximately 8,351' to the base of the Bone Spring formation.

6. The completed intervals of the Wells will be orthodox.

7. **Exhibit A-3** contains the C-102s for the Wells.

8. **Exhibit A-4** contains a plat identifying ownership by tract in the Unit and includes applicable lease numbers.

9. **Exhibit A-4A** is a map that depicts the non-standard spacing unit in relation to the outline of a standard spacing unit. **Exhibit A-4A** also identifies the affected parties in the tracts surrounding the proposed Unit, who were provided notice of Marathon's application.

10. **Exhibit A-5** identifies ownership of interests in the Unit, includes a Unit recapitulation, and the interests Marathon seeks to pool are highlighted in yellow.

11. Marathon's request for approval of a non-standard spacing unit will allow it to consolidate surface facilities and will consequently prevent surface, environmental, and economic waste.

## EXHIBIT A-2

12. For the reasons discussed above, approval of a non-standard spacing unit is necessary to prevent waste and protect correlative rights.

13. Marathon has conducted a diligent search of all county public records, including phone directories, computer databases, and internet searches, to locate the interest owners it seeks to pool.

14. **Exhibit A-6** contains a sample well proposal letter and AFE sent to the working interest owners for the Wells. The estimated costs reflected on the AFE are fair and reasonable and comparable to the cost of other wells of similar depth and length drilled in the subject formation in the area.

15. **Exhibit A-6** also contains a sample ratification agreement that was sent to the overriding royalty interest owners in the Wells.

16. In my opinion, Marathon has made a good-faith effort to reach voluntary joinder of uncommitted interests in the Wells as indicated by the chronology of contact described in **Exhibit A-7**.

17. Marathon requests overhead and administrative rates of \$8,000.00 per month while the Wells are being drilled and \$800.00 per month while the Wells are producing. These rates are fair and are comparable to the rates charged by Marathon and other operators in the vicinity.

18. The attached exhibits were either prepared by me or under my supervision or were compiled from company business records.

19. In my opinion, the granting of Marathon's application would serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

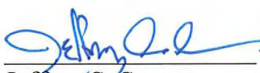
20. I understand this Self-Affirmed Statement will be used as written testimony in the subject cases. I affirm that my testimony above is true and correct and is made under penalty of



## EXHIBIT A-2

perjury under the laws of the State of New Mexico. My testimony is made as of the date  
handwritten next to my signature below.

7/31/2025  
Date

  
Jeffrey S. Stout

## EXHIBIT A-3

C-102  Submit Electronically Via OCD Permitting	State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION	Revised July 9, 2024	
		Submittal Type:	<input checked="" type="checkbox"/> Initial Submittal <input type="checkbox"/> Amended Report <input type="checkbox"/> As Drilled

## WELL LOCATION INFORMATION

API Number 30-015-5548	Pool Code 5101	Pool Name Red Bluff; Bone Spring,
Property Code 33629	Property Name RICK VAUGHN FED COM	Well Number 501H
OGRID No. 372098	Operator Name MARATHON OIL PERMIAN LLC	Ground Level Elevation 2,912'
Surface Owner: <input type="checkbox"/> State <input type="checkbox"/> Fee <input type="checkbox"/> Tribal <input checked="" type="checkbox"/> Federal		Mineral Owner: <input type="checkbox"/> State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> Tribal <input checked="" type="checkbox"/> Federal

## Surface Location

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
N	7	26S	29E		88' FSL	1,394' FWL	32.050128°	-104.027635°	EDDY

## Bottom Hole Location

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
LOT 1	6	26S	29E		50' FNL	590' FWL	32.078807°	-104.030218°	EDDY

Dedicated Acres 638.4	Infill or Defining Well	Defining Well API	Overlapping Spacing Unit (Y/N)	Consolidation Code Co
Order Numbers.			Well setbacks are under Common Ownership: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## Kick Off Point (KOP)

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
N	7	26S	29E		88' FSL	1,394' FWL	32.050128°	-104.027635°	EDDY

## First Take Point (FTP)

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
LOT 4	7	26S	29E		100' FSL	590' FWL	32.050169°	-104.030230°	EDDY

## Last Take Point (LTP)

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
LOT 1	6	26S	29E		100' FNL	590' FWL	32.078670°	-104.030218°	EDDY

Unitized Area or Area of Uniform Interest	Spacing Unit Type <input checked="" type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	Ground Floor Elevation:
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## OPERATOR CERTIFICATIONS

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and, if the well is a vertical or directional well, that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of a working interest or unleased mineral interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

If this well is a horizontal well, I further certify that this organization has received the consent of at least one lessee or owner of a working interest or unleased mineral interest in each tract (in the target pool or formation) in which any part of the well's completed interval will be located or obtained a compulsory pooling order from the division.

Signature  Date 6/10/202

Printed Name  
Stan

Email Address

## SURVEYOR CERTIFICATIONS

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.



Date: 5/22/2025

Signature and Seal of Professional Surveyor

Certificate Number  
12177

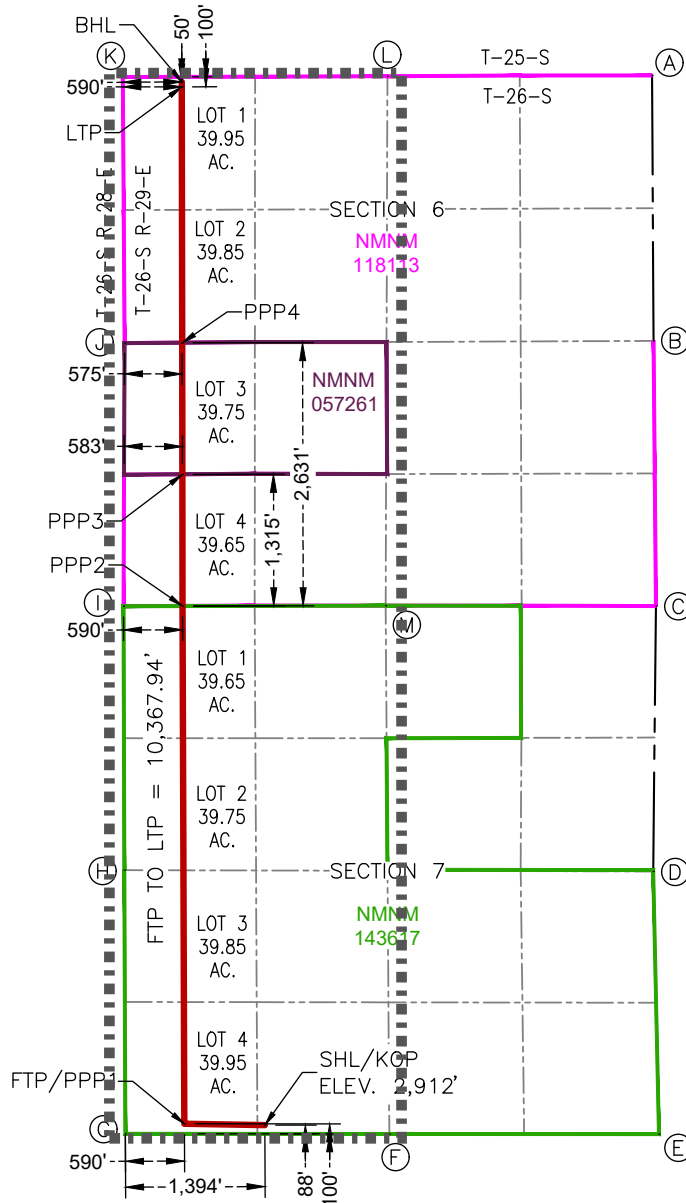
Date of Survey  
5/22/2025

Note: No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

**EXHIBIT A-3****ACREAGE DEDICATION PLATS**

This grid represents a standard section. You may superimpose a non-standard section, or larger area, over this grid. Operators must outline the dedicated acreage in a red box, clearly show the well surface location and bottom hole location, if it is directionally drilled, with the dimensions from the section lines in the cardinal directions. If this is a horizontal wellbore show on this plat the location of the First Take Point and Last Take Point, and the point within the Completed interval (other than the First Take Point or Last Take Point) that is closest to any outer boundary of the tract.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed, contact the OCD Engineering Bureau. Independent subdivision surveys will not be acceptable.

**RICK VAUGHN FED COM 501H**

**SURFACE HOLE LOCATION  
& KICK-OFF POINT**  
88' FSL & 1,394' FWL  
ELEV.=2,912'

NAD 83 X = 636,049.06'  
NAD 83 Y = 382,108.52'  
NAD 83 LAT = 32.050128°  
NAD 83 LONG = -104.027635°

**FIRST TAKE POINT &  
PENETRATION POINT 1**  
100' FSL & 590' FWL  
NAD 83 X = 635,244.81'  
NAD 83 Y = 382,121.19'  
NAD 83 LAT = 32.050169°  
NAD 83 LONG = -104.030230°

**PENETRATION POINT 2**  
0' FNL & 590' FWL  
NAD 83 X = 635,226.57'  
NAD 83 Y = 387,298.21'  
NAD 83 LAT = 32.064400°  
NAD 83 LONG = -104.030242°

**PENETRATION POINT 3**  
1,315' FSL & 583' FWL  
NAD 83 X = 635,224.80'  
NAD 83 Y = 388,613.13'  
NAD 83 LAT = 32.068015°  
NAD 83 LONG = -104.030236°

**PENETRATION POINT 4**  
2,631' FSL & 575' FWL  
NAD 83 X = 635,223.03'  
NAD 83 Y = 389,929.21'  
NAD 83 LAT = 32.071633°  
NAD 83 LONG = -104.030230°

**LAST TAKE POINT**  
100' FNL & 590' FWL  
NAD 83 X = 635,219.59'  
NAD 83 Y = 392,489.10'  
NAD 83 LAT = 32.078670°  
NAD 83 LONG = -104.030218°

**BOTTOM HOLE LOCATION**  
50' FNL & 590' FWL  
NAD 83 X = 635,219.24'  
NAD 83 Y = 392,539.10'  
NAD 83 LAT = 32.078807°  
NAD 83 LONG = -104.030218°

**CORNER COORDINATES**  
**NEW MEXICO EAST - NAD 83**

A	N:392,602.51' E:639,919.75'	F	N:382,020.16' E:637,293.61'	K	N:392,587.31' E:634,628.96'
B	N:389,949.16' E:639,935.13'	G	N:382,021.35' E:634,655.33'	L	N:392,595.03' E:637,274.83'
C	N:387,298.24' E:639,958.45'	H	N:384,657.30' E:634,644.87'	M	N:387,302.75' E:637,257.20'
D	N:384,644.57' E:639,931.43'	I	N:387,296.79' E:634,636.66'		
E	N:382,018.12' E:639,989.46'	J	N:389,926.86' E:634,647.74'		

**EXHIBIT A-3**

<b>C-102</b>  Submit Electronically Via OCD Permitting	State of New Mexico Energy, Minerals & Natural Resources Department <b>OIL CONSERVATION DIVISION</b>	Revised July 9, 2024
	Submittal Type:	<input checked="" type="checkbox"/> Initial Submittal <input type="checkbox"/> Amended Report <input type="checkbox"/> As Drilled

**WELL LOCATION INFORMATION**

API Number <b>30-015-5564</b>	Pool Code <b>5101</b>	Pool Name <b>Red Bluff; Bone Spring,</b>
Property Code <b>33629</b>	Property Name <b>RICK VAUGHN FED COM</b>	Well Number <b>503H</b>
OGRID No. <b>372098</b>	Operator Name <b>MARATHON OIL PERMIAN LLC</b>	Ground Level Elevation <b>2,912'</b>
Surface Owner: <input type="checkbox"/> State <input type="checkbox"/> Fee <input type="checkbox"/> Tribal <input checked="" type="checkbox"/> Federal		Mineral Owner: <input type="checkbox"/> State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> Tribal <input checked="" type="checkbox"/> Federal

**Surface Location**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
<b>N</b>	<b>7</b>	<b>26S</b>	<b>29E</b>		<b>88' FSL</b>	<b>1,494' FWL</b>	<b>32.050127°</b>	<b>-104.027312°</b>	<b>EDDY</b>

**Bottom Hole Location**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
<b>C</b>	<b>6</b>	<b>26S</b>	<b>29E</b>		<b>50' FNL</b>	<b>1,840' FWL</b>	<b>32.078807°</b>	<b>-104.026183°</b>	<b>EDDY</b>

Dedicated Acres <b>638.4</b>	Infill or Defining Well	Defining Well API	Overlapping Spacing Unit (Y/N)	Consolidation Code <b>Co</b>
Order Numbers.			Well setbacks are under Common Ownership: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**Kick Off Point (KOP)**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
<b>N</b>	<b>7</b>	<b>26S</b>	<b>29E</b>		<b>88' FSL</b>	<b>1,494' FWL</b>	<b>32.050127°</b>	<b>-104.027312°</b>	<b>EDDY</b>

**First Take Point (FTP)**

UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
<b>N</b>	<b>7</b>	<b>26S</b>	<b>29E</b>		<b>100' FSL</b>	<b>1,840' FWL</b>	<b>32.050157°</b>	<b>-104.026196°</b>	<b>EDDY</b>

**Last Take Point (LTP)**

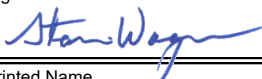
UL	Section	Township	Range	Lot	Ft. from N/S	Ft. from E/W	Latitude	Longitude	County
<b>C</b>	<b>6</b>	<b>26S</b>	<b>29E</b>		<b>100' FNL</b>	<b>1,840' FWL</b>	<b>32.078670°</b>	<b>-104.026182°</b>	<b>EDDY</b>

Unitized Area or Area of Uniform Interest	Spacing Unit Type <input checked="" type="checkbox"/> Horizontal <input type="checkbox"/> Vertical	Ground Floor Elevation:
---	--	-------------------------

**OPERATOR CERTIFICATIONS**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and, if the well is a vertical or directional well, that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of a working interest or unleased mineral interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

If this well is a horizontal well, I further certify that this organization has received the consent of at least one lessee or owner of a working interest or unleased mineral interest in each tract (in the target pool or formation) in which any part of the well's completed interval will be located or obtained a compulsory pooling order from the division.

Signature  Date **6/10/202**

Printed Name  
**Stan**  
Email Address

**SURVEYOR CERTIFICATIONS**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.



Date: 6/5/2025

Signature and Seal of Professional Surveyor

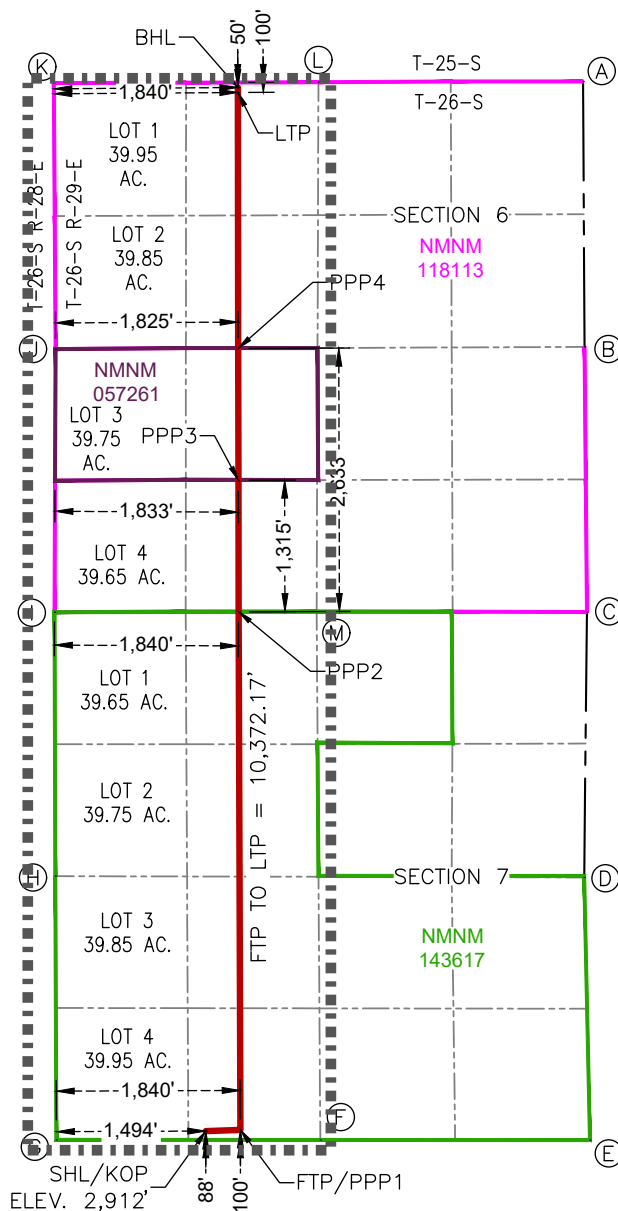
Certificate Number  
**12177**  
Date of Survey  
**6/5/2025**

Note: No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

**EXHIBIT A-3****ACREAGE DEDICATION PLATS**

This grid represents a standard section. You may superimpose a non-standard section, or larger area, over this grid. Operators must outline the dedicated acreage in a red box, clearly show the well surface location and bottom hole location, if it is directionally drilled, with the dimensions from the section lines in the cardinal directions. If this is a horizontal wellbore show on this plat the location of the First Take Point and Last Take Point, and the point within the Completed interval (other than the First Take Point or Last Take Point) that is closest to any outer boundary of the tract.

Surveyors shall use the latest United States government survey or dependent resurvey. Well locations will be in reference to the New Mexico Principal Meridian. If the land is not surveyed, contact the OCD Engineering Bureau. Independent subdivision surveys will not be acceptable.

**RICK VAUGHN FED COM 503H**

**SURFACE HOLE LOCATION  
& KICK-OFF POINT**  
88' FSL & 1,494' FWL  
ELEV.=2,912'

NAD 83 X = 636,148.98'  
NAD 83 Y = 382,108.71'  
NAD 83 LAT = 32.050127°  
NAD 83 LONG = -104.027312°

**FIRST TAKE POINT &  
PENETRATION POINT 1**  
100' FSL & 1,840' FWL

NAD 83 X = 636,494.82'  
NAD 83 Y = 382,120.56'  
NAD 83 LAT = 32.050157°  
NAD 83 LONG = -104.026196°

**PENETRATION POINT 2**  
0' FNL & 1,840' FWL

NAD 83 X = 636,476.56'  
NAD 83 Y = 387,301.05'  
NAD 83 LAT = 32.064398°  
NAD 83 LONG = -104.026207°

**PENETRATION POINT 3**  
1,315' FSL & 1,833' FWL

NAD 83 X = 636,474.80'  
NAD 83 Y = 388,615.93'  
NAD 83 LAT = 32.068013°  
NAD 83 LONG = -104.026201°

**PENETRATION POINT 4**  
2,633' FSL & 1,825' FWL

NAD 83 X = 636,473.03'  
NAD 83 Y = 389,934.50'  
NAD 83 LAT = 32.071637°  
NAD 83 LONG = -104.026194°

**LAST TAKE POINT**  
100' FNL & 1,840' FWL

NAD 83 X = 636,469.59'  
NAD 83 Y = 392,492.69'  
NAD 83 LAT = 32.078670°  
NAD 83 LONG = -104.026182°

**BOTTOM HOLE LOCATION**  
50' FNL & 1,840' FWL

NAD 83 X = 636,469.24'  
NAD 83 Y = 392,542.69'  
NAD 83 LAT = 32.078807°  
NAD 83 LONG = -104.026183°

**CORNER COORDINATES  
NEW MEXICO EAST - NAD 83**

A	N:392,602.51' E:639,919.75'	F	N:382,020.16' E:637,293.61'	K	N:392,587.31' E:634,628.96'
B	N:389,949.16' E:639,935.13'	G	N:382,021.35' E:634,655.33'	L	N:392,595.03' E:637,274.83'
C	N:387,298.24' E:639,958.45'	H	N:384,657.30' E:634,644.87'	M	N:387,302.75' E:637,257.20'
D	N:384,644.57' E:639,931.43'	I	N:387,296.79' E:634,636.66'		
E	N:382,018.12' E:639,989.46'	J	N:389,926.86' E:634,647.74'		

EXHIBIT A-4

Rick Vaughn Federal Com

W2 Section 6 & 7, T26S-R29E, NMPM, Eddy County, New Mexico

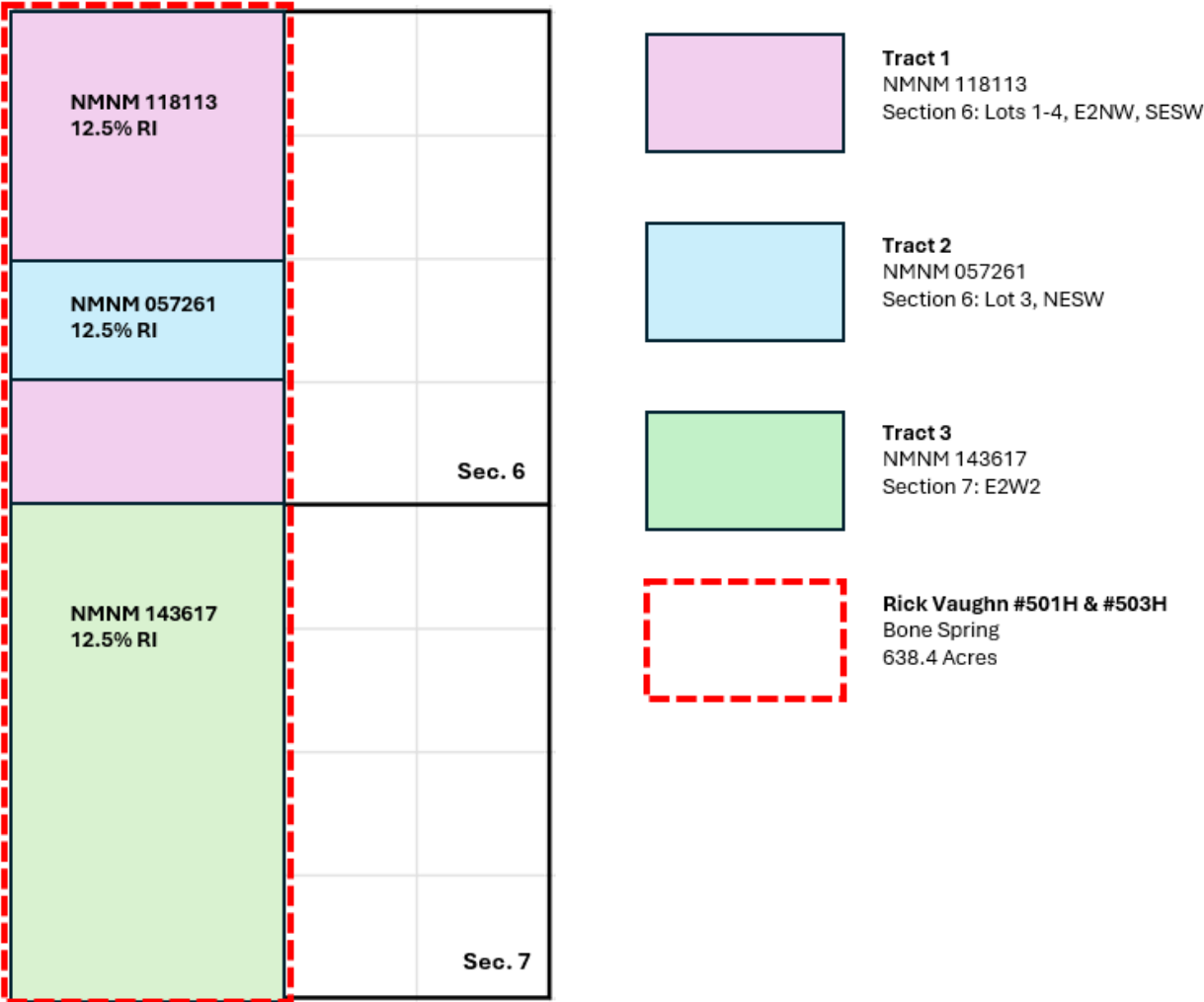
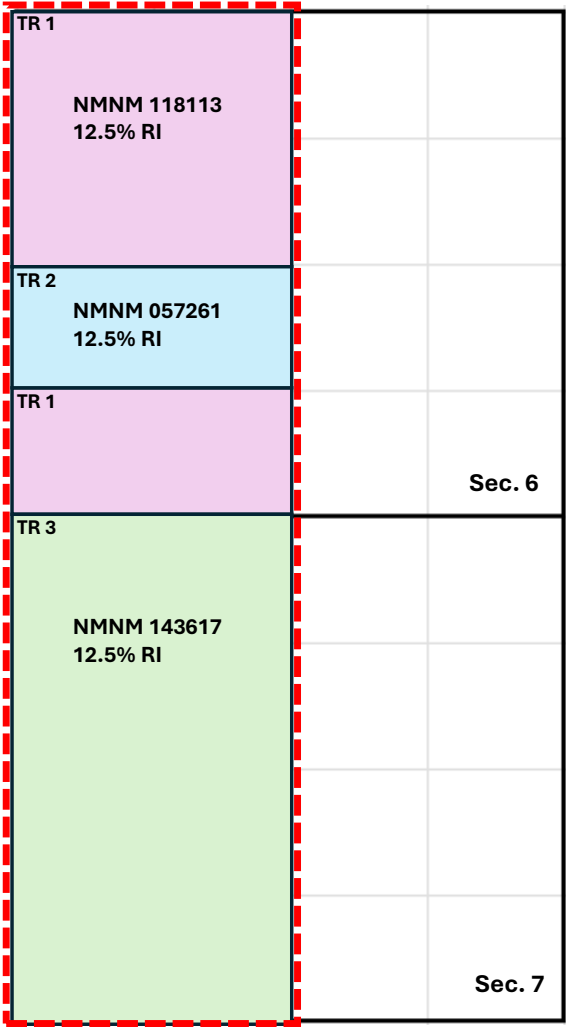
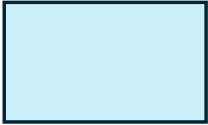


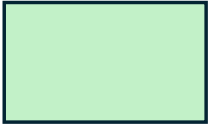
EXHIBIT A-4A



**Tract 1**  
NMNM 118113  
Section 6: Lots 1-4, E2NW, SESW



**Tract 2**  
NMNM 057261  
Section 6: Lot 3, NESW

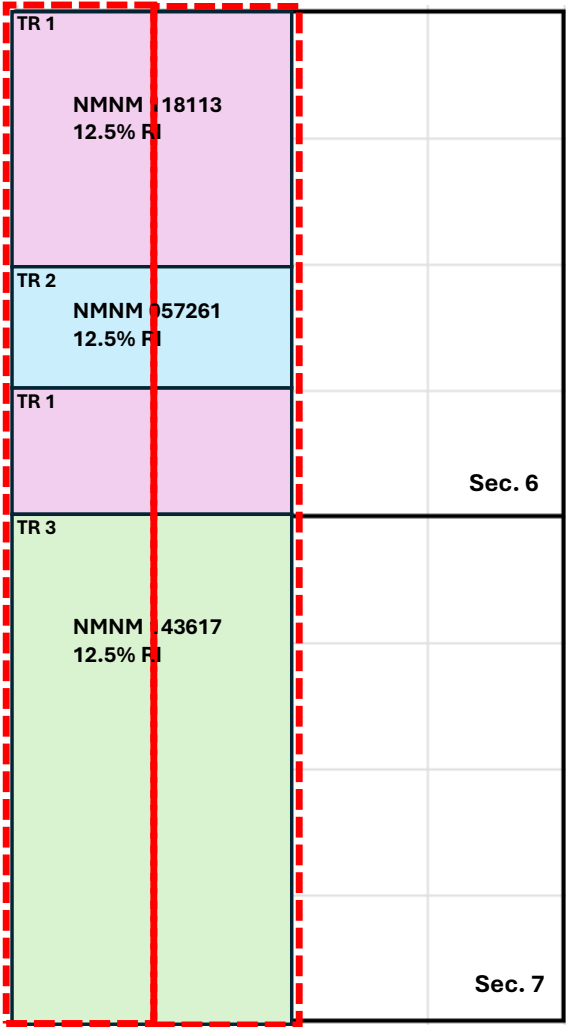


**Tract 3**  
NMNM 143617  
Section 7: E2W2

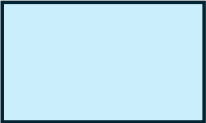


**Rick Vaughn #501H & #503H**  
Bone Spring **Non-Standard Spacing Unit**  
638.4 Acres

EXHIBIT A-4A



**Tract 1**  
NMNM 118113  
Section 6: Lots 1-4, E2NW, SESW



**Tract 2**  
NMNM 057261  
Section 6: Lot 3, NESW



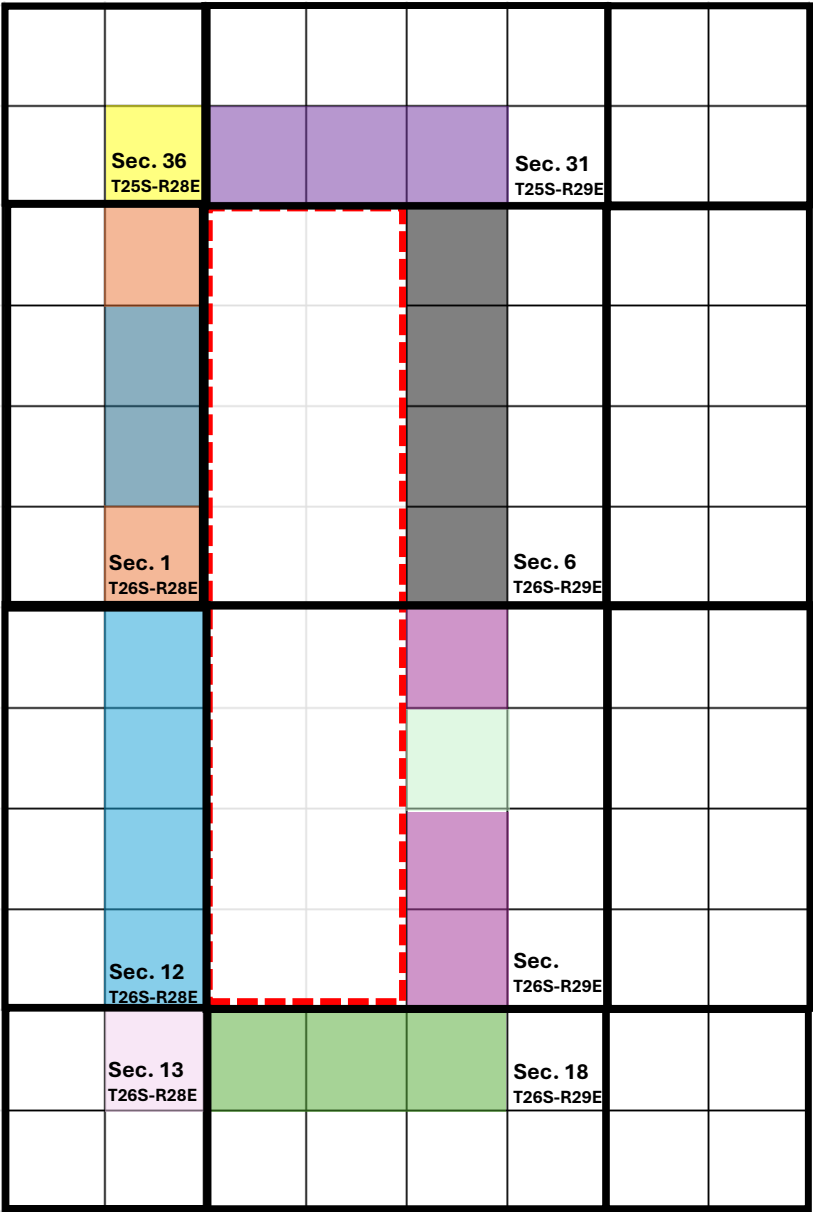
**Tract 3**  
NMNM 143617  
Section 7: E2W2



**Rick Vaughn #501H & #503H**  
Bone Spring **Standard Spacing Units**  
638.4 Acres



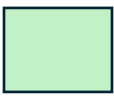


EXHIBIT A-4A



- NM State Lease VB 0815-1**  
EOG Resources Inc.  
COG Operating LLC  
Concho Oil & Gas LLC
- NMNM 100555**  
COG Operating LLC  
ConocoPhillips Company  
EOG Resources Inc.
- NMNM 118113**  
COG Operating LLC  
Concho Oil & Gas LLC  
Contango Resources, Inc.
- NMNM 143617**  
Marathon Oil Permian LLC  
COG Operating LLC
- Fee Lease**  
COG Operating LLC  
Concho Oil & Gas LLC  
Marathon Oil Permian LLC
- United States of America
- NMNM 117119**  
Chevron USA Inc  
Mewbourne Oil Company
- NMNM 012559**  
OXY USA Inc.
- NM State Lease VB 6930-1**  
EOG Resources Inc.  
COG Operating LLC, Concho Oil & Gas LLC, OXY Y-1, Sharbro Oil Ltd Co
- NMNM 012559**  
OXY USA Inc.

**EXHIBIT A-5****Rick Vaughn Federal Com (Bone Spring)****W2 Section 6 & 7, T26S-R29E, NMPM, Eddy County, New Mexico**

<b>NMNM 118113</b> 12.5% RI		<div>  <b>Tract 1</b>  NMNM 118113  Section 6: Lots 1-4, E2NW, SESW </div> <table> <tr> <td>Lessee:</td><td>Marathon Oil Permian, LLC –</td><td>41.762372%</td></tr> <tr> <td></td><td>COG Operating LLC -</td><td>7.825747%</td></tr> <tr> <td></td><td>Concho Oil &amp; Gas LLC -</td><td>.418811%</td></tr> <tr> <td></td><td>Contango Resources, Inc. -</td><td>50.000000%</td></tr> <tr> <td>Op. Rights:</td><td>Marathon Oil Permian, LLC –</td><td>83.524744%</td></tr> <tr> <td></td><td>COG Operating LLC -</td><td>16.063375%</td></tr> <tr> <td></td><td>Concho Oil &amp; Gas LLC -</td><td>.411881%</td></tr> <tr> <td></td><td>Contango Agentco Onshore, Inc.</td><td></td></tr> <tr> <td>ORRI:</td><td>Marbob Energy Corporation</td><td>2.830000%</td></tr> <tr> <td></td><td>Devon Energy Production Company, L.P.</td><td>1.580000%</td></tr> <tr> <td></td><td>Ratified ORRI Parties</td><td>2.869232%</td></tr> </table>	Lessee:	Marathon Oil Permian, LLC –	41.762372%		COG Operating LLC -	7.825747%		Concho Oil & Gas LLC -	.418811%		Contango Resources, Inc. -	50.000000%	Op. Rights:	Marathon Oil Permian, LLC –	83.524744%		COG Operating LLC -	16.063375%		Concho Oil & Gas LLC -	.411881%		Contango Agentco Onshore, Inc.		ORRI:	Marbob Energy Corporation	2.830000%		Devon Energy Production Company, L.P.	1.580000%		Ratified ORRI Parties	2.869232%
Lessee:	Marathon Oil Permian, LLC –	41.762372%																																	
	COG Operating LLC -	7.825747%																																	
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	Devon Energy Production Company, L.P.	1.580000%																																	
	Ratified ORRI Parties	2.869232%																																	
<b>NMNM 057261</b> 12.5% RI		<div>  <b>Tract 2</b>  NMNM 057261  Section 6: Lot 3, NESW </div> <table> <tr> <td>Lessee:</td><td>Regeneration Energy Corporation –</td><td>100%</td></tr> <tr> <td>Op. Rights:</td><td>Marathon Oil Permian, LLC –</td><td>68%</td></tr> <tr> <td></td><td>OXY Y-1 Company -</td><td>32%</td></tr> <tr> <td>ORRI:</td><td>Mary Lee Harang Picou Rev Trust</td><td>8.000000%</td></tr> <tr> <td></td><td>McMullen Minerals, LLC</td><td>.040000%</td></tr> <tr> <td></td><td>Pegasus Resources, LLC</td><td>.460000%</td></tr> <tr> <td></td><td>Pegasus Resources II, LLC</td><td>.140000%</td></tr> <tr> <td></td><td>TD Minerals LLC</td><td>.360000%</td></tr> <tr> <td></td><td>Ratified ORRI Parties</td><td>3.500000%</td></tr> </table>	Lessee:	Regeneration Energy Corporation –	100%	Op. Rights:	Marathon Oil Permian, LLC –	68%		OXY Y-1 Company -	32%	ORRI:	Mary Lee Harang Picou Rev Trust	8.000000%		McMullen Minerals, LLC	.040000%		Pegasus Resources, LLC	.460000%		Pegasus Resources II, LLC	.140000%		TD Minerals LLC	.360000%		Ratified ORRI Parties	3.500000%						
Lessee:	Regeneration Energy Corporation –	100%																																	
Op. Rights:	Marathon Oil Permian, LLC –	68%																																	
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ORRI:	Mary Lee Harang Picou Rev Trust	8.000000%																																	
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	Ratified ORRI Parties	3.500000%																																	
<b>NMNM 143617</b> 12.5% RI	<div> <div>Sec. 6</div> <div>Sec. 7</div> </div>	<div>  <b>Tract 3</b>  NMNM 143617  Section 7: E2W2 </div> <table> <tr> <td>Lessee:</td><td>Marathon Oil Permian LLC –</td><td>100%</td></tr> <tr> <td>Op Rights:</td><td>Marathon Oil Permian LLC –</td><td>100%</td></tr> </table>	Lessee:	Marathon Oil Permian LLC –	100%	Op Rights:	Marathon Oil Permian LLC –	100%																											
Lessee:	Marathon Oil Permian LLC –	100%																																	
Op Rights:	Marathon Oil Permian LLC –	100%																																	

**RECAPITULATION**

Marathon Oil Permian, LLC	89.822995%
COG Operating LLC	6.025024%
Concho Oil & Gas LLC	.1544870%
OXY Y-1 Company	3.997494%
<b>TOTAL:</b>	<b>100.00%</b>

## EXHIBIT A-6



Ben Stecker, RPL  
Land Negotiator  
600 W. Illinois Ave  
Midland, TX 79701  
O: 432-688-9120  
Ben.stecker@conocophillips.com

June 25, 2025

Sent Via FedEx

**OXY Y-1 Company ("Oxy")**

Re: **Rick Vaughn Fed Com (Bone Spring)**  
Township 26 Soth, Range 29 East  
Section 6: W/2  
Section 7: W/2  
Eddy County, New Mexico

Dear Sir or Madam:

Marathon Permian Oil, LLC ("MRO"), as Operator, hereby proposes the drilling of the following horizontal wells with productive laterals located in the W/2 of Section 6, T26S-R29E and the W/2 of Section 7, T26S-R29E, Eddy County, New Mexico (collectively, the "Operation"). The surface pad locations will be located in Unit N of Section 7, T26S-R29E (subject to change).

- **Rick Vaughn Fed Com 501H**, to be drilled to a depth sufficient to test the 2<sup>nd</sup> Sand Interval of the Bone Spring formation at an approximate total vertical depth of 8,332'. The surface location for this well is proposed at a legal location in Unit N of Section 7, T26S-R29E, and a bottom hole location at a legal location in Lot 1 of Section 6, T26S-R29E. The dedicated horizontal spacing unit will be the W/2 of Sections 6 and 7, T26S-R29E, Eddy County, New Mexico. The total estimated cost to drill and complete said well is \$8,730,800, as shown on the attached AFE.
- **Rick Vaughn Fed Com 503H** to be drilled to a depth sufficient to test the 2<sup>nd</sup> Sand Interval of the Bone Spring formation at an approximate total vertical depth of 8,351'. The surface location for this well is proposed at a legal location in Unit N of Section 7, T26S-R29E, and a bottom hole location at a legal location in Unit C of Section 6, T26S-R29E. The dedicated horizontal spacing unit will be W/2 of Sections 6 and 7, T26S-R29E, Eddy County, New Mexico. The total estimated cost to drill and complete said well is \$8,730,800, as shown on the attached AFE.

Please be advised that should you elect to participate in the well(s), there will be two separate charge codes for each. The facility charges will be separate from the drilling and completion of the well(s).

MRO is proposing these wells under the proposed Amendment dated March 1, 2025 to the JOA dated August 1, 2022 between MRO, as Operator, and Oxy, et al, as Non-Operators, in a good faith attempt to reach voluntary agreement of compulsory pooling. If you wish to participate in the Operation described above, please indicate so in the space provided, and sign and return the enclosed AFEs within 30 days of receipt of this correspondence.

## **EXHIBIT A-6**

June 25, 2025 – Page 2

Rick Vaughn Fed Com Bone Spring well proposals

Should you have any questions, please do not hesitate to contact me.

Sincerely,

**Marathon Permian Oil, LLC**

Ben Stecker, RPL  
Land Negotiator

**EXHIBIT A-6**

June 25, 2025 – Page 3

Rick Vaughn Fed Com Bone Spring well proposals

<b>WELL COSTS FOR OXY Y-1 COMPANY</b>			
<b>WELL NAME</b>	<b>TOTAL WELL COST</b>	<b>WIO WI**</b>	<b>WIO WELL COST</b>
<b>RICK VAUGHN FED COM 501H (BS2S)</b>	\$8,730,800	3.99%	\$348,358.92
<b>RICK VAUGHN FED COM 503H (BS2S)</b>	\$8,730,800	3.99%	\$348,358.92
<b>TOTAL OPERATION COST</b>	<b>\$17,461,600</b>		<b>\$696,717.84</b>

Please Indicate your election below:

<b>PARTICIPATE</b> Elect to participate in drilling & completion of well	<b>DO NOT PARTICIPATE</b> Elect <b>NOT</b> to participate in drilling & completion of well	<b>WELL NAME</b>
		<b>RICK VAUGHN FED COM 501H (BS2S)</b>
		<b>RICK VAUGHN FED COM 503H (BS2S)</b>

**OXY Y-1 COMPANY**

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

## EXHIBIT A-6

**ConocoPhillips Company**  
**AUTHORITY FOR EXPENDITURE**  
**Drill & Complete**

<b>Well Name</b> Rick Vaughn Fed Com 501H						<b>Prospect</b> ATLAS 2629			
<b>SHL</b> Legal Location in Section 7 of T26S, R29E						<b>State &amp; County</b> NEW MEXICO, EDDY			
<b>BHL</b> Legal Location in Section 6 of T26S, R29E						<b>Objective</b> DRILL & COMPLETE			
<b>Formation</b> Bone Spring						<b>Depth</b>			
<b>Legal</b> W2 of Sections 6 & 7, T26S-R29E						<b>TVD</b>			
<b>A/E Numbers</b>									
Cost Description	Code	PreSpud (PS)	Pre-Set Casing(PC)	Drilling (DR)	Completions (C)	Tank Btty Constrctn(TB)	Pmpq Equip (PEQ)	Revision	Total
<b>Intangible Costs</b>									
D-Lctn/Pits/Roads	205			\$ 101,000.00				\$ -	\$ 101,000.00
D-Drilling Overhead	206			\$ 7,000.00				\$ -	\$ 7,000.00
D-Daywork Contract	209			\$ 451,000.00				\$ -	\$ 451,000.00
D-Directional Drig Services	210			\$ 293,000.00				\$ -	\$ 293,000.00
D-Fuel & Power	211			\$ 95,000.00				\$ -	\$ 95,000.00
D-Water	212			\$ 79,000.00				\$ -	\$ 79,000.00
D-Bits	213			\$ 101,000.00				\$ -	\$ 101,000.00
D-Mud & Chemicals	214			\$ 206,000.00				\$ -	\$ 206,000.00
D-Cement Surface	217			\$ 20,000.00				\$ -	\$ 20,000.00
D-Cement Intermed	218			\$ 80,000.00				\$ -	\$ 80,000.00
D-Prod-2nd Int Cmt	219			\$ 117,000.00				\$ -	\$ 117,000.00
D-Float Equipment & Centralizers	221			\$ 63,000.00				\$ -	\$ 63,000.00
D-Csg Crews & Equip	222			\$ 69,000.00				\$ -	\$ 69,000.00
D-Contract Labor	225			\$ 7,000.00				\$ -	\$ 7,000.00
D-Company Sprvsn	226			\$ 45,000.00				\$ -	\$ 45,000.00
D-Contract Sprvsn	227			\$ 114,000.00				\$ -	\$ 114,000.00
D-Tstg Csg/Tbg	228			\$ 43,000.00				\$ -	\$ 43,000.00
D-Mud Logging Unit	229			\$ 43,000.00				\$ -	\$ 43,000.00
D-Rentals-Surface	235			\$ 178,000.00				\$ -	\$ 178,000.00
D-Rentals-Subsrfc	236			\$ 73,000.00				\$ -	\$ 73,000.00
D-Trucking/Forklift/Rig Mob	237			\$ 155,000.00				\$ -	\$ 155,000.00
D-Welding Services	238			\$ 1,800.00				\$ -	\$ 1,800.00
D-Contingency	243			\$ 63,000.00				\$ -	\$ 63,000.00
D-Envrmtl/Clsd Loop	244			\$ 281,000.00				\$ -	\$ 281,000.00
C-Wellbore Frac Prep	304				\$ 113,000.00			\$ -	\$ 113,000.00
C-Lctn/Pits/Roads	305				\$ 11,000.00			\$ -	\$ 11,000.00
C-Completion OH	306				\$ 18,000.00			\$ -	\$ 18,000.00
C-Frac Equipment	307				\$ 680,000.00			\$ -	\$ 680,000.00
C-Frac Chemicals	308				\$ 494,000.00			\$ -	\$ 494,000.00
C-Frac Proppant	309				\$ 225,000.00			\$ -	\$ 225,000.00
C-Frac Proppant Transportation	310				\$ 348,000.00			\$ -	\$ 348,000.00
C-Fuel Delivery & Services	311				\$ 46,000.00			\$ -	\$ 46,000.00
C-Water	312				\$ 329,000.00			\$ -	\$ 329,000.00
C-Frac Surface Rentals	315				\$ 311,000.00			\$ -	\$ 311,000.00
C-Contract Labor	325				\$ 11,000.00			\$ -	\$ 11,000.00
C-Company Sprvsn	326				\$ 11,000.00			\$ -	\$ 11,000.00
C-Contract Sprvsn	327				\$ 167,000.00			\$ -	\$ 167,000.00
C-Artificial Lift Install	329				\$ 54,000.00			\$ -	\$ 54,000.00
C-Perf/Wireline Svc	331				\$ 371,000.00			\$ -	\$ 371,000.00
C-Trucking/Forklift/Rig Mob	337				\$ 11,000.00			\$ -	\$ 11,000.00
C-Water Disposal	339				\$ 47,000.00			\$ -	\$ 47,000.00
C-Contingency	343				\$ 89,000.00			\$ -	\$ 89,000.00
C-Dyed Diesel	345				\$ 187,000.00			\$ -	\$ 187,000.00
C-Drillout	346				\$ 356,000.00			\$ -	\$ 356,000.00
TB-Damages/Right of Way	351					\$ 2,000.00		\$ -	\$ 2,000.00
TB-Location/Pits/Roads	353					\$ 45,000.00		\$ -	\$ 45,000.00
TB-Contract Labor	356					\$ 243,000.00		\$ -	\$ 243,000.00
PEQ-Contract Labor	374						\$ 18,000.00	\$ -	\$ 18,000.00
PEQ-Water Disposal	387						\$ 79,000.00	\$ -	\$ 79,000.00
PEQ-HRZ Well Offset Frac	391						\$ 8,000.00	\$ -	\$ 8,000.00
<b>Total Intangible Costs</b>		\$ -	\$ -	\$ 2,685,800.00	\$ 3,879,000.00	\$ 290,000.00	\$ 105,000.00	\$ -	\$ 6,959,800.00
<b>Tangible Costs</b>									
PEQ-Flowback Crews & Equip	392						\$ 37,000.00	\$ -	\$ 37,000.00
D-Surface Casing	401			\$ 22,000.00				\$ -	\$ 22,000.00
D-Intermed Csg	402			\$ 152,000.00				\$ -	\$ 152,000.00
D-Production Casing/Liner	403			\$ 337,000.00				\$ -	\$ 337,000.00
D-Wellhead Equip	405			\$ 79,000.00				\$ -	\$ 79,000.00
C-Tubing	504				\$ 61,000.00			\$ -	\$ 61,000.00
C-Wellhead Equip	505				\$ 34,000.00			\$ -	\$ 34,000.00
TB-Tanks	510					\$ 78,000.00		\$ -	\$ 78,000.00
TB-Flowlines/Pipelines	511					\$ 35,000.00		\$ -	\$ 35,000.00
TB-Htr Trlr/Seprtr	512					\$ 251,000.00		\$ -	\$ 251,000.00
TB-Electrical System/Equipment	513					\$ 153,000.00		\$ -	\$ 153,000.00
C-Pckrs/Anchors/Hggs	514				\$ 71,000.00			\$ -	\$ 71,000.00
TB-Couplings/Fittings/Valves	515					\$ 249,000.00		\$ -	\$ 249,000.00
TB-Pumps-Surface	521					\$ 35,000.00		\$ -	\$ 35,000.00
TB-Instrumentation/SCADA/POC	522					\$ 26,000.00		\$ -	\$ 26,000.00
TB-Miscellaneous	523					\$ 26,000.00		\$ -	\$ 26,000.00
TB-Meters/Lacts	525					\$ 35,000.00		\$ -	\$ 35,000.00
TB-Flares/Combusters/Emission	526					\$ 42,000.00		\$ -	\$ 42,000.00
C-Gas Lift/Compression	527				\$ 30,000.00			\$ -	\$ 30,000.00
PEQ-Wellhead Equipment	531						\$ 18,000.00	\$ -	\$ 18,000.00
<b>Total Tangible Costs</b>		\$ -	\$ -	\$ 590,000.00	\$ 196,000.00	\$ 930,000.00	\$ 55,000.00	\$ -	\$ 1,771,000.00
<b>Total Gross Cost</b>		\$ -	\$ -	\$ 3,275,800.00	\$ 4,075,000.00	\$ 1,220,000.00	\$ 160,000.00	\$ -	\$ 8,730,800.00

Note: The above costs are estimates only. Actual costs will be billed as incurred.

ConocoPhillips Company

By: \_\_\_\_\_

Date Prepared: \_\_\_\_\_

We approve:

\_\_\_\_\_% Working Interest

ConocoPhillips Company

By: \_\_\_\_\_

Company:

By: \_\_\_\_\_

Printed Name:

Title: \_\_\_\_\_

Date: \_\_\_\_\_

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

EXHIBIT A-6

ConocoPhillips Company  
AUTHORITY FOR EXPENDITURE  
Drill & Complete

<b>Well Name</b> Rick Vaughn Fed Com 503H						<b>Prospect</b> ATLAS 2629			
<b>SHL</b> Legal Location in Section 7 of T26S, R29E						<b>State &amp; County</b> NEW MEXICO, EDDY			
<b>BHL</b> Legal Location in Section 6 of T26S, R29E						<b>Objective</b> DRILL & COMPLETE			
<b>Formation</b> Bone Spring						<b>Depth</b>			
<b>Legal</b> W2 of Sections 6 & 7, T26S-R29E						<b>TVD</b>			
<b>A/E Numbers</b>									
Cost Description	Code	PreSpud (PS)	Pre-Set Casing(PC)	Drilling (DR)	Completions (C)	Tank Btty Constrctn(TB)	Pmpq Equip (PEQ)	Revision	Total
<b>Intangible Costs</b>									
D-Lctn/Pits/Roads	205			\$ 101,000.00				\$ -	\$ 101,000.00
D-Drilling Overhead	206			\$ 7,000.00				\$ -	\$ 7,000.00
D-Daywork Contract	209			\$ 451,000.00				\$ -	\$ 451,000.00
D-Directional Drig Services	210			\$ 293,000.00				\$ -	\$ 293,000.00
D-Fuel & Power	211			\$ 95,000.00				\$ -	\$ 95,000.00
D-Water	212			\$ 79,000.00				\$ -	\$ 79,000.00
D-Bits	213			\$ 101,000.00				\$ -	\$ 101,000.00
D-Mud & Chemicals	214			\$ 206,000.00				\$ -	\$ 206,000.00
D-Cement Surface	217			\$ 20,000.00				\$ -	\$ 20,000.00
D-Cement Intermed	218			\$ 80,000.00				\$ -	\$ 80,000.00
D-Prod-2nd Int Cmt	219			\$ 117,000.00				\$ -	\$ 117,000.00
D-Float Equipment & Centralizers	221			\$ 63,000.00				\$ -	\$ 63,000.00
D-Csg Crews & Equip	222			\$ 69,000.00				\$ -	\$ 69,000.00
D-Contract Labor	225			\$ 7,000.00				\$ -	\$ 7,000.00
D-Company Sprvsn	226			\$ 45,000.00				\$ -	\$ 45,000.00
D-Contract Sprvsn	227			\$ 114,000.00				\$ -	\$ 114,000.00
D-Tstg Csg/Tbg	228			\$ 43,000.00				\$ -	\$ 43,000.00
D-Mud Logging Unit	229			\$ 43,000.00				\$ -	\$ 43,000.00
D-Rentals-Surface	235			\$ 178,000.00				\$ -	\$ 178,000.00
D-Rentals-Subsrfc	236			\$ 73,000.00				\$ -	\$ 73,000.00
D-Trucking/Forklift/Rig Mob	237			\$ 155,000.00				\$ -	\$ 155,000.00
D-Welding Services	238			\$ 1,800.00				\$ -	\$ 1,800.00
D-Contingency	243			\$ 63,000.00				\$ -	\$ 63,000.00
D-Envrmtl/Clsd Loop	244			\$ 281,000.00				\$ -	\$ 281,000.00
C-Wellbore Frac Prep	304				\$ 113,000.00			\$ -	\$ 113,000.00
C-Lctn/Pits/Roads	305				\$ 11,000.00			\$ -	\$ 11,000.00
C-Completion OH	306				\$ 18,000.00			\$ -	\$ 18,000.00
C-Frac Equipment	307				\$ 680,000.00			\$ -	\$ 680,000.00
C-Frac Chemicals	308				\$ 494,000.00			\$ -	\$ 494,000.00
C-Frac Proppant	309				\$ 225,000.00			\$ -	\$ 225,000.00
C-Frac Proppant Transportation	310				\$ 348,000.00			\$ -	\$ 348,000.00
C-Fuel Delivery & Services	311				\$ 46,000.00			\$ -	\$ 46,000.00
C-Water	312				\$ 329,000.00			\$ -	\$ 329,000.00
C-Frac Surface Rentals	315				\$ 311,000.00			\$ -	\$ 311,000.00
C-Contract Labor	325				\$ 11,000.00			\$ -	\$ 11,000.00
C-Company Sprvsn	326				\$ 11,000.00			\$ -	\$ 11,000.00
C-Contract Sprvsn	327				\$ 167,000.00			\$ -	\$ 167,000.00
C-Artificial Lift Install	329				\$ 54,000.00			\$ -	\$ 54,000.00
C-Perf/Wireline Svc	331				\$ 371,000.00			\$ -	\$ 371,000.00
C-Trucking/Forklift/Rig Mob	337				\$ 11,000.00			\$ -	\$ 11,000.00
C-Water Disposal	339				\$ 47,000.00			\$ -	\$ 47,000.00
C-Contingency	343				\$ 89,000.00			\$ -	\$ 89,000.00
C-Dyed Diesel	345				\$ 187,000.00			\$ -	\$ 187,000.00
C-Drillout	346				\$ 356,000.00			\$ -	\$ 356,000.00
TB-Damages/Right of Way	351					\$ 2,000.00		\$ -	\$ 2,000.00
TB-Location/Pits/Roads	353					\$ 45,000.00		\$ -	\$ 45,000.00
TB-Contract Labor	356					\$ 243,000.00		\$ -	\$ 243,000.00
PEQ-Contract Labor	374						\$ 18,000.00	\$ -	\$ 18,000.00
PEQ-Water Disposal	387						\$ 79,000.00	\$ -	\$ 79,000.00
PEQ-HRZ Well Offset Frac	391						\$ 8,000.00	\$ -	\$ 8,000.00
<b>Total Intangible Costs</b>		\$ -	\$ -	\$ 2,685,800.00	\$ 3,879,000.00	\$ 290,000.00	\$ 105,000.00	\$ -	\$ 6,959,800.00
<b>Tangible Costs</b>									
PEQ-Flowback Crews & Equip	392						\$ 37,000.00	\$ -	\$ 37,000.00
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D-Production Casing/Liner	403			\$ 337,000.00				\$ -	\$ 337,000.00
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C-Wellhead Equip	505				\$ 34,000.00			\$ -	\$ 34,000.00
TB-Tanks	510					\$ 78,000.00		\$ -	\$ 78,000.00
TB-Flowlines/Pipelines	511					\$ 35,000.00		\$ -	\$ 35,000.00
TB-Htr Trlr/Seprtr	512					\$ 251,000.00		\$ -	\$ 251,000.00
TB-Electrical System/Equipment	513					\$ 153,000.00		\$ -	\$ 153,000.00
C-Pckrs/Anchors/Hgys	514				\$ 71,000.00			\$ -	\$ 71,000.00
TB-Couplings/Fittings/Valves	515					\$ 249,000.00		\$ -	\$ 249,000.00
TB-Pumps-Surface	521					\$ 35,000.00		\$ -	\$ 35,000.00
TB-Instrumentation/SCADA/POC	522					\$ 26,000.00		\$ -	\$ 26,000.00
TB-Miscellaneous	523					\$ 26,000.00		\$ -	\$ 26,000.00
TB-Meters/Lacts	525					\$ 35,000.00		\$ -	\$ 35,000.00
TB-Flares/Combusters/Emission	526					\$ 42,000.00		\$ -	\$ 42,000.00
C-Gas Lift/Compression	527				\$ 30,000.00			\$ -	\$ 30,000.00
PEQ-Wellhead Equipment	531						\$ 18,000.00	\$ -	\$ 18,000.00
<b>Total Tangible Costs</b>		\$ -	\$ -	\$ 590,000.00	\$ 196,000.00	\$ 930,000.00	\$ 55,000.00	\$ -	\$ 1,771,000.00
<b>Total Gross Cost</b>		\$ -	\$ -	\$ 3,275,800.00	\$ 4,075,000.00	\$ 1,220,000.00	\$ 160,000.00	\$ -	\$ 8,730,800.00
<b>Note: The above costs are estimates only. Actual costs will be billed as incurred.</b>									

ConocoPhillips Company

By: \_\_\_\_\_

Date Prepared: \_\_\_\_\_

We approve:  
\_\_\_\_\_  
% Working Interest

ConocoPhillips Company

By: \_\_\_\_\_

Company:  
By: \_\_\_\_\_

Printed Name:  
Title:  
Date: \_\_\_\_\_

This AFE is only an estimate. By signing you agree to pay  
your share of the actual costs incurred.

**EXHIBIT A-6****RATIFICATION OF COMMUNITIZATION AGREEMENT**

**RICK VAUGHN FED COM UNIT  
W2 OF SECTIONS 6 & 7, T26S-R29S  
Eddy County, New Mexico  
Bone Spring Formation**

STATE OF NEW MEXICO       )  
  )  
COUNTY OF EDDY            )

**COG OPERATING LLC**, as Operator, executed a Communitization Agreement pooling and combining the oil and gas leases set forth therein, insofar as they cover the 638.40 acre communitized area comprised of the W2 of Sections 6 & 7, T26S-R29E, Eddy County, New Mexico, as to the Bone Spring formation.

«**PARTY**», whose address is «ADDRESS», «CITY\_», «STATE» «ZIP», is an owner of an interest located in the unit referenced above.

«**PARTY**», desires to adopt, ratify and confirm the Communitization Agreement insofar as it covers the right, title and interest in and to the oil and gas leases and the lands included in the communitized area created by COG Operating LLC.

In consideration of the premises «**PARTY**», does hereby adopt, ratify and confirm the above-described Communitization Agreement insofar as it covers its right, title and interest in the oil and gas leases and the lands included in the communitized area, and agrees that his/her/its interest is subject to all of the terms and provisions therein.

This Ratification is effective as of the effective date of the above-referenced Communitization Agreement.

«**PARTY**»

\_\_\_\_\_  
By: \_\_\_\_\_  
Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
  )  
COUNTY OF \_\_\_\_\_ )

This instrument was acknowledged before me on \_\_\_\_\_(date),  
by \_\_\_\_\_(name), as \_\_\_\_\_(title) of  
«**PARTY**».

\_\_\_\_\_  
Notary Public - State of \_\_\_\_\_



**EXHIBIT A-7****Rick Vaughn Federal Com****W2 Section 6 & 7, T26S-R29E, NMPPM, Eddy County, New Mexico**

Int Type	Party	Tract	DATE RATIFICATION MAILED
<b>RI</b>	United States of America		
<b>ORRI</b>	Nestegg Energy Corporation	1	5/22/2025
	Marbob Energy Corporation	1	5/22/2025
	Contango AgentCo Onshore, Inc.	1	5/22/2025
	COG Operating LLC	1	NA
	Concho Oil & Gas LLC	1	NA
	Devon Energy Production Company, L.P.	1	5/22/2025
	Mary Lee Harang Picou Rev Trust dated April 14, 2000	2	5/22/2025
	McMullen Minerals, LLC	2	5/22/2025
	Pegasus Resources, LLC	2	5/22/2025
	Pegasus Resources II, LLC	2	5/22/2025
	TD Minerals LLC	2	5/22/2025
	Fortis Minerals II, LLC	2	5/22/2025
	Wing Resources IV, LLC	2	5/22/2025
		<b>PARTY</b>	<b>SIGNED RATIFICATION</b>

	PARTY	Tract	COMM AGMT MAILED
<b>WI</b>	MARATHON OIL PERMIAN, LLC	1,2,3	
	COG OPERATING LLC	1	
	CONCHO OIL & GAS LLC	1	
	OXY Y-1 COMPANY	2	4/1/2025
<b>Record</b>	CONTAGO RESOURCES, INC	1	4/1/2025
<b>Titile</b>	REGENERATION ENERGY CORP	2	4/1/2025

**EXHIBIT B**

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

**APPLICATION OF MARATHON OIL PERMIAN,  
LLC FOR COMPULSORY POOLING AND NON-  
STANDARD SPACING UNIT, EDDY COUNTY,  
NEW MEXICO.**

**CASE NO. 25478**

**SELF-AFFIRMED STATEMENT  
OF JESSICA L. PONTIFF**

1. I am a geologist for ConocoPhillips, the parent company of Applicant Marathon Oil Permian, LLC ("Marathon"). I am over 18 years of age, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division ("Division") and my credentials as an expert in geology were accepted and made a matter of record.

2. I am familiar with the geological matters that pertain to the above-referenced case.

3. **Exhibit B-1** is a location map of the proposed horizontal spacing unit comprised of W/2 Sections 6 & 7, Township 26 South, Range 29 East, N.M.P.M., being 638.40 acres, more or less (the "Unit"). The approximate wellbore paths for the proposed **Rick Vaughn Fed Com 501H & 503H Wells** ("Vaughn Wells") are represented by red dashed lines. Existing producing wells in the targeted interval are represented by solid brown lines.

4. **Exhibit B-2** is a subsea structure map for the Bone Spring formation that is representative of the targeted interval for the proposed Vaughn Wells. The data points are indicated by green crosses. The approximate wellbore paths of the wells are depicted by dashed lines. The map demonstrates the formation is gently dipping to the east in this area. I do not observe any faulting, pinch-outs, or geologic impediments to developing the targeted intervals with horizontal wells.

**EXHIBIT B**

5. **Exhibit B-3** is a cross section map for the Bone Spring formation that identifies three wells penetrating the targeted interval used to construct a structural cross-section from A to A'. I used these well logs because they penetrate the targeted interval, are of good quality, and are representative of the geology in the area.

6. **Exhibit B-4** is a stratigraphic cross-section using the representative wells identified on Exhibit B-3. It contains gamma ray, resistivity and porosity logs. The proposed landing zones for the Vaughn Wells are labeled on the exhibit. This cross-section demonstrates the target interval is continuous across the Unit.

7. In my opinion, the standup orientation of the proposed wells and existing wells is appropriate due to the geologic stress and consistent with existing development in this area.

8. Based on my geologic study of the area, the targeted interval[s] underlying the Unit is suitable for development by horizontal wells and the tracts comprising the Unit will contribute more or less equally to the production of the wells.

9. In my opinion, the granting of Marathon's application will serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

10. The attached exhibits were either prepared by me or under my supervision or were compiled from company business records.

11. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm my testimony above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date identified next to my signature below.

  
Jessica L. Pontiff

July 29, 2025  
Date

EXHIBIT B-1

Rick Vaughn 501H and 503H  
Location Map

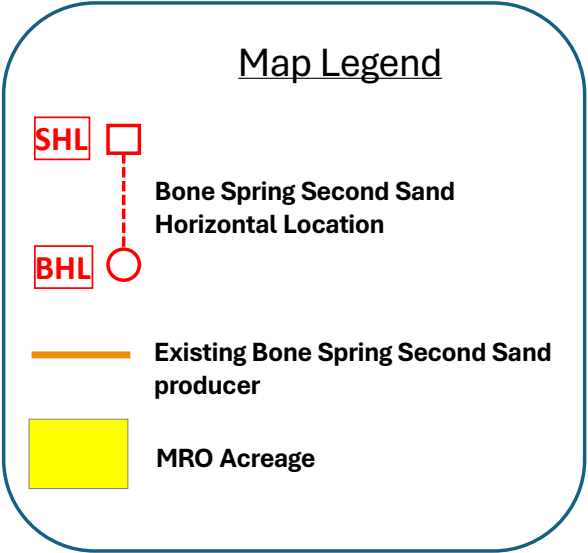


EXHIBIT B-2

Rick Vaughn 501H and 503H:  
Top of Bone Spring Second Sand – Structure Map

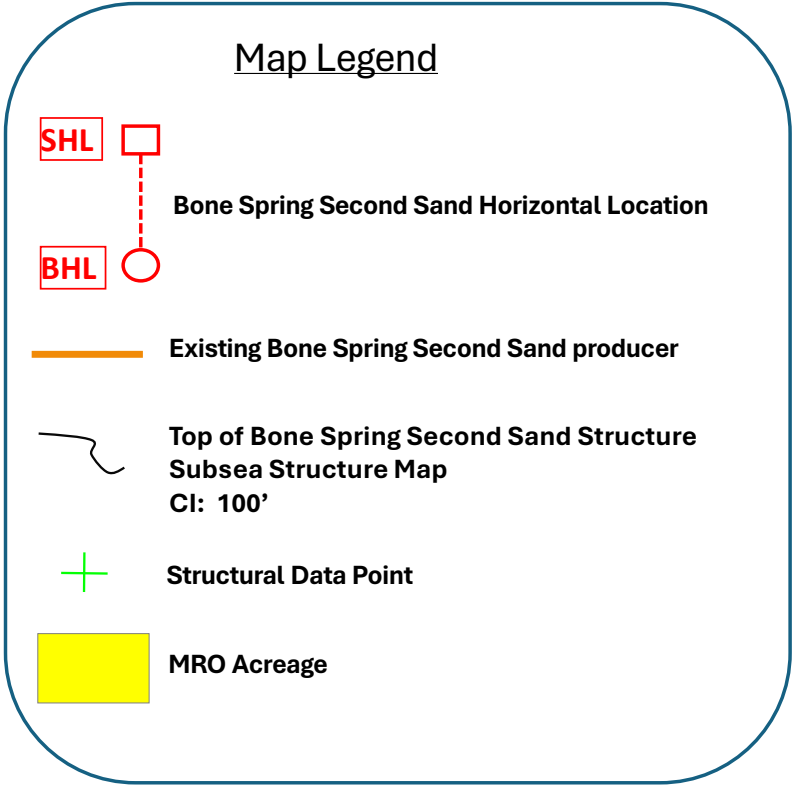
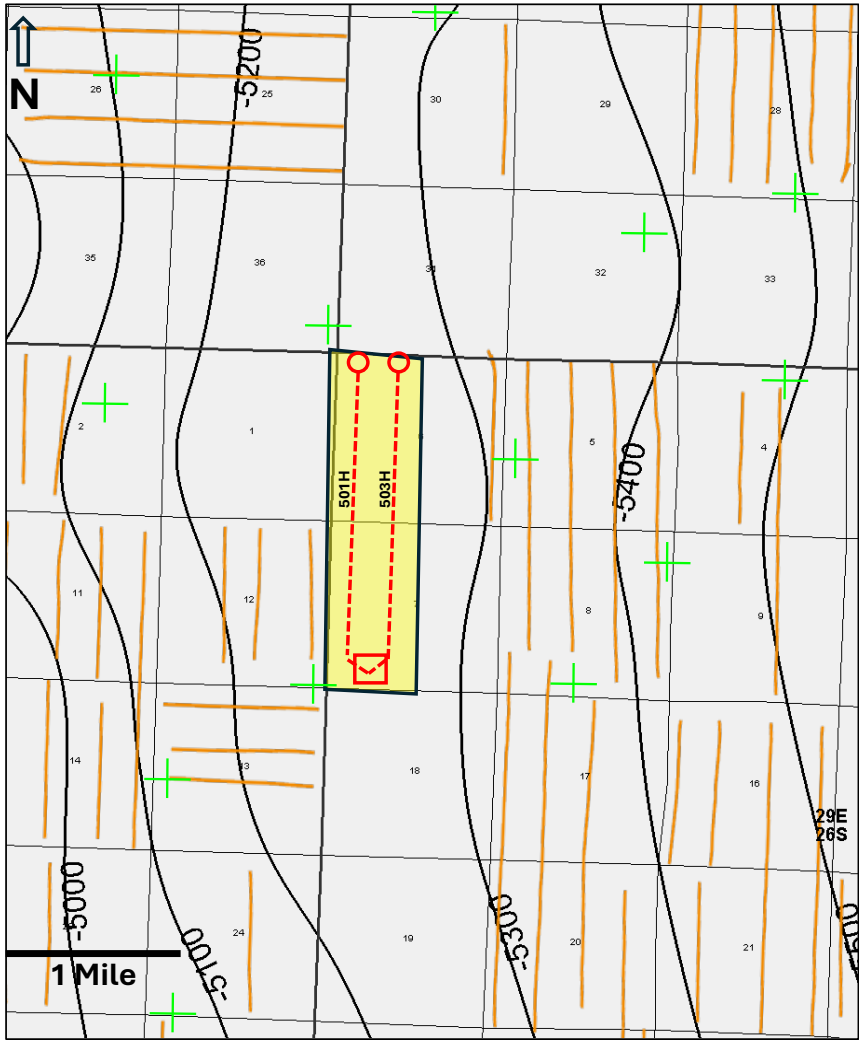


EXHIBIT B-3

Rick Vaughn 501H and 503H:  
Cross Section Map

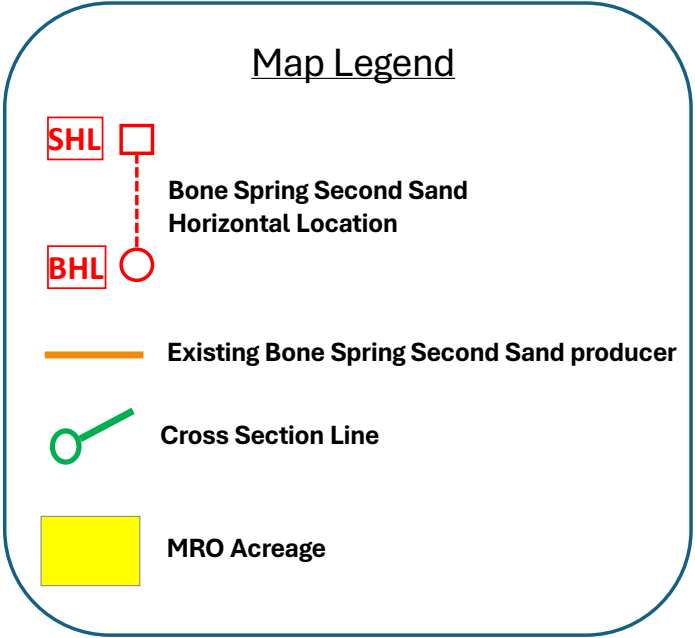




EXHIBIT B-4

Rick Vaughn 501H and 503H:  
Stratigraphic Cross Section A-A'

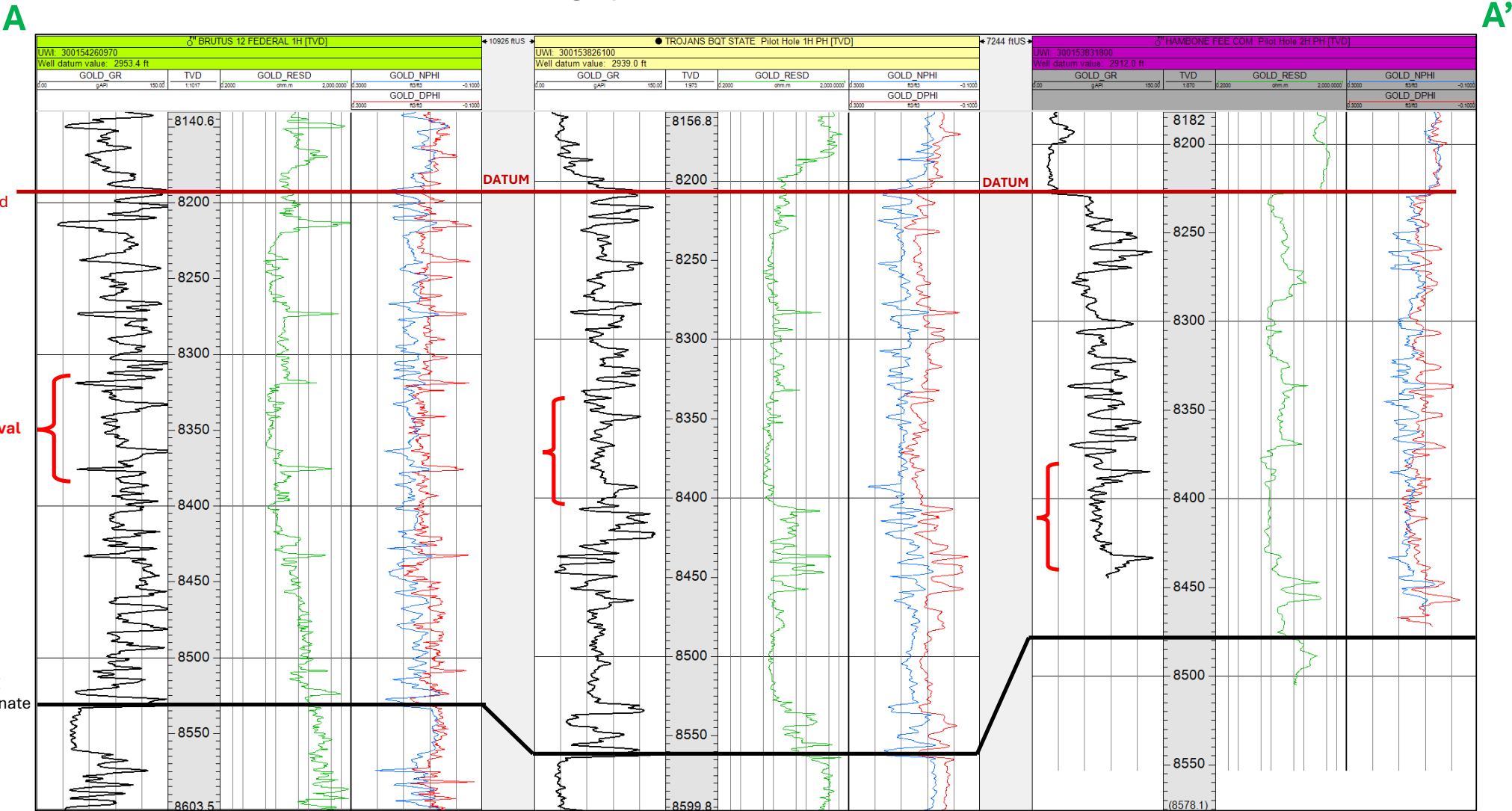


EXHIBIT C

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

APPLICATION OF MARATHON OIL PERMIAN  
LLC FOR COMPULSORY POOLING AND APPROVAL  
OF NON-STANDARD SPACING UNIT  
EDDY COUNTY, NEW MEXICO

CASE NO. 25478

**SELF AFFIRMED STATEMENT OF ANN COX TRIPP**

1. I, Ann Cox Tripp, am attorney in fact and authorized representative of Marathon Oil Permian LLC, the Applicant herein.
2. I am familiar with the Notice Letter to interested parties attached as **Exhibit C-1**, and caused the Notice Letters, along with the Application in this case, sent to the parties set out in the Chart attached as **Exhibit C-2**.
3. The Notice Letter Chart in **Exhibit C-2** also provides the date each Notice Letter was sent and the date each return was received or the status of delivery as reported by the United States Postal Service as of July 30, 2025.
4. Copies of the certified mail return receipts (i.e., the green cards) and white slips are attached collectively as **Exhibit C-3** as supporting documentation for proof of mailing and the information provided in **Exhibit C-2**.
5. On July 22, 2025, I caused a notice to be published in the Carlsbad Current Argus. An Affidavit of Publication from the Legal Clerk of the Carlsbad Current Argus, along with a copy of the notice publication, is attached as **Exhibit C-4**.
6. I understand this Self-Affirmed Statement will be used as written testimony in the subject case. I affirm that my testimony above is true and correct and is made under penalty of



perjury under the laws of the State of New Mexico. My testimony is made as of the date  
handwritten next to my signature below.

DATE: July 31, 2025



ANN COX TRIPP

**EXHIBIT C-1**



hinklelawfirm.com

**HINKLE SHANOR LLP**

**ATTORNEYS AT LAW**

P.O. BOX 10

**ROSWELL, NEW MEXICO 88202**

505-622-6510 (FAX) 575-632-9223

WRITER:

Ann Cox Tripp, Partner  
atripp@hinklelawfirm.com

July 3, 2025

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

**TO ALL PARTIES ENTITLED TO NOTICE**

**Re: Case No. 25478 – Application of Marathon Oil Permian, LLC for Compulsory Pooling and Approval of Nonstandard Spacing Unit, Eddy County, New Mexico**

To whom it may concern:

This letter is to advise you that the enclosed application were filed with the New Mexico Oil Conservation Division. The hearing will be conducted on August 7, 2025, beginning at 8:15 a.m.

The hearing will be conducted in a hybrid fashion, both in-person at the Energy, Minerals, Natural Resources Department, Wendell Chino Building, Pecos Hall, 1220 South St. Francis Drive, 1st Floor, Santa Fe, NM 87505 and via the WebEx virtual meeting platform. To participate virtually, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/oed/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Pursuant to Division Rule 19.15.4.13.B, a party who intends to present evidence at the hearing shall file a pre-hearing statement and serve copies on other parties, or the attorneys of parties who are represented by counsel, at least four business days in advance of a scheduled hearing, but in no event later than 5:00 p.m. Mountain Time, on the Thursday preceding the scheduled hearing date. The statement must be submitted through the OCD E-Permitting system (<https://wwwapps.emnrd.nm.gov/oed/oedpermitting/>) or via e-mail to [oed.hearings@emnrd.nm.gov](mailto:oed.hearings@emnrd.nm.gov) and should include: the names of the parties and their attorneys, a concise statement of the case, the names of all witnesses the party will call to testify at the hearing, the approximate time the party will need to present its case, and identification of any procedural matters that are to be resolved prior to the hearing.

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PO BOX 10  
ROSWELL, NEW MEXICO 88202  
(575) 622-6510  
FAX (575) 623-9332

---

7601 JEFFERSON ST NE · SUITE 180  
ALBUQUERQUE, NEW MEXICO 87109  
505-858-8320  
(FAX) 505-858-8321

---

PO BOX 2068  
SANTA FE, NEW MEXICO 87504  
(505) 982-4554  
FAX (505) 982-8623

**EXHIBIT C-1**

All Parties Entitled to Notice  
July 3, 2025  
Page 2

If you have any questions about this application, please contact Jeffrey Stout at ConocoPhillips (432-818-1372), jeff.s.stout@conocophillips.com.

Sincerely,

**HINKLE SHANOR LLP**

/s/ Ann Cox Tripp  
Ann Cox Tripp

Enclosure

HINKLE SHANOR LLP



hinklelawfirm.com

**EXHIBIT C-1**  
**HINKLE SHANOR LLP**  
**ATTORNEYS AT LAW**  
P.O. BOX 10  
ROSWELL, NEW MEXICO 88202  
505-622-6510 (FAX) 575-632-9223

WRITER:  
Ann Cox Tripp, Partner  
atripp@hinklelawfirm.com

July 18, 2025

**OXY Y-1 COMPANY**  
**5 GREENWAY PLAZA**  
**HOUSTON, TEXAS 77046**

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

**TO ALL PARTIES ENTITLED TO NOTICE**

**Re: Case No. 25478 – Amended Application of Marathon Oil Permian, LLC for Compulsory Pooling and Approval of Nonstandard Spacing Unit, Eddy County, New Mexico**

To whom it may concern:

This letter is to advise you that the enclosed Amended Application was filed with the New Mexico Oil Conservation Division. The hearing will be conducted on August 7, 2025, beginning at 8:15 a.m.

The hearing will be conducted in a hybrid fashion, both in-person at the Energy, Minerals, Natural Resources Department, Wendell Chino Building, Pecos Hall, 1220 South St. Francis Drive, 1st Floor, Santa Fe, NM 87505 and via the WebEx virtual meeting platform. To participate virtually, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/oecd/hearing-info/>. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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PO BOX 10  
ROSWELL, NEW MEXICO 88202  
(575) 622-6510  
FAX (575) 623-9332

---

7601 JEFFERSON ST NE · SUITE 180  
ALBUQUERQUE, NEW MEXICO 87109  
505-858-8320  
(FAX) 505-858-8321

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PO BOX 2068  
SANTA FE, NEW MEXICO 87504  
(505) 982-4554  
FAX (505) 982-8623

**EXHIBIT C-1**

July 18, 2025

Page 2

If you have any questions about this application, please contact Jeffrey Stout at ConocoPhillips (432-818-1372), [jeff.s.stout@conocophillips.com](mailto:jeff.s.stout@conocophillips.com).

Sincerely,

**HINKLE SHANOR LLP**

/s/ Ann Cox Tripp  
Ann Cox Tripp

Enclosure

HINKLE SHANOR LLP

**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

<b>PARTY</b>	<b>DATE MAILED</b>	<b>CERT MAIL #</b>	<b>RETURN RECEIVED</b>
1836 Royalty Partners, LLC 116 SFM 1187 Aledo, TX 77027	07/03/2025	9589071052700415917761	07/11/2025
Burlington Resources Oil & Gas Co. LP 600 W. Illinois Avenue Midland, TX 79701	07/03/2025	9589071052700415917907	07/21/2025
Chevron USA Inc. 1400 Smith Street Houston, TX 77002	07/03/2025	9589071052701147072780	07/14/2025
Christine Speidel Fowlkes, SSP 416 S. Manzanita Dr. El Paso, TX 79928	07/03/2025	9589071052701147072612	Delivered 07/16/2025
Christopher Fowlkes a/k/a Christopher C. Fowlkes aka Christopher Clegg Fowlkes, SSP 12640 Bosing Court El Paso, TX 7600	07/03/2025	9589071052701147072605	Notice Left – No Authorized Recipient Available
COG Operating LLC 600 W. Illinois Ave. Midland, TX 79701	07/03/2025	9589071052701147072599	07/21/2025
Concho Oil & Gas LLC 600 W. Illinois Ave. Midland, TX 79701	07/03/2025	9589071052701147072582	07/21/2025

**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

<b>PARTY</b>	<b>DATE MAILED</b>	<b>CERT MAIL #</b>	<b>RETURN RECEIVED</b>
Contango Agentco Onshore Inc. 3230 Camp Bowie Blvd., Suite 810 Fort Worth, TX 79928	07/03/2025	9589071052701147072568	07/10/2025
Contango Resources LLC 111 E. 5 <sup>th</sup> Street, Ste. 300 Fort Worth, TX 79928	07/03/2025	9589071052701147072681	Unclaimed – being returned to sender
Contango Resources LLC 717 Texas Ave., Ste. 2900 Houston, TX 77002	07/03/2025	9589071052701147072674	Delivered 07/08/25
ConocoPhillips Company 600 W. Illinois Avenue Midland, TX 79701	07/03/2025	9589071052701147072575	07/21/2025
Delaware Ranch, Inc. 1304 W. Riverside Dr. Carlsbad, NM 88220	07/03/2025	9589071052701147072667	07/10/2025
Devon Energy Production Company 333 West Sheridan Avenue Oklahoma City, OK 79928	07/03/2025	9589071052701147072933	07/14/2025
Fortis Minerals II, LLC 3230 Camp Bowie Blvd., Ste. 810 Fort Worth, TX 79928	07/03/2025	9589071052701147072926	07/24/2025

**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

PARTY	DATE MAILED	CERT. MAIL #	RETURN RECEIVED
Edwin Fowlkes Heirs Family LP 555 N 1400 E Mapleton, UT 75014	07/03/2025	9589071052701147072643	07/10/2025
Edwin Hockaday Fowlkes, III aka Trey Fowlkes, SP P.O. Box 23416 Waco, TX 79702	07/03/2025	9589071052701147072636	07/14/2025
EOG Resources Inc. 5509 Champions Drive Midland, TX 79706	07/03/2025	9589071052701147072735	07/21/2025
Mary Lee Huang Picou Rev. Trust dtd 04/14/2000 605 Virginia Beach, VA 23664	07/03/2025	9589071052701147072971	07/17/2025
Janet Renee Fowlkes Murrey, SP P.O. Box 417 Eddy, TX 76524	07/03/2025	9589071052701147072728	07/14/2025
John M. Fowlkes, SSP 111 West Texas Marfa, TX 79843	07/03/2025	9589071052701147072711	07/11/2025
Jubilee Royalty Holdings LLC P.O. Box 192 New York, NY 10024	07/03/2025	9589071052701147072698	Delivered-picked up at post office 07/15/2025
LJA Charitable Investments, LLC 1717 West Loop S, Ste. 1800 Houston, TX 77027	07/03/2025	9589071052701147072773	Delivered to front desk/ reception 07/08/2025



**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

PARTY	DATE MAILED	CERT. MAIL #	RETURN RECEIVED
Marathon Oil Permian, LLC 600 W. Illinois Avenue Midland, TX 79701	07/03/2025	9589071052701147072766	07/21/2025
Marbob Energy Corporation P.O. Box 227 Artesia, NM 88211	07/03/2025	9589071052701147072902	Delivered to Original Sender 07/24/2025
McMullen Minerals, LLC 3100 W. 7 <sup>th</sup> St., Ste. 240 Fort Worth, TX 76107	07/03/2025	9589071052701147072896	Delivered-Front Desk 07/10/2025
Mewbourne Oil Company 500 West Texas, Ste. 1020 Midland, TX 79701	07/03/2025	9589071052701147072759	07/21/2025
Oxy USA Inc. 5 Greenway Plaza, Suite 110 Houston, TX 77002	07/03/2025	9589072052701147072872	07/14/2025
Oxy Y-1 Company 5 Greenway Plaza, Suite 110 Houston, TX 77046	07/03/2025	9589071052701147072650	07/14/2025
	07/03/2025	9589071052701147072919	07/14/2025
Patrick K. Fowlkes, SSP Post Office Box 658 Marfa, TX 79843	07/03/2025	9589071052701147072704	07/14/2025
Pegasus Resources LLC P.O. Box 470698 Fort Worth, TX 76347	07/03/2025	9589071052701147072988	07/18/2025

**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

PARTY	DATE MAILED	CERT. MAIL #	RETURN RECEIVED
Pegasus Resources II, LLC P.O. Box 470698 Fort Worth, TX 76347	07/03/2025	9589071052701147072889	07/14/2025
Preston L. Fowlkes, SP P.O. Box 966 Marfa, TX 76702	07/03/2025	9589071052701147072834	07/14/2025
Ranchito AD4, LP 2100 Ross Ave., Ste. 1870 Dallas, TX 79901	07/03/2025	9589071052701147072827	07/21/2025
Regeneration Energy Corp. P.O. Box 210 Artesia, NM 88210	07/03/2025	9589071052701147073411	07/10/2025
Sharbro Oil Ltd. Co. P.O. Box 840 Artesia, NM 88211	07/03/2025	9589071052701147072810	07/10/2025
State of New Mexico c/o NM State Land Office 310 Old Santa Fe Trail Santa Fe, NM 87501	07/03/2025	9589071052701147072803	07/18/2025
TD Minerals LLC 8111 Westchester Dr. Dallas, TX 75225	07/03/2025	9589071052701147073404	07/14/2025
Tundra AD3, LP 2100 Ross Ave., Ste. 1870 Dallas, TX 79901	07/03/2025	9589071052701147072742	07/28/2025

**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

PARTY	DATE MAILED	CERT. MAIL #	RETURN RECEIVED
United States of America c/o Bureau of Land Management 2909 W. 2 <sup>nd</sup> St. Roswell, NM 88201-1287	07/03/2025	9589071052701147072797	07/10/2025
Chevron USA, Inc. 1400 Smith Street Houston, TX 77002	07/03/2025	9589071052701147072780	Delivered-individual picked up at postal facility 07/09/2025
Oxy USA Inc. 5 Greenway Plaza, Suite 110 Houston, TX 77002	07/03/25	9589071052701147072872	Delivered to Front Desk 07/08/2025

PARTY	DATE MAILED	CERT. MAIL #	RETURN RECEIVED
COG Operating LLC 600 W. Illinois Ave. Midland, TX 79701	07/03/2025	9589071052701147072599	Delivered – individual picked up at postal facility 07/09/2025
Concho Oil & Gas LLC 600 W. Illinois Ave. Midland, TX 79701	07/03/2025	9589071052701147072582	Delivered – individual picked up at postal facility
Contango Resources LLC 3230 Camp Bowie Blvd., Suite 810 Fort Worth, TX 79928	07/03/2025	9589071052701147072865	07/10/2025
Contango Resources LLC 111 E. 5 <sup>th</sup> Street, Ste. 300 Fort Worth, TX 79928	07/03/2025	9589071052701147072858	Moving Through Network as of 07/19/2025

**EXHIBIT C-2**

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

**APPLICATION OF MARATHON OIL  
PERMIAN LLC FOR COMPULSORY  
POOLING AND APPROVAL OF NON-  
STANDARD SPACING UNIT,  
EDDY COUNTY, NEW MEXICO,**

**Case No. 25478**

Contango Resources LLC 717 Texas Ave., Ste. 2900 Houston, TX 77002	07/03/2025	9589071052701147072841	Delivered – front desk 07/08/2025
United States of America c/o Bureau of Land Management 2909 W. 2 <sup>nd</sup> St. Roswell, NM 88201-1287	07/03/2025	9589071052701147072797	Delivered – left with individual 07/07/2025
Oxy Y-1 Company 5 Greenway Plaza Houston, TX 77046	07/18/2025	958907105270292044123700	07/28/2025

## EXHIBIT C-3


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>			
1. Article Addressed to:		A. Signature <b>X</b> <i>rick vaughn</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
336 Royalty Partners, LLC 16 SFM 1187 Aledo, TX 77027  CP/Rick Vaughn		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 9589 0710 5270 0415 9177 61		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 type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)			

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage \$	
Total Postage and Fees \$	
Sent To	1836 Royalty Partners, LLC
Street	116 SFM 1187
City, St.	Aledo, TX 77027
CP/Rick Vaughn	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

EXHIBIT C-3

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <input checked="" type="checkbox"/> <i>meek kowals</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>																
<p>1. Article Addressed to:</p> <p>36 Royalty Partners, LLC          6 SFM 1187          edo, TX 77027</p> <p>CP/Rick Vaughn</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p></p> <p>9590 9402 8561 3186 6056 32</p> <p>2. Article Number (Transfer from service label)          589 0710 5270 0415 9177 61</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

PS Form 3811 July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Jaiver Salas</i> C. Date of Delivery <i>7/8/25</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p>Burlington Resources Oil &amp; Gas Co. LP          600 W. Illinois Avenue          Midland, TX 79701</p> <p>CP/Rick Vaughn</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Burlington Resources Oil & Gas Co. LP 600 W. Illinois Avenue Midland, TX 79701	
Street and CP/Rick Vaughn	
City, State, _____	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



## EXHIBIT C-3

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

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

**OFFICIAL USE**

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

Sent To  
Chevron USA, Inc.  
1400 Smith Street  
Houston, TX 77002

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

CP/Rick Vaughn

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 Chevron USA, Inc.  
 1400 Smith Street  
 Houston, TX 77002

CP/Rick Vaughn

9590 9402 9022 4122 7769 83

2. Article Number (Transfer from *certified label*)  
 9589 0710 5270 1147 0727 80

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Agent  
☐ Addressee

B. Received by (Printed Name)  
 Anthony Allyn

C. Date of Delivery  
 7-9-25

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


3. Service Type  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

08 7220 7477 0725 0120 6856



## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  X  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Chevron USA, Inc.  1400 Smith Street  Houston, TX 77002</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  Anthony Alleyne</p>	<p>C. Date of Delivery  7-9-25</p>
<p>2. Article Number (Transfer from service label)  1589 0710 5270 1147 0727 80</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

PS Form 3811 July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

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<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>COG Operating LLC          600 W. Illinois Ave.          Midland, TX 79701</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  <i>Javier Salas</i></p> <p>C. Date of Delivery  <i>7/9/25</i></p>	
<p>2. Article Number (Transfer from service label)  <b>9589 0710 5270 1147-0725 99</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
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<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>SANTA FE MAIN STATION          Postmark Here          3 2025          SANTA FE, NM 87501-USPS</p>
<p>Sent To          COG Operating LLC          600 W. Illinois Ave.          Midland, TX 79701</p> <p>Street and A          City, State, Z</p> <p>CP/Rick Vaughn</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

66 5220 24TT 0225 0720 6856

# EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Concho Oil &amp; Gas LLC                      600 W. Illinois Ave.                      Midland, TX 79701</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  <i>Jaime Salas</i></p> <p>C. Date of Delivery  <i>7/8/25</i></p>	
<p>2. Article Number (Transfer from service label)                      9589 0710 5270 1147 0725 82</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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<p>OFFICIAL USE</p>	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>SANTA FE MAIN STATION                      3 2025                      Postmark Here</p>
<p>Sent To                      Street and A                      City, State, Z</p>	<p>Concho Oil &amp; Gas LLC                      600 W. Illinois Ave.                      Midland, TX 79701</p> <p>CP/Rick Vaughn</p>
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	

9589 0710 5270 1147 0725 82

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Conoco Phillips Company          600 W. Illinois Avenue          Midland, TX 79701</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  <i>Javier Salas</i></p>	<p>C. Date of Delivery  <i>7/8/25</i></p>
<p>2. Article Number (Transfer from service label)  <b>9589 0710 5270 1147 0725 75</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____</p> <p><input type="checkbox"/> Return Receipt (electronic) \$ _____</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p> <p><input type="checkbox"/> Adult Signature Required \$ _____</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p><b>SANTA FE MAIN STATION</b>  <b>7/8/25</b>          Postmark Here</p>
<p>Sent To          ConocoPhillips Company          600 W. Illinois Avenue          Midland, TX 79701</p> <p>Street and          City, State,</p>	<p>CP/Rick Vaughn</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so we can return the card to you.</p> <p>or on the inside of the envelope.</p> <p>1. Article Addressed to:</p> <p>Contango Agentco Operations, Inc. 3230 Camp Bowie Blvd Suite 810 Fort Worth, TX 79928</p> <p>CP/Rick Vaughn</p>		<p>A. Signature</p> <p>X <i>CP/Rick Vaughn</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
		B. Received by (Printed Name)	C. Date of Delivery
<p>2. Article Number (Transfer from service label)</p> <p>1589 0710 5270 1147 0728 65</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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Domestic Return Receipt



## EXHIBIT C-3

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**SANTA FE MAIN STATION**  
JUL 13 2020  
Postmark Here  
SANTA FE, NM 87501-3053

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

Sent To  
Contango Agentco Onshore, Inc.  
3230 Camp Bowie Blvd., Suite 810  
Fort Worth, TX 79928  
CP/Rick Vaughn

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1147 0728 65

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ Print your name and address on the reverse so we can return the card to you.  
 ■ Print on the back of the card.

1. Article Addressed to:  
 Contango Agentco Onshore, Inc.  
 3230 Camp Bowie Blvd., Suite 810  
 Fort Worth, TX 79928  
 CP/Rick Vaughn

2. Article Number (Transfer from service label)  
 9590 9402 9022 4122 7770 03  
 9589 0710 5270 1147 0728 65  
 PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Agent  
☐ Addressee

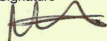
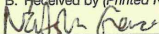
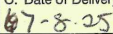

B. Received by (Printed Name)  
 C. Date of Delivery

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail (over \$500)  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <input checked="" type="checkbox"/> Signature  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  </p> <p>C. Date of Delivery  </p>
<p>1. Article Addressed to:</p> <p>United States of America  c/o Bureau of Land Management  2909 W. 2<sup>nd</sup> St.  Roswell, NM 88201-1287 CP/Rick Vaughn</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
 9590 9402 9022 4122 7769 76	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>589 0710 5270 1147 0727 97</p>	<p>Domestic Return Receipt</p>

PS Form 3811, July 2020 PSN 7530-02-000-9053

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>CV</i>  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>EOG Resources Inc.            5509 Champions Drive            Midland, TX 79706</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name) <i>CV</i> C. Date of Delivery <i>7/31</i></p>	
<p>2. Article Number (Transfer from service label)            9589 0710 5270 1147 0727 35</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	
<p>Sent To EOG Resources Inc.            5509 Champions Drive            Midland, TX 79706</p> <p>Street and Apt. No.,            City, State, ZIP+4®</p>	
<p>Postmark Here            JUL 31 2025            SANTA FE MAIN STATION            SANTA FE, NM 87501-USPS</p>	
<p>CP/Rick Vaughn</p>	
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	



## EXHIBIT C-3

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<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Carly Tupper</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Fortis Minerals II, LLC            3230 Camp Bowie Blvd., Suite 810            Fort Worth, TX 79928            CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7770 41</p>		<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)            9589 0710 5270 1147 0729 26</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	
<p>Sent To Fortis Minerals II, LLC            3230 Camp Bowie Blvd., Suite 810            Fort Worth, TX 79928            CP/Rick Vaughn</p> <p>Street and Apt. No., or PO City, State, ZIP+4®</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		<p>A. Signature</p> <p><input checked="" type="checkbox"/> <i>Renee Murrey</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
1. Article Addressed to:		B. Received by (Printed Name)	C. Date of Delivery
Janet Renee Fowlkes Murrey, SP P.O. Box 417 Eddy, TX 76524  CP/Rick Vaughn		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)		3. Service Type	
589 0710 5270 1147 0727 CB		<input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Janet Renee Fowlkes Murrey, SP P.O. Box 417 Eddy, TX 76524</p> <p>CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7768 53</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0727 28</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>A. Signature <input checked="" type="checkbox"/> X <i>Janet Renee Fowlkes Murrey</i></p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>3. Service Type  <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)  <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only</p> <p>For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>®.</p> <p>OFFICIAL USE</p> <p>Postage \$ Certified Mail Fee \$ Extra Services &amp; Fees (check box, add fee as appropriate)  <input type="checkbox"/> Return Receipt (hardcopy) \$  <input type="checkbox"/> Return Receipt (electronic) \$  <input type="checkbox"/> Certified Mail Restricted Delivery \$  <input type="checkbox"/> Adult Signature Required \$  <input type="checkbox"/> Adult Signature Restricted Delivery \$            Postage \$            Total Postage and Fees \$</p> <p>Sent To Janet Renee Fowlkes Murrey, SP P.O. Box 417 Eddy, TX 76524 City, State, ZIP+4® CP/Rick Vaughn</p> <p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>		<p>92 2270 2477 0725 0720 6856</p> <p>SANTA FE MAIN STATION JUL 2025 Postmark Here SANTA FE, NM 87501-0535</p>	

## EXHIBIT C-3

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

Sent To  
 John M. Fowlkes, SSP  
 Street and Apt. No., or P.O. Box 1470  
 City, State, Zip+4 Murfa, TX 79843  
 CP/Rick Vaughn

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

TT 2220 2477 0225 0720 6856

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 John M. Fowlkes, SSP  
 111 West Texas (79843)  
 P.O. Box 1470  
 Murfa, TX 79843  
 9590 9402 9022 4122 7768 60

2. Article Number (Transfer from service label)  
 9589 0710 5270 1147 0727 11

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent  
☒ Addressee

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

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



3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt



## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature</p> <p><b>X</b> </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>																	
<p>1. Article Addressed to:</p> <p>John M. Fowlkes, SSP 111 West Texas (79843) P.O. Box 1470 Marfa, TX 79843</p>  <p>9590 9402 9022 4122 7768 60</p>	<p>B. Received by (Printed Name)</p> <p>JOHN FOWLKES</p>	<p>C. Date of Delivery</p>																
<p>2. Article Number (Transfer from service label)</p> <p>589 0710 5270 1147 0727 11</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																	
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																	
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																	
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																	
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																	
<input type="checkbox"/> Collect on Delivery Restricted Delivery																		
<input type="checkbox"/> Insured Mail																		
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																		

PS Form 3811, July 2020 PSN 7530-02-000-9053

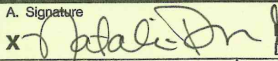
Domestic Return Receipt

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Marathon Oil Permian, LLC 600 W. Illinois Avenue Midland, TX 79701</p> <p>CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7769 07</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0727 66</p>		<p>A. Signature</p> <p><b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Javier Salas</i> C. Date of Delivery <i>7/8/25</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee \$	 <p>Postmark Here</p>
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To	
Street and Apt. No., or PO Box No. Marathon Oil Permian, LLC 600 W. Illinois Avenue	
City, State, ZIP+4® Midland, TX 79701	
CP/Rick Vaughn	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>Article Addressed to:</p> <p>Mary Lee Harang Picou Rev. Trust Dated 4/2000, Successor Co-Trustees Rebecca Picou and Mary Picou 605 Sarah Court Virginia Beach, VA 23464 CP/Rick Vaughn</p>		<p>A. Signature   <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)            Natalia Picou</p> <p>C. Date of Delivery            7/11/25</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>9590 9402 9022 4122 7773 17</p> <p>Article Number (Transfer from service label)            89 0710 5270 1147 0729 71</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>SANTA FE MAIN STATION JUL 3 2025 Postmark Here</p>
<p>Sent To</p> <p>Street and Apt. No., or PO Box Mary Lee Harang Picou Rev. Trust Dated 4/14/2000,            Successor Co-Trustees Rebecca Picou and Mary Picou            605 Sarah Court            City, State, ZIP+4® Virginia Beach, VA 23464 CP/Rick Vaughn</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

# EXHIBIT C-3


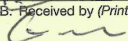

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Mewbourne Oil Company                      500 West Texas, Ste. 1020                      Midland, TX 79701</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)                      C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)                      9589 0710 5270 1147 0727 59</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes                      If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>Postmark Here</p> <p>SANTA FE, NM 87501-USPS</p>
<p>Sent To Mewbourne Oil Company</p> <p>Street and Apt. No., or PO Box 500 West Texas, Ste. 1020</p> <p>City, State, ZIP+4® Midland, TX 79701</p> <p>CP/Rick Vaughn</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	<p>A. Signature </p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery <b>7/8/25</b></p>																
<p>1. Article Addressed to:</p> <div data-bbox="272 429 820 637"><p>Oxy USA Inc. 5 Greenway Plaza, Suite 110 Houston, TX 77002</p><p>CP/Rick Vaughn</p></div>  <p>9590 9402 9022 4122 7769 90</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td></td></tr><tr><td><input type="checkbox"/> Insured Mail</td><td></td></tr><tr><td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td><td></td></tr></table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p> <p><b>1589 0710 5270 1147 0728 72</b></p>																	

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

## EXHIBIT C-3

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

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

**OFFICIAL USE**

**Postmark**  
JUL 31 2025  
SANTA FE MAIN STATION  
SANTA FE, NM 87501-0595

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

**Sent To**  
Oxy USA Inc.  
5 Greenway Plaza, Suite 110  
Houston, TX 77002  
City, State  
CP/Rick Vaughn

**PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions**

22 9220 1147 0225 0720 6856

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 Oxy USA Inc.  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77002  
 CP/Rick Vaughn

2. Article Number (Transfer from service label)  
 9590 9402 9022 4122 7769 90  
 9589 0710 5270 1147 0728 72  
 PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Agent  
☐ Addressee

B. Received by (Printed Name)  
 7/8/25

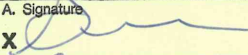
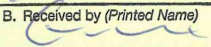
C. Date of Delivery  
☐ Yes  
☐ No

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail (over \$500)  
☐ Insured Mail Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

**Domestic Return Receipt**

## EXHIBIT C-3

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<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><b>X</b> </p>	
<p>1. Article Addressed to:</p> <p>OXY Y-1 COMPANY 5 GREENWAY PLAZA HOUSTON, TX 77046</p> <p>CP/RICK VAUGHN 25478</p>		<p>B. Received by (Printed Name) </p> <p>C. Date of Delivery <u>7/23/25</u></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 2920 4127 00</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ™.	
OFFICIAL USE	
Certified Mail Fee \$ <u>5.30</u>	
Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy) \$ <u>4.90</u>	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ <u>74</u>	
Total Postage and Fees \$ <u>10.49</u>	
Sent To	
Street and City, State ZIP+4®	
OXY Y-1 COMPANY 5 GREENWAY PLAZA HOUSTON, TX 77046	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Oxy Y-1 Company            5 Greenway Plaza            Houston, TX 77046            CP/T <del>Book</del> Vaughn</p>		<p>B. Received by (Printed Name)  <i>[Signature]</i></p>	<p>C. Date of Delivery            7/8/25</p>
<p>2. Article Number (Transfer from service label)</p> <p>589 0710 5270 1147 0729 19</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

PS Form 3811 July 2020 PSN 7530-02-000-9053

Domestic Return Receipt



## EXHIBIT C-3

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

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

**OFFICIAL USE**

**SANTA FE MAIN STATION**  
JUL 2025  
Postmark  
Hwy 2025  
SANTA FE, NM 87501-0000

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Postage and Fees \$  
 Sent To  
 Oxy Y-1 Company  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77046  
 Street and  
 City, State  
 CP/Rick Vaughn  
 PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

05 9220 2477 0225 0120 6856

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee  
 B. Received by (Printed Name) C. Date of Delivery 7/2/25  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

1. Article Addressed to:  
 Oxy Y-1 Company  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77046  
 CP/Rick Vaughn


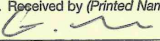

2. Article Number (Transfer from service label)  
 9589 0710 5270 1147 0726 50  
 PS Form 3811, July 2020 PSN 7530-02-000-9053

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

4. Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

## EXHIBIT C-3

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<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		A. Signature <b>X</b> 	
1. Article Addressed to:  Oxy Y-1 Company 5 Greenway Plaza, Suite 110 Houston, TX 77046  CP/Rick Vaughn		<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
		B. Received by (Printed Name) 	C. Date of Delivery <b>7/8/25</b>
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) <b>589 0710 5270 1147 0726 50</b>		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
 9590 9402 9022 4122 7768 15		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

## EXHIBIT C-3

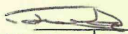

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Oxy Y-1 Company 5 Greenway Plaza Houston, TX 77046</p> <p>CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7770 58</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>7/8/25</u> C. Date of Delivery <u>7/8/25</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0729 19</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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OFFICIAL RECEIPT	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>Sent To</p> <p>Oxy Y-1 Company</p> <p>5 Greenway Plaza</p> <p>Houston, TX 77046</p> <p>CP/Rick Vaughn</p>
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	

67 6220 2477 0225 0720 6856

## EXHIBIT C-3

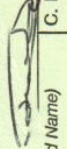
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION FOR THE ADDRESSEE	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p style="text-align: center;"></p> <p>(Printed Name) <span style="float: right;">C. Date of Delivery</span></p>	
<p>1. Article Addressed to:</p> <p style="text-align: center;">Patrick K. Fowlkes, SSP Post Office Box 658 Marfa, TX 79843</p> <p style="text-align: right;">CP/Rick Vaughn</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p style="text-align: center;"></p> <p style="text-align: center;">9590 9402 9022 4122 7768 77</p>		<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) </div> <div> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </div> </div>	
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">589 0710 5270 1147 0727 04</p>			

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt




## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p><b>1. Article Addressed to:</b></p> <p>Patrick K. Fowlkes, SSP Post Office Box 658 Marfa, TX 79843</p> <p>CP/Rick Vaughn</p>	
<p><b>2. Article Number (Transfer from service label)</b></p> <p>9590 9402 9022 4122 7768 77</p>		<p><b>3. Service Type</b></p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p><b>A. Signature</b></p> <p></p>		<p><b>B. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p><b>C. Date of Delivery</b></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>		<p><b>Extra Services &amp; Fees (check box, add fee as appropriate)</b></p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p><b>Total Postage and Fees</b> \$</p>	
<p><b>PS Form 3811, July 2020 PSN 7530-02-000-9053</b></p>		<p><b>PS Form 3800, January 2023 PSN 7530-02-000-9047</b> See Reverse for Instructions</p>	

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<p><b>Certified Mail Fee</b></p> <p>\$</p>	<p><b>Postmark Here</b></p> <p>JUL 31 2025</p> <p>NEW YORK, NY 10101-1001</p>
<p><b>Sent To</b> Patrick K. Fowlkes, SSP Post Office Box 658 Marfa, TX 79843</p> <p><b>City, State, ZIP+4®</b> CP/Rick Vaughn</p>	

40 2220 2477 0225 0720 6856

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature</p> <p><input checked="" type="checkbox"/> <i>R. Miller</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
<p>Pegasus Resources II, LLC P.O. Box 470698 Fort Worth, TX 76147 CP/Rick Vaughn</p>	<p><i>Reanna Miller</i> <i>7-9-25</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p> 9590 9402 9022 4122 7770 89</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
2. Article Number (Transfer from service label)	Domestic Return Receipt	
589 0710 5270 1147 0728 89		
PS Form 3811, July 2020 PSN 7530-02-000-9053		

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Pegasus Resources II, LLC P.O. Box 470698 Fort Worth, TX 76147</p> <p>CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7770 89</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0728 89</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Keanna Miller</u> C. Date of Delivery <u>7-9-25</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p> <p>Sent To</p> <p>Street and Apt. No., or PO Box No. Pegasus Resources II, LLC P.O. Box 470698 Fort Worth, TX 76147</p> <p>City, State, ZIP+4® CP/Rick Vaughn</p> <p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	<p>Postmark Here JUL 9 2025 SANTA FE MAIN STATION 54501-1075</p>


## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <u>R Miller</u> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Pegasus Resources, LLC  P.O. Box 470698  Fort Worth, TX 76147  CP/Rick Vaughn</p>		<p>B. Received by (Printed Name) <u>Reanna Miller</u> C. Date of Delivery <u>7-9-25</u></p>	
<p>2. Article Number (Transfer from service label)  9589 0710 5270 1147 0729 88</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p> <p>SANTA FE MAIN STATION  JUL 9 2025  87501-0955</p>
<p>Postage \$</p> <p>Total Postage and Fees \$</p>	
<p>Sent To</p> <p>Street and Apt. No., or PO Box # Pegasus Resources, LLC  P.O. Box 470698  Fort Worth, TX 76147  CP/Rick Vaughn</p>	
<p>City, State, ZIP+4®</p>	
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	



## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	<p>A. Signature <input checked="" type="checkbox"/> <i>Brandy Cunningham</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Brandy Cunningham</i> C. Date of Delivery <i>7/9/25</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>1. Article Addressed to:</p> <p>Preston L. Fowlkes, SP P.O. Box 966 Marfa, TX 76702</p> <p>CP/Rick Vaughn</p>																	
 9590 9402 9022 4122 7769 38	<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td></td></tr><tr><td><input type="checkbox"/> Insured Mail</td><td></td></tr><tr><td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td><td></td></tr></table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Collect on Delivery Restricted Delivery																	
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
<p>2. Article Number (Transfer from service label)</p> <p>1589 0710 5270 1147 0728 34</p>																	
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt																

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Preston L. Fowlkes, SP P.O. Box 966 Marfa, TX 76702</p> <p>CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7769 38</p> <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0728 34</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Brandy Cunningham</u> C. Date of Delivery <u>7/9/25</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Insured Mail (over \$500) <input type="checkbox"/> Restricted Delivery</p>	
<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only</p> <p>For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a>®.</p> <p>OFFICIAL RECEIPT</p> <p>Postmark Here <u>7/9/25</u></p> <p>Santa Fe, NM 87501-5895</p> <p>CP/Rick Vaughn</p> <p>PS Form 3800, January 2023 PSN 7530-02-000-8047 See Reverse for Instructions</p>		<p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p> <p>Sent To Preston L. Fowlkes, SP P.O. Box 966 Marfa, TX 76702</p> <p>CP/Rick Vaughn</p>	

HE 8220 2477 0225 0720 6856


# EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  C. Date of Delivery <u>7-7-25</u></p>	
<p>1. Article Addressed to:</p> <p>Ranchito AD4, LP 2100 Ross Ave., Ste. 1870 Dallas, TX 79901</p> <p>CP/Rick Vaughn</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0728 27</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053		Domestic Return Receipt	

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	
<p>Sent To Ranchito AD4, LP 2100 Ross Ave., Ste. 1870 Dallas, TX 79901</p> <p>Street and City, State, CP/Rick Vaughn</p>	
PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions	



## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Regeneration Energy Corp. P.O. Box 210 Artesia, NM 85211</p> <p>CP/Rick Vaughn</p>  <p>9590 9402 9022 4122 7771 19</p> <p>2. Article Number (Transfer from service label)</p> <p>1589 0710 5270 1147 0734 11</p>		<p>A. Signature</p> <p>X <i>Carl T. York</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt



## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Regeneration Energy Corp. P.O. Box 210 Artesia, NM 88211</p> <p>CP/Rick Vaughn</p> <p>9590 9402 9022 4122 7771 19</p> <p>2. Article Number (Transfer from container label)</p> <p>9589 0710 5270 1147 0734 11</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent</p> <p><input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	

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<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p> <p>Sent To</p> <p>Regeneration Energy Corp. P.O. Box 210 Artesia, NM 88211</p> <p>CP/Rick Vaughn</p> <p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	<p>SANTA FE MAIN STATION</p> <p>Postmark Here</p> <p>JUL 3 2025</p> <p>SANTA FE, NM 87501-0555</p>

TT 4E20 24TT 0225 0720 6856

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>W. B. Ssa M.</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Sharbro Oil Ltd. Co.  P.O. Box 840  Artesia, NM 88211</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  <i>W. B. Ssa M.</i></p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 9022 4122 7769 52</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

## EXHIBIT C-3


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Sharbro Oil Ltd. Co. P.O. Box 840 Artesia, NM 88211</p> <p>CP/Rick Vaughn</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Alyssa M.</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0728 10</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail (over \$500) <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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OFFICIAL USE	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> <p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>Sent To Sharbro Oil Ltd. Co. P.O. Box 840 Artesia, NM 88211</p> <p>Street and CP/Rick Vaughn</p> <p>City, State, PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>

07 9270 1147 0728 0720 6856

# EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  </p>	
<p>1. Article Addressed to:</p> <p>State of New Mexico  c/o NM State Land Office  310 Old Santa Fe Trail  Santa Fe, NM 87501 CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  <u>Marcus Bavele</u></p> <p>C. Date of Delivery  <u>7/14/25</u></p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0728 03</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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<p>OFFICIAL USE</p>	
<p>Certified Mail Fee \$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p> <p></p>
<p>Postage \$</p> <p>Total Postage and Fees \$</p>	<p>Sent To</p> <p>State of New Mexico  c/o NM State Land Office  310 Old Santa Fe Trail  Santa Fe, NM 87501 CP/Rick Vaughn</p>
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	



## EXHIBIT C-3

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**Postmark**  
JUL 31 2025  
SANTA FE MAIN STATION

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

Sent To  
TD Minerals LLC  
8111 Westchester Drive, Ste. 900  
Dallas, TX 75225  
CP/Rick Vaughn

Street and Apt. No., or P.O. Box  
City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

40 4E20 2477 0225 0720 6856

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 TD Minerals LLC  
 8111 Westchester Drive, Ste. 900  
 Dallas, TX 75225  
 CP/Rick Vaughn

2. Article Number (Transfer from service label)  
 9590 9402 9022 4122 7771 26  
 9589 0710 5270 1147 0734 04

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Adult Signature  
☐ Agent Signature

B. Received By (Printed Name)  
 CP/Rick Vaughn  
 C. Date  
 7/7/25


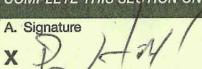

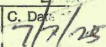
D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

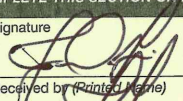


## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>TD Minerals LLC 8110 Westchester Drive, Ste. 900 Dallas, TX 75225</p> <p>CP/Rick Vaughn</p> <p></p> <p>9590 9402 9022 4122 7771 26</p> <p>2. Article Number (Transfer from service label)</p> <p>1589 0710 5270 1147 0734 04</p>		<p>A. Signature</p> <p>X  <input type="checkbox"/> Agent</p> <p>B. Received by (Printed Name)  C. Date </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

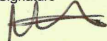

## EXHIBIT C-3

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<p>1. Article Addressed to:</p> <p>Tundra AD3, LP 2100 Ross Ave., Ste. 1870 Dallas, TX 79901</p> <p>CP/Rick Vaughn</p>		<p>B. Received by (Printed Name)  C. Date of Delivery 7-7-05</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 1147 0727 42</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

2h 220 44T 0225 0120 6856

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<p>Certified Mail Fee</p> <p>\$</p> <p>Extra Services &amp; Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p>	<p>Postmark Here</p> <p>JUL 7 2005</p> <p>PM 87501-USPS</p>
<p>Postage</p> <p>\$</p> <p>Total Postage and Fees</p> <p>\$</p>	
<p>Sent To</p> <p>Tundra AD3, LP</p> <p>2100 Ross Ave., Ste. 1870</p> <p>Dallas, TX 79901</p> <p>CP/Rick Vaughn</p>	
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions.</p>	

## EXHIBIT C-3

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
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1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
<p>United States of America c/o Bureau of Land Management 2909 W. 2<sup>nd</sup> St. Roswell, NM 88201-1287 CP/Rick Vaughn</p>	<p><i>Nathan Kane</i></p>	<p><i>6-8-25</i></p>
<p> 9590 9402 9022 4122 7769 76</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
2. Article Number (Transfer from service label)	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>589 0710 5270 1147 0727 97</p>	<p>PS Form 3811 July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>	



## EXHIBIT C-3

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

Sent To  
 United States of America  
 c/o Bureau of Land Management  
 2909 W. 2nd St.  
 Roswell, NM 88201-1287 CP/Rick Vaughn  
 City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

26 2220 2477 0225 0720 6856

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 United States of America  
 c/o Bureau of Land Management  
 2909 W. 2nd St.  
 Roswell, NM 88201-1287 CP/Rick Vaughn

2. Article Number (Transfer from service label)  
 9589 0710 5270 1147 0727 97

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ Agent  
☐ Addressee

B. Received by (Printed Name)  
 Nathan Per

C. Date of Delivery  
 6-7-8-25

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

3. Service Type  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Insured Mail Restricted Delivery (over \$500)

Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

## EXHIBIT C-3

### [Tracking FAQs](#)

-

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[Track Packages](#)  
[Anytime, Anywhere](#)

-

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[Remove](#)

Tracking Number:

9589071052701147072612

[Copy Add to Informed Delivery](#)

Latest Update

Your item was delivered to an individual at the address at 9:53 am on July 16, 2025 in EL PASO, TX 79928.

---

### **Get More Out of USPS Tracking:**

[USPS Tracking Plus®](#)

Delivered

Delivered, Left with Individual

EL PASO, TX 79928

July 16, 2025, 9:53 am

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[What Do USPS Tracking Statuses Mean?](#)

[Text & Email Updates](#)

[USPS Tracking Plus®](#)

[Product Information](#)

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## EXHIBIT C-3

### USPS Tracking®

#### [Tracking FAQs](#)

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#### [Track Packages](#)

#### [Anytime, Anywhere](#)

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#### [Learn More](#)

#### [Remove](#)

Tracking Number:

9589071052701147072605

#### [Copy Add to Informed Delivery](#)

Latest Update

This is a reminder to arrange for redelivery of your item or your item will be returned to sender.

---

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#### [USPS Tracking Plus®](#)

Delivery Attempt

Reminder to Schedule Redelivery of your item

July 10, 2025

Notice Left (No Authorized Recipient Available)

EL PASO, TX 79928

July 5, 2025, 2:38 pm

#### [See All Tracking History](#)

#### [What Do USPS Tracking Statuses Mean?](#)

#### [Text & Email Updates](#)

## **EXHIBIT C-3**

USPS Tracking Plus®

Product Information

## EXHIBIT C-3

### USPS Tracking®

#### [Tracking FAQs](#)

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#### [Learn More](#)

#### [Remove](#)

Tracking Number:

9589071052701147072681

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Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

---

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Moving Through Network

In Transit to Next Facility

July 28, 2025

Unclaimed/Being Returned to Sender

SANTA FE, NM 87501

July 19, 2025, 4:37 pm

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

[Text & Email Updates](#)

[USPS Tracking Plus®](#)

[Product Information](#)

## EXHIBIT C-3

### USPS Tracking®

#### [Tracking FAQs](#)

-

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#### [Track Packages](#)

[Anytime, Anywhere](#)

-

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[Learn More](#)

#### [Remove](#)

Tracking Number:

9589071052701147072674

[Copy Add to Informed Delivery](#)

Latest Update

Your item was delivered to the front desk, reception area, or mail room at 3:12 pm on July 8, 2025 in HOUSTON, TX 77002.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Front Desk/Reception/Mail Room

HOUSTON, TX 77002

July 8, 2025, 3:12 pm

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

[Text & Email Updates](#)

[USPS Tracking Plus®](#)

[Product Information](#)

## EXHIBIT C-3

### USPS Tracking®

#### [Tracking FAQs](#)

---

#### [Track Packages](#)

#### [Anytime, Anywhere](#)

[Get the free Informed Delivery® feature to receive automated notifications on your packages](#)

#### [Learn More](#)

#### [Remove](#)

Tracking Number:

9589071052701147072698

[Copy Add to Informed Delivery](#)

Latest Update

Your item was picked up at the post office at 11:02 am on July 15, 2025 in NEW YORK, NY 10024.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Individual Picked Up at Post Office

NEW YORK, NY 10024

July 15, 2025, 11:02 am

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

[Text & Email Updates](#)

[USPS Tracking Plus®](#)

[Product Information](#)



## EXHIBIT C-3

### USPS Tracking®

#### [Tracking FAQs](#)

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Tracking Number:

9589071052701147072773

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Latest Update

Your item was delivered to the front desk, reception area, or mail room at 12:23 pm on July 8, 2025 in HOUSTON, TX 77027.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Front Desk/Reception/Mail Room

HOUSTON, TX 77027

July 8, 2025, 12:23 pm

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## EXHIBIT C-3

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Tracking Number:

9589071052701147072902

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Latest Update

Your item has been delivered to the original sender at 11:04 am on July 24, 2025 in SANTA FE, NM 87501.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, To Original Sender

SANTA FE, NM 87501

July 24, 2025, 11:04 am

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## EXHIBIT C-3

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Tracking Number:

9589071052701147072896

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Latest Update

Your item was delivered to the front desk, reception area, or mail room at 11:59 am on July 10, 2025 in FORT WORTH, TX 76107.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Front Desk/Reception/Mail Room

FORT WORTH, TX 76107

July 10, 2025, 11:59 am

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## EXHIBIT C-3

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Tracking Number:

9589071052701147072780

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Latest Update

Your item was picked up at a postal facility at 12:44 pm on July 9, 2025 in HOUSTON, TX 77002.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Individual Picked Up at Postal Facility

HOUSTON, TX 77002

July 9, 2025, 12:44 pm

[See All Tracking History](#)

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## EXHIBIT C-3

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Tracking Number:

9589071052701147072872

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Latest Update

Your item has been delivered to an agent at the front desk, reception, or mail room at 11:17 am on July 8, 2025 in HOUSTON, TX 77046.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered to Agent

Delivered to Agent, Front Desk/Reception/Mail Room

HOUSTON, TX 77046

July 8, 2025, 11:17 am

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

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[Product Information](#)

## EXHIBIT C-3

### USPS Tracking®

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Tracking Number:

9589071052701147072599

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Latest Update

Your item was picked up at a postal facility at 7:53 am on July 9, 2025 in MIDLAND, TX 79701.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Individual Picked Up at Postal Facility

MIDLAND, TX 79701

July 9, 2025, 7:53 am

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

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[Product Information](#)

## EXHIBIT C-3

### USPS Tracking®

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[Track Packages](#)

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Tracking Number:

9589071052701147072858

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Latest Update

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

---

### Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Moving Through Network

In Transit to Next Facility

July 28, 2025

Unclaimed/Being Returned to Sender

SANTA FE, NM 87501

July 19, 2025, 4:38 pm

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

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USPS Tracking®

[Tracking FAQs](#)

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[Track Packages](#)

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## EXHIBIT C-3

[Remove](#)

Tracking Number:

9589071052701147072582

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Latest Update

Your item was picked up at a postal facility at 7:43 am on July 8, 2025 in MIDLAND, TX 79701.

---

### Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Delivered

Delivered, Individual Picked Up at Postal Facility

MIDLAND, TX 79701

July 8, 2025, 7:43 am

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

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[Product Information](#)

## EXHIBIT C-3

### USPS Tracking®

#### [Tracking FAQs](#)

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#### [Track Packages](#)

#### [Anytime, Anywhere](#)

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Tracking Number:

9589071052701147072841

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Latest Update

Your item was delivered to the front desk, reception area, or mail room at 3:12 pm on July 8, 2025 in HOUSTON, TX 77002.

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### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Front Desk/Reception/Mail Room

HOUSTON, TX 77002

July 8, 2025, 3:12 pm

[See All Tracking History](#)

[What Do USPS Tracking Statuses Mean?](#)

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[USPS Tracking Plus®](#)

[Product Information](#)

## EXHIBIT C-3

### USPS Tracking®

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Tracking Number:

9589071052701147072797

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Latest Update

Your item was delivered to an individual at the address at 9:28 am on July 7, 2025 in ROSWELL, NM 88203.

---

### Get More Out of USPS Tracking:

#### [USPS Tracking Plus®](#)

Delivered

Delivered, Left with Individual

ROSWELL, NM 88203

July 7, 2025, 9:28 am

[See All Tracking History](#)

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## EXHIBIT C-4

## AFFIDAVIT OF PUBLICATION

CARLSBAD CURRENT-ARGUS  
PO BOX 507  
HUTCHINSON, KS 67504-0507

STATE OF NEW MEXICO } SS  
COUNTY OF EDDY }

Account Number: 143  
Ad Number: 54690  
Description: 25478 CP - Rick Vaughn BS  
Ad Cost: \$117.28

Sherry Groves, being first duly sworn, says:

That she is the Agent of the the Carlsbad Current-Argus, a Weekly newspaper of general circulation, printed and published in Carlsbad, Eddy County, New Mexico; that the publication, a copy of which is attached hereto, was published in said newspaper on the following dates:

July 22, 2025

That said newspaper was regularly issued and circulated on those dates.

SIGNED:

*Sherry Groves*

Agent

Subscribed to and sworn to me this 22<sup>th</sup> day of July 2025.

*Leanne Kaufenberg*  
Leanne Kaufenberg, Notary Public, Redwood County  
Minnesota

**CASE 25478: Application of Marathon Oil Permian, LLC, for Compulsory Pooling and Approval of Non-Standard Spacing Unit, Eddy County, New Mexico.** This is to notify all interested parties, including 1836 Royalty Partners, LLC; Burlington Resources Oil & Gas Company LP; Christine Speidel Fowlkes; Christopher Clegg Fowlkes; Delaware Ranch, Inc.; Devon Energy Production Company; Fortis Minerals II, LLC; Edwin Fowlkes Heirs Family Limited Partnership; Edwin Hockaday Fowlkes, III a/k/a Trey Fowlkes; Janet Renee Fowlkes Murrey; John M. Fowlkes; Jubilee Royalty Holdings LLC; LJA Charitable Investments, LLC; Patrick K. Fowlkes; Preston L. Fowlkes; Ranchito AD4, LP; State of New Mexico; Tundra AD3, LP; United States of America; Contango Resources, LLC; COG Operating LLC; Concho Oil & Gas LLC; ConocoPhillips Company; EOG Resources Inc.; Mary Lee Huang Picou Rev. Trust dated 04/14/2000; Marathon Oil Permian LLC; Marbob Energy; Oxy USA Inc.; Oxy Y-1 Company; Sharbro Oil Ltd. Co.; Mewbourne Oil Company; Chevron USA Inc., and their successors that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Marathon Oil Permian, LLC (Case No. 25478). The hearing will be conducted on August 7, 2025, beginning at 9:00 a.m., in a hybrid fashion, both in-person at the Energy, Minerals, Natural Resources Department, Wendell Chino Building, Pecos Hall, 1220 South St. Francis Drive, 1st Floor, Santa Fe, NM 87505 and via the WebEx virtual meeting platform. To participate virtually, see the instructions posted on the OCD Hearings website: <https://www.emnrd.nm.gov/ocd/hearing-info/>.

Applicant in the above-styled cause seeks an order pooling a 638.40-acre, more or less, non-standard horizontal spacing unit in the Bone Spring Formation comprised of W/2 Sections 6 and 7, Township 26 South, Range 29 East, NMPM, Eddy County, New Mexico, initially dedicated to the proposed Rick Vaughn Fed Com 501H and Rick Vaughn Fed Com 503H wells to be horizontally drilled as follows:

Well 501H will be drilled from a surface hole location in the SE/4SW/4 (Unit N) of Section 7 to a bottom hole location in the NW/4NW/4 (Unit D/Lot 1) of Section 6, and produce from a first take point in SW/4SW/4 (Unit M/Lot 4) Section 7 to a last take point NW/4NW/4 (Unit D/Lot 1) Section 6; and

Well 503H will be drilled from a surface hole location in the SE/4SW/4 (Unit N) of Section 7 to a bottom hole location in the NE/4NW/4 (Unit C) of Section 6, and produce from a first take point in SE/4SW/4 (Unit N) Section 7 to a last take point in NE/4NW/4 (Unit C) Section 6.

Published in the Carlsbad Current-Argus July 22, 2025.  
#54690

TAMARA CHAVEZ/CARA DOUGLAS  
HINKLE SHANOR LLP  
PO BOX 10  
ROSWELL, NM 88202  
tchavez@hinklelawfirm.com

