

DATE IN 5/8/09	SUSPENSE	ENGINEER W. Jones	LOGGED IN 5/8/09	TYPE DHC	APP NO DKA0912848129
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ABOVE THIS LINE FOR DIVISION USE ONLY

RECEIVED

NEW MEXICO OIL CONSERVATION DIVISION
- Engineering Bureau -

2009 MAY 8 AM 11:49 1220 South St. Francis Drive, Santa Fe, NM 87505



30-015-20199
Burton Flat Deep
Unit #3
Devon 6137

ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

[NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]
[DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]
[PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]
[WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]
[SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]
[EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
- [A] Location - Spacing Unit - Simultaneous Dedication
☐ NSL ☐ NSP ☐ SD
- Check One Only for [B] or [C]
- [B] Commingling - Storage - Measurement
☒ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR
- [D] Other: Specify _____
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or ☐ Does Not Apply
- [A] ☒ Working, Royalty or Overriding Royalty Interest Owners
- [B] ☐ Offset Operators, Leaseholders or Surface Owner
- [C] ☐ Application is One Which Requires Published Legal Notice
- [D] ☐ Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] ☒ For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] ☐ Waivers are Attached
- [3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Stephanie A. Ysasaga
Print or Type Name

Signature

Sr. Staff Engineering Technician
Title

05/05/2009
Date

Stephanie.Ysasaga@dm.com
e-mail Address

District I
1625 N. French Drive, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107A
Revised June 10, 2003

District II
1301 W. Grand Avenue, Artesia, NM 88210

Oil Conservation Division
1220 South St. Francis Dr.

APPLICATION TYPE
X Single

District III
Well
1000 Rio Brazos Road, Aztec, NM 87410

Santa Fe, New Mexico 87505

Establish Pre-Approved Pools
EXISTING WELLBORE
X Yes No

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

APPLICATION FOR DOWNHOLE COMMINGLING

DEVON ENERGY PRODUCTION CO., LP 20 NORTH BROADWAY OKC, OK 73102-8260
Operator Address

Release May 29, 2009

DHC-4191 Eddy

Burton Flat Deep Unit 3 Sec 3-T21S- R27E
Lease Well No. Unit Letter-Section-Township-Range County

OGRID No. 6137 Property Code API No. 30-015-20799 Lease Type: X Federal State Fee

DATA ELEMENT	UPPER ZONE	INTERMEDIATE ZONE	LOWER ZONE
Pool Name	Burton Flat; Strawn (Prorated Gas)		Burton Flat; Morrow (Pro Gas)
Pool Code	73360		73280
Top and Bottom of Pay Section (Perforated or Open-Hole Interval)	10,208' - 10,250'		11,006' - 11,438'
Method of Production (Flowing or Artificial Lift)	Flowing		Flowing
Bottomhole Pressure (Note: Pressure data will not be required if the bottom perforation in the lower zone is within 150% of the depth of the top perforation in the upper zone)			
Oil Gravity or Gas BTU (Degree API or Gas BTU)	Oil Gravity: 52 Gas BTU: 1178		Gas BTU: 1038
Producing, Shut-In or New Zone	Producing		Producing
Date and Oil/Gas/Water Rates of Last Production. (Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data.)	Date: 04/27/2009 Rates: 0 oil/8 mcf/0 wtr	Date: Rates:	Date: 04/27/2009 Rates: 0 oil/56 mcf/0 wtr
Fixed Allocation Percentage (Note: If allocation is based upon something other than current or past production, supporting data or explanation will be required.)	Oil Gas 100% 20%	Oil Gas % %	Oil Gas 0% 80%

ADDITIONAL DATA

Are all working, royalty and overriding royalty interests identical in all commingled zones? Yes No X
If not, have all working, royalty and overriding royalty interest owners been notified by certified mail? Yes X No
Are all produced fluids from all commingled zones compatible with each other? Yes X No
Will commingling decrease the value of production? Yes No X
If this well is on, or communitized with, state or federal lands, has either the Commissioner of Public Lands or the United States Bureau of Land Management been notified in writing of this application? Yes X No

NMOCD Reference Case No. applicable to this well:

Attachments:

- C-102 for each zone to be commingled showing its spacing unit and acreage dedication.
- Production curve for each zone for at least one year. (If not available, attach explanation.)
- For zones with no production history, estimated production rates and supporting data.
- Data to support allocation method or formula.
- Notification list of working, royalty and overriding royalty interests for uncommon interest cases.
- Any additional statements, data or documents required to support commingling.

PRE-APPROVED POOLS

If application is to establish Pre-Approved Pools, the following additional information will be required:

- List of other orders approving downhole commingling within the proposed Pre-Approved Pools
- List of all operators within the proposed Pre-Approved Pools
- Proof that all operators within the proposed Pre-Approved Pools were provided notice of this application.
- Bottomhole pressure data

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Stephanie A. Ysasaga TITLE Sr. Staff Engineering Technician DATE 05/05/2009

TYPE OR PRINT NAME Stephanie A. Ysasaga TELEPHONE NO. (405)-552-7802

E-MAIL ADDRESS Stephanie.Ysasaga@dvn.com



Devon Energy Production Company
Operations Engineering
20 North Broadway - CT 3.056
Oklahoma City, Oklahoma 73102-8260
Phone: (405)-552-7802
Fax (405)-552-8113
Stephanie.Ysasaga@dev.com

May 5th, 2009

Mr. William Jones
State of New Mexico
Oil Conservation Division
1220 S. St. Francis Drive
Santa Fe, New Mexico 87505

**Re: Downhole Commingling
Burton Flat Deep Unit 3
Sec 21-T21S-R27E
API # 30-015-20799
700' FSL & 1980' FWL
Burton Flat; Morrow (Pro Gas) 73280 & Burton Flat; Strawn (Prorated Gas)
73360
Eddy County, New Mexico**

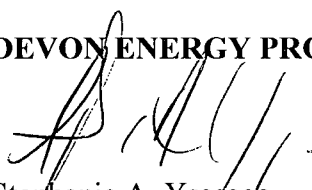
Dear Mr. Jones:

Please find attached the OCD Form C-103 Sundry Notice of Intent to Downhole Commingle, OCD form C-107A, wellbore diagrams and production data and graphs for the proposed zones. The working interest, royalty interest and overriding royalty interest owners in both formations are not uniform; certified notification has been done. See detailed spreadsheet denoting all address information as well as tracking information.

Should you require any additional information or assistance, please do not hesitate to contact me at (405)-552-7802.

Very truly yours,

DEVON ENERGY PRODUCTION COMPANY, L.P.


Stephanie A. Ysasaga
Sr. Staff Engineering Technician ©

Enclosures

**APPLICATION FOR DOWHOLE COMMINGLING
DEVON SUMMARY & INTENTIONS
BURTON FLAT DEEP UNIT 3**

State of New Mexico – Santa Fe
Oil Conservation Division
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

The Burton Flat Deep Unit 3 was spud 01/23/1973. The Morrow and Strawn zones were completed 04/16/1973 with packer set @ 10,800' to isolate the Morrow from the Strawn; producing the Morrow up the 2 7/8" long string production tubing. The Strawn is producing up the 2 3/8" short string tubing with packer @ 9,997'.

Production from the Morrow and Strawn has been restricted under the current configuration. Liquid holdup due to low gas rates has decreased rate from the Morrow to only 60 mcf/d and from the Strawn to only 10 mcf/d. Under the proposed configuration, the gas velocity will increase and possibly eliminate the liquid holdup which should result in an increase in production. Therefore, Devon requests approval to downhole commingle the Morrow and Strawn by shooting holes in the long string and producing both intervals up the short string tubing (see current and proposed schematics).

Current perforations are as follows:

- Burton Flat; Morrow (Pro Gas): 11,006' – 11,438' Pool Code: 73280
- Burton Flat; Strawn; Strawn (Prorated Gas): 10,208' – 10,250' Pool Code: 73360

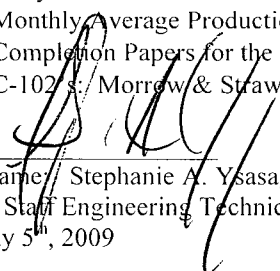
Devon proposes an extrapolated production allocation versus an historical allocation. Our current projected allocation would be the following; we are anticipating this will be acceptable. If there are other recommendations you can offer, please let us know. If changes are made to this allocation, they will be submitted formally in writing to your office.

- Burton Flat; Morrow (Pro Gas): Oil 0% - Gas 80%
- Burton Flat; Strawn (Prorated Gas): Oil 100% - Gas 20%

All working, royalty and overriding royalty interests are not identical in all commingled zones; but have been notified certified mail. All produced fluids from all commingled zones are compatible with each other. Commingling will not decrease the value of production.

Attached for your full review:

- Administrative Application Checklist
- Form C-103: NOI – Downhole Commingle
- Form C-107A: Application for Downhole Commingling
- Oil Gravities & Gas BTU's: Morrow & Strawn Zones
- Spreadsheet detail for certified mailings to parties in Morrow & Strawn zones.
- Current / Proposed Downhole Commingling Morrow & Strawn zones schematic
- Production Graphs for Morrow & Strawn zones
- Daily Production for Morrow & Strawn zones
- Monthly Average Production for Morrow & Strawn zones
- Completion Papers for the Morrow & Strawn zones
- C-102's: Morrow & Strawn

Signed: 

Printed Name: Stephanie A. Ysasaga
Title: Sr. Staff Engineering Technician
Date: May 5, 2009

DEVON ENERGY PRODUCTION COMPANY LP					
Well Name: Burton Flat Deep Unit #3			Field: Burton Flat (Morrow-Strawn)		
Location: Sec 3, T21S, R27E, 700' FSL & 1980' FWL			County: Eddy		State: NM
Elevation: 3223' DF, 3210' casing head			Spud Date: 1/23/73		Compl Date: 4/16/73
API#: 30-015-20799		Prepared by: Ronnie Slack	Date: 6/16/04	Rev:	
CURRENT 17-1/2" Hole <u>13-3/8", 48#, H40, @ 602'</u> Cmt'd w/ 750 sxs cmt to surface 12-1/4" Hole <u>9-5/8", 36#, K55, @ 2854'</u> Cmt'd w/ 1250 sxs cmt to surface <u>2-3/8", 4.7#, tubing for short string. Replaced bad joints and re-ran 325 joints, (117 new joints) in April--2002.</u> TOC not reported. Calculated TOC at 7921'. STRAWN 10208' - 10220' 10232' - 10238' 10242' - 10250' CAOF = 1.3 MMCFD MORROW 11006 - 11014' add 12/19/89 11222' - 11230' add 12/19/89 11244' - 11252' 11302' - 11310' 11312' - 11316' 11320'. 11324' - 11338' 11381' - 11391' add 12/19/89 11432' - 11438' CAOF = 8.1 MMCFD 8-3/4" Hole <u>7", 26#, S95, N80, @ 11,546'</u> Cmt'd w/ 460 sxs Class H, 3/4% cfr-2 & 8# salt per sx. <u>2-7/8", 6.5#, Prod Tubing for Long String</u> <u>Otis RDH dual packer @ 9,997'</u> Blast joints 2-7/8" XO Otis sliding sleeve <u>Otis WB permanent packer @ 10,800'</u> Otis X nipple (2.313" id) Otis N nipple (2.255" id) <u>3/22/02: Washed to 11472' with coil</u> PBD @ 11,472'					



RECEIVED

2009 MAY 28 AM 11 49
PATRICK H. LYONS
COMMISSIONER

State of New Mexico
Commissioner of Public Lands

310 OLD SANTA FE TRAIL
P.O. BOX 1148
SANTA FE, NEW MEXICO 87504-1148

COMMISSIONER'S OFFICE
Phone (505) 827-5760
Fax (505) 827-5766
www.nmstatelands.org

May 22, 2009

Devon Energy Production Company, L. P.
20 North Broadway
Oklahoma City, Oklahoma 73102-8260

Attn: Ms. Stephanie A. Ysasaga

Re: Downhole Commingling Application
Burton Flat Deep Unit Well No. 3 (API # 30-015-20799)
Section 03-21S-27E
Burton Flat; Strawn (Pro Gas) and Burton Flat; Morrow (Pro Gas) Pools
Eddy County, New Mexico

Dear Ms. Ysasaga:

Thank you for your application to downhole commingle the Burton Flat; Strawn (Pro Gas) and Burton Flat; Morrow (Pro Gas) pools from the referenced well in Eddy County, New Mexico.

Since it appears that all the New Mexico Oil Conservation's (OCD) rules and regulations have been complied with, and there will be no loss of revenue to the State of New Mexico as a result of your proposed operation, your application is approved. Any deviation from the substance of your application will be cause for rescinding our approval, and approval is subject to like approval by the OCD.

Please submit a filing fee in the amount of \$30.00.

If you have any questions or if we may be of further help, please contact Pete Martinez at (505) 827-5791.

Very truly yours,

PATRICK H. LYONS
COMMISSIONER OF PUBLIC LANDS

BY:
JAMI BAILEY, Director
Oil, Gas and Minerals Division
PL/JB/jm
Enclosure
xc: Reader File
OCD-Ed Martin
BLMR-John Simitz

-State Land Office Beneficiaries -

Carrie Tingley Hospital • Charitable Penal & Reform • Common Schools • Eastern NM University • Rio Grande Improvement • Miners' Hospital of NM • NM Boys School • NM Highlands University • NM Institute of Mining & Technology • New Mexico Military Institute • NM School for the Deaf • NM School for the Visually Handicapped • NM State Hospital • New Mexico State University • Northern NM Community College • Penitentiary of New Mexico • Public Buildings at Capital • State Park Commission • University of New Mexico • UNM Saline Lands • Water Reservoirs • Western New Mexico University

DEVON ENERGY PRODUCTION COMPANY LP

Well Name: Burton Flat Deep Unit #3		Field: Burton Flat (Morrow-Strawn)	
Location: Sec 3, T21S, R27E, 700' FSL & 1980' FWL		County: Eddy	State: NM
Elevation: 3223' DF, 3210' casing head		Spud Date: 1/23/73	Compl Date: 4/16/73
API#: 30-015-20799	Prepared by: Ronnie Slack	Date: 6/16/04	Rev:

PROPOSED DOWNHOLE COMMINGLING

17-1/2" Hole
13-3/8", 48#, H40, @ 602'
Cmt'd w/ 750 sxs cmt to surface

12-1/4" Hole
9-5/8", 36#, K55, @ 2854'
Cmt'd w/ 1250 sxs cmt to surface

2-3/8", 4.7#, tubing for short string. Replaced
bad joints and re-ran 325 joints, (117 new joints)
in April--2002.

TOC not reported. Calculated
TOC at 7921'.

STRAWN
10208' - 10220'
10232' - 10238'
10242' - 10250'
CAOF = 1.3 MMCFD

Downhole Commingling: Plan to shoot
holes in the long string and then produce
both intervals up the short string tubing.

MORROW
11006 - 11014' add 12/19/89
11222' - 11230' add 12/19/89
11244' - 11252'
11302' - 11310'
11312' - 11316'
11320' 11324' - 11338'
11381' - 11391' add 12/19/89
11432' - 11438'
CAOF = 8.1 MMCFD

8-3/4" Hole
7", 26#, S95, N80, @ 11,546'
Cmt'd w/ 460 sxs Class H, 3/4% cfr-2 &
8# salt per sx.

2-7/8", 6.5#, Prod Tubing for Long String

Otis RDH dual packer @ 9,997'

Blast joints

2-7/8" XO Otis sliding sleeve

Otis WB permanent packer @ 10,800'

Otis X nipple (2.313" id)
Otis N nipple (2.255" id)

3/22/02: Washed to 11472' with coil

PBD @ 11,472'

TD @ 11,546'

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NM 0560289

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE – Other instructions on page 2.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Devon Energy Production Co., LP

3a. Address
20 North Broadway
OKC, OK 73102

3b. Phone No. (include area code)
(405)-552-7802

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
700' FSL & 1980' FWL
Sec 3-T21S-R27E

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.
Burton Flat Deep Unit 3

9. API Well No.
30-015-20799

10. Field and Pool or Exploratory Area
Burton Flat; Morrow & Strawn (see below)

11. Country or Parish, State
Eddy County, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
☒ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off
☐ Subsequent Report	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation	☐ Well Integrity
☐ Final Abandonment Notice	☐ Casing Repair	☐ New Construction	☐ Recomplete	☒ Other <u>Downhole</u>
	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon	<u>Commingle</u>
	☐ Convert to Injection	☐ Plug Back	☐ Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Devon Energy Production Company, L.P. is applying with the New Mexico Oil Conservation Division to downhole commingle the Burton Flat; Morrow (Pro Gas): Pool code # 73280 (11,006' – 11,438') with the Burton Flat; Strawn (Prorated Gas): Pool code #73360 (10,208'-10,250'). The commingling will not reduce the value of the total production. Ownership in the zones is not uniform; notification to all working, royalty and overriding royalty interest owners has been done via certified mail. The proposed allocations are as follows:

Burton Flat; Morrow (Pro Gas): Pool code # 73280 Gas 80% Oil 0%
Burton Flat; Strawn (Prorated Gas): Pool code #73360 Gas 20% Oil 100%

Current and proposed wellbore schematics are attached along with the allocation methods and supporting data.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)
Stephanie A. Ysasaga

Title Sr. Staff Engineering Technician

Signature

Date 05/05/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)



Laboratory Services, Inc.

2609 West Marland

Hobbs, New Mexico 88240

Telephone: (505) 397-3713

C

FOR: Devon Energy
P.O. Box 250
Artesia, New Mexico 88211-0250

SAMPLE: Sta. #66491-00
IDENTIFICATION Burton Flats #3 Strawn
COMPANY: Devon Energy
LEASE:
PLANT:

SAMPLE DATA: DATE SAMPLED 4/22/08 10:00 am
ANALYSIS DATE: 4/23/08
PRESSURE - PSIG 55
SAMPLE TEMP. °F 94
ATMOS. TEMP. °F 89

GAS (XX) LIQUID ()
SAMPLED BY: E.Z. Elizondo/JW Meas.
ANALYSIS BY: Vickie Sullivan

REMARKS: H2S = 1.2 PPM

COMPONENT ANALYSIS

COMPONENT	MOL PERCENT	GPM
Hydrogen Sulfide (H2S)		
Nitrogen (N2)	0.918	
Carbon Dioxide (CO2)	0.240	
Methane (C1)	84.813	
Ethane (C2)	8.486	2.264
Propane (C3)	2.963	0.815
I-Butane (IC4)	0.543	0.177
N-Butane (NC4)	0.904	0.284
I-Pentane (IC5)	0.314	0.115
N-Pentane (NC5)	0.297	0.107
Hexane Plus (C6+)	0.522	0.227
	100.000	3.989
BTU/CU.FT. - DRY	1178	MOLECULAR WT. 19.5898
AT 14.650 DRY	1174	
AT 14.650 WET	1154	
AT 14.73 DRY	1181	
AT 14.73 WET	1160	
SPECIFIC GRAVITY -		
CALCULATED	0.675	
MEASURED		



Laboratory Services, Inc.

2609 West Marland
Hobbs, New Mexico 88240

Telephone: (505) 397-3713

①

FOR: Devon Energy
P.O. Box 250
Artesia, New Mexico 88211-0250

SAMPLE: Sta. #711593
IDENTIFICATION: Burton Flats #3 Morrow
COMPANY: Devon Energy
LEASE:
PLANT:

SAMPLE DATA: DATE SAMPLED 4/22/08 11:00 am
ANALYSIS DATE: 4/23/08
PRESSURE - PSIG 55
SAMPLE TEMP. °F 95
ATMOS. TEMP. °F 90

GAS (XX) LIQUID ()
SAMPLED BY: E.Z. Elizondo/JW Meas.
ANALYSIS BY: Vickie Sullivan

REMARKS: H2S = 1.7 PPM

COMPONENT ANALYSIS

COMPONENT	MOL PERCENT	GPM
Hydrogen Sulfide (H2S)		
Nitrogen (N2)	0.261	
Carbon Dioxide (CO2)	0.971	
Methane (C1)	95.048	
Ethane (C2)	2.695	0.719
Propane (C3)	0.648	0.178
I-Butane (IC4)	0.094	0.031
N-Butane (NC4)	0.140	0.044
I-Pentane (IC5)	0.030	0.011
N-Pentane (NC5)	0.030	0.011
Hexane Plus (C6+)	0.083	0.036
	100.000	1.030

BTU/CU.FT. - DRY 1038
AT 14.650 DRY 1035
AT 14.650 WET 1017
AT 14.73 DRY 1040
AT 14.73 WET 1022

MOLECULAR WT. 17.0984

SPECIFIC GRAVITY -
CALCULATED 0.590
MEASURED

Varian Star Chromatography Workstation

Natural Gas Analysis Report

SM

Run File	C:\STAR\DATA\DEVON07_12:07:26 PM_10-25-08_.RUN		
Method	C:\Star\BTUC6+.mth		
Operator	Precision Gas Meas	Analysis Date	10/25/08
Station #	711593	Company	DEVON ENERGY
Lease	BFDU #3	Pulled Data	10/22/08 PRESS 53 TEMP 65
Producer	DEVON ENERGY	Water (lbs)	

<u>Component</u>	<u>Mole %</u>	<u>BTU</u>	<u>GPM</u>
H2S	0.0000	0.00	0.0000
nitrogen	0.2770	0.00	0.0000
methane	94.3533	955.17	0.0000
propane	0.8980	22.65	0.2474
i-butane	0.0815	2.66	0.0267
n-butane	0.1209	3.95	0.0381
carbon dioxide	1.1095	0.00	0.0000
i-pentane	0.0513	2.06	0.0188
n-pentane	0.0397	1.60	0.0144
ethane	2.7174	48.20	0.7268
hexane+	0.3512	17.83	0.1509
Totals	100.0000	1,054.12	1.2231

Relative Density from Composition	0.6027
BTUs @ 14.65 Saturated	1,038
BTUs @ 14.65 Dry	1,057
Compressibility	0.99768

10/25/08

BURTON FLAT DEEP UNIT 3 OIL GRAVITIES: (STRAWN)

[illegible]

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved,
Budget Bureau No. 42-R555.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ OTHER _____		1. LEASE DESIGNATION AND SERIAL NO. NM 0560289																									
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ REPERFORATE ☒ RECOMPLETED		2. IF INDIAN, ALLOTTEE OR TRIBE NAME																									
2. NAME OF OPERATOR MONSANTO COMPANY		3. UNIT AGREEMENT NAME Burton Flat Deep Unit																									
3. ADDRESS OF OPERATOR 101 North Marienfeld, Midland, Texas		4. FARM OR LEASE NAME Burton Flat Unit																									
4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal laws) At surface 700' FSL & 1980' FWL Section 3 At top prod. interval reported below At total depth		5. WELL NO. 3																									
14. PERMIT NO.		15. DATE ISSUED 1/19/73																									
16. FIELD AND POOL OR WILDCAT Burton Flat - Morrow		17. SEC. T., R., M., OR BLOCK AND SURVEY OR AREA Sec. 3, T-21S, R-27E																									
18. COUNTY OR PARISH Eddy		19. STATE New Mexico																									
15. DATE SPECIFIED 1/23/73	16. DATE T.D. REACHED 3/18/73	17. DATE COMPL. (Ready to prod.) 4/16/73	18. ELEVATIONS (DP, RSB, RT, GR, ETC.) D.F. Elev. 3223'																								
19. ELEV. CASINGHEAD 3210'	20. TOTAL DEPTH, MD & TVD 11,546'																										
21. PLUG BACK T.D., MD & TVD 11,472	22. IF MULTIPLE COMPLET., HOW MANY? Two	23. INTERVALS DRILLED BY Morrow & Strawn	24. ROTARY TOOLS 0 - 11,546																								
25. CABLE TOOLS 0			26. WAS DIRECTIONAL SURVEY MADE No																								
27. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) Strawn - 10,208 - 10,250 Morrow - 11,244 - 11,438			28. TYPE ELECTRIC AND OTHER LOGS RUN Neutron - Density, Dual Ind. - Laterlog, Microlog & Dipmeter																								
29. WAS WELL CORED No			30. CASING RECORD (Report all strings set in well)																								
<table border="1"><thead><tr><th>CASING SIZE</th><th>WEIGHT, LB./FT.</th><th>DEPTH SET (MD)</th><th>HOLE SIZE</th><th>CEMENTING RECORD</th><th>AMOUNT PULLED</th></tr></thead><tbody><tr><td>13 3/8"</td><td>48#</td><td>602'</td><td>17 1/2"</td><td>750 Sx. Cmt to surface</td><td>None</td></tr><tr><td>9 5/8"</td><td>36#</td><td>2854'</td><td>12 1/2"</td><td>1250 Sx. Cmt to surface</td><td>"</td></tr><tr><td>7"</td><td>26#</td><td>11,546'</td><td>8 3/4"</td><td>460 Sx.</td><td>"</td></tr></tbody></table>				CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED	13 3/8"	48#	602'	17 1/2"	750 Sx. Cmt to surface	None	9 5/8"	36#	2854'	12 1/2"	1250 Sx. Cmt to surface	"	7"	26#	11,546'	8 3/4"	460 Sx.	"
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31. LINER RECORD																											
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SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)																							
32. TUBING RECORD																											
<table border="1"><thead><tr><th>SIZE</th><th>DEPTH SET (MD)</th><th>PACKER SET (MD)</th></tr></thead><tbody><tr><td>2 7/8"</td><td>10,805'</td><td>10,800'</td></tr><tr><td>2 3/8"</td><td>9987'</td><td>9980'</td></tr></tbody></table>				SIZE	DEPTH SET (MD)	PACKER SET (MD)	2 7/8"	10,805'	10,800'	2 3/8"	9987'	9980'															
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2 3/8"	9987'	9980'																									
33. PERFORATION RECORD (Interval, size and number)																											
Morrow 11,244-252; 11,302-310; 11,312-316; 11,320; 11,324-338; 11,432-438; 2 shots/Ft. Strawn 10,208-220; 10,232-238; 10,242-250; 2 shots/Ft.																											
34. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.																											
<table border="1"><thead><tr><th>DEPTH INTERVAL (MD)</th><th>AMOUNT AND KIND OF MATERIAL USED</th></tr></thead><tbody><tr><td>10,208-10,250</td><td>3000 Gals. 15% acid & 7500 Gals. MS Acid.</td></tr></tbody></table>				DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED	10,208-10,250	3000 Gals. 15% acid & 7500 Gals. MS Acid.																				
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36. DATE FIRST PRODUCTION 4/10/73																											
37. PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing																											
38. WELL STATUS (Producing or shut-in) Shut in																											
39. DATE OF TEST 4/16/73																											
40. HOURS TESTED 4																											
41. CHOKER SIZE 5/64-12/64																											
42. PROD'N. FOR TEST PERIOD 72																											
43. OIL—BBL. 1,120																											
44. GAS—MCF. ---																											
45. WATER—BBL. 0																											
46. GAS-OIL RATIO 62°																											
47. FLOW. TUBING PRESS. 2797 - 1618																											
48. CASING PRESSURE 0																											
49. CALCULATED 24-HOUR RATE ---																											
50. OIL—BBL. 72																											
51. GAS—MCF. 1,120																											
52. WATER—BBL. 0																											
53. OIL GRAVITY-API (CORR.) 62°																											
54. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented - Well shut in awaiting gas pipeline																											
55. TEST WITNESSED BY J. E. Guthrie																											
56. LIST OF ATTACHMENTS Drill Stem test and Logs. (Logs were mailed 4/3/73)																											
57. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records																											
58. SIGNED E. M. Scholl																											
59. TITLE District Engineer																											
60. DATE 4/19/73																											
61. PRODUCTION																											
62. DATE FIRST PRODUCTION 3/26/73																											
63. PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing																											
64. WELL STATUS (Producing or shut-in) Shut In																											
65. DATE OF TEST 4/16/73																											
66. HOURS TESTED 4																											
67. CHOKER SIZE 10/64-17.5/64																											
68. PROD'N. FOR TEST PERIOD 0																											
69. OIL—BBL. 0																											
70. GAS—MCF. 4,600																											
71. WATER—BBL. 0																											
72. GAS-OIL RATIO ---																											
73. FLOW. TUBING PRESS. 3612 - 2575																											
74. CASING PRESSURE 0																											
75. CALCULATED 24-HOUR RATE ---																											
76. OIL—BBL. 0																											
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86. DATE 4/19/73																											

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s). (If any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF FORMATION ZONES:

Indicate the formation zone, and the interval, and contents thereof: CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL, TEST LOG, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECORDS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Undiff. Permian	Surface	836	Anhydrite, dolomite, sand & shale.	Capitan Reef	836	
Capitan Reef	836	2830	Dolomite	Delaware	2830	
Delaware Sd	2830	5101	Sand & shale	Bone Spring	5101	
Bone Springs	5101	8740	Limestone, sand and shale	3rd Bone Springs	8436	
Wolfcamp	8740	10,064	Limestone and shale	Wolfcamp	8740	
Strawn	10,064	10,521	Limestone and shale	Strawn	10,064	
Atoka	10,521	11,000	Limestone and shale	Atoka	10,521	
L. Morrow	11,000	11,439	Sand, shale, limestone	Lower Morrow	11,000	
Miss. (Barnett)	11,439	11,546	Shale	Barnett	11,439	
		T.D.				

MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-55

Copy 2515

All distances must be from the outer boundaries of the Section.

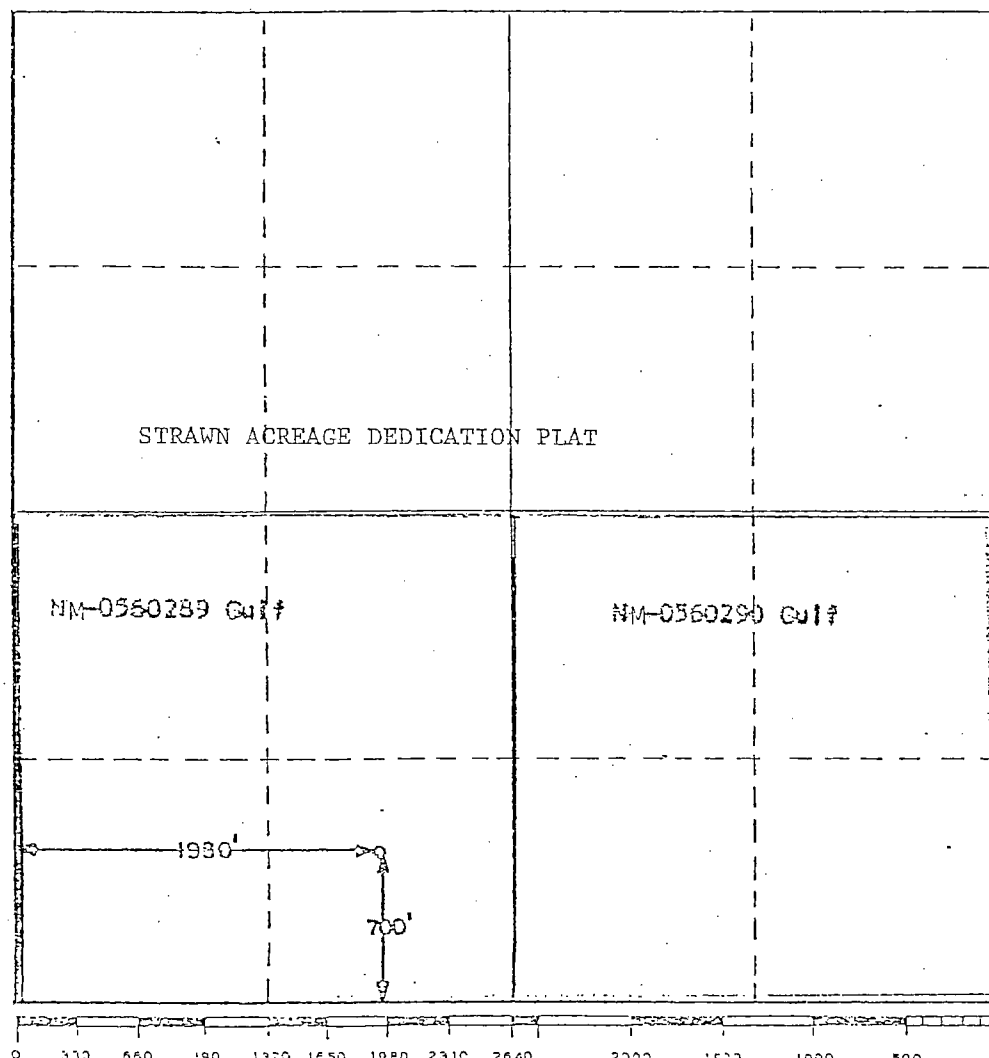
Operator MONSANTO COMPANY			Lease BURTON FLAT UNIT		Well No. 3
Unit Letter	Section 3	Township 21-S	Range 27-E	County EDDY	
Actual Footage Location of Well: 700 feet from the SOUTH line and 1980 feet from the WEST line					
Ground Level Elev.	Producing Formation MORROW		Dedicated Acreage: BURTON FLAT; MORROW		320 Acres

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by ~~communization~~, unitization, ~~force-pooling, etc?~~

☒ Yes ☐ No If answer is "yes," type of consolidation **Monsanto Co-operator Burton Flat Deep Unit**

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name **W. W. Wood**
Position **Dist. Prod. Mgr.**
Company **Monsanto Company**
Date **6/25/73**

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 knowledge and belief.

Date Surveyed **Jan. 15, 1973**
Registered Professional Engineer and/or Land Surveyor **Richard B. Duniven**
Certificate No. **4382**

N. M. O. C. C. COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.6.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other ☐		11. SEC. T. R. M. OR BLOCK AND SURVEY OR AREA	
b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP EN ☐ PLUG BACK ☐ DIFF. ENVR. ☐		12. COUNTY OR PARISH	
2. NAME OF OPERATOR MONSANTO COMPANY		13. STATE New Mexico	
3. ADDRESS OF OPERATOR 101 North Marienfeld, Midland, Texas		14. PERMIT NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State or Federal Laws) At surface 700' FSL & 1980' FWL Section 3 - ARTESIA, DEER 1973 At top prod. interval reported below At total depth		DATE ISSUED 1/19/73	
15. DATE SPOOLED 1/23/73		16. DATE T.D. REACHED 3/18/73	
17. DATE COMPL. (Ready to prod.) 4/16/73		18. ELEVATIONS (OF RKB, RT, GR, ETC.) D.F. Elev. 3223'	
19. ELEV. Casinghead 3210'		20. TOTAL DEPTH, MD & TVD 11,546'	
21. PLUG BACK T.D., MD & TVD 11,472		22. IF MULTIPLE COMPL. HOW MANY? Two Morrow & Strawn	
23. INTERVALS DRILLED BY 0 - 11,546'		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) Strawn - 10,208 - 10,250 Morrow - 11,244 - 11,438	
25. TYPE ELECTRIC AND OTHER LOGS RUN Neutron - Density, Dual Ind. - Laterlog, Microlog & Dipmeter		26. WAS DIRECTIONAL SURVEY MADE No	
27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
29. LINER RECORD		30. TUBING RECORD	
31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
33. PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)	
35. LIST OF ATTACHMENTS		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
37. PRODUCTION		38. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	
39. LIST OF ATTACHMENTS		40. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records	

* (See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 36.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s), and name(s), (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Seals Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

31. SUMMARY OF POROUS ZONES:
SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF: CORED INTERVALS, AND ALL DRILLING TESTS, INCLUDING
DRAIN INTERVAL, PERFORATION, PLUGGING AND SHUT-IN PRESSURE, AND INCOMPLETES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	NEAR DEPTH	TRUE VERT. DEPTH
Undiff. Permian	Surface	836	Anhydrite, dolomite, sand & shale.	Capitan Reef	836	
Capitan Reef	836	2830	Dolomite	Delaware	2830	
Delaware Sd	2830	5101	Sand & shale	Bone Spring	5101	
Bone Springs	5101	8740	Limestone, sand and shale	3rd Bone Springs	8436	
Wolfcamp	8740	10,064	Limestone, sand and shale	Wolfcamp	8740	
Strawn	10,064	10,521	Limestone and shale	Strawn	10,064	
Atoka	10,521	11,000	Limestone and shale	Atoka	10,521	
L. Morrow	11,000	11,439	Sand, shale, limestone	Lower Morrow	11,000	
Miss. (Barnett)	11,439	11,546	Shale	Barnett	11,439	
		T.D.				

38. GEOLOGIC MARKERS

NAME	NEAR DEPTH	TRUE VERT. DEPTH
Capitan Reef	836	
Delaware	2830	
Bone Spring	5101	
3rd Bone Springs	8436	
Wolfcamp	8740	
Strawn	10,064	
Atoka	10,521	
Lower Morrow	11,000	
Barnett	11,439	

DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
WELL COMPLETION OF OIL AND GAS WELLS

U.S. GOVERNMENT PRINTING OFFICE: 1961-O-643145

MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

Copy 011

All distances must be from the outer boundaries of the Section.

Operator MONSANTO COMPANY		Lease BURTON FLAT UNIT		Well No. 3
Unit Letter	Section 3	Township 21-S	Range 27-E	County EDDY
Actual Footage Location of Well: 700 feet from the SOUTH line and 1980 feet from the WEST line				
Ground Level Elev.	Producing Formation STRAWN	Pool BURTON FLAT; STRAWN	Dedicated Acreage: 320 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by ~~communitization~~, unitization, ~~force-pooling~~, etc.?

☒ Yes ☐ No

If answer is "yes," type of consolidation

**Monsanto Co-operator
Burton Flat Deep Unit**

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.)

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

STRAWN ACREAGE DEDICATION PLAT

NM-0560289 Cult

NM-0560290 Cult

1930'

700'

CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name W. W. Wood
Position Dist. Prod. Mgr.
Company Monsanto Company
Date 6/25/73

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 knowledge and belief.

Jan. 15, 1973

Date Surveyed
Richard B. Duniven
Registered Professional Engineer
and/or Land Surveyor

Richard B. Duniven
Certificate No. 4882

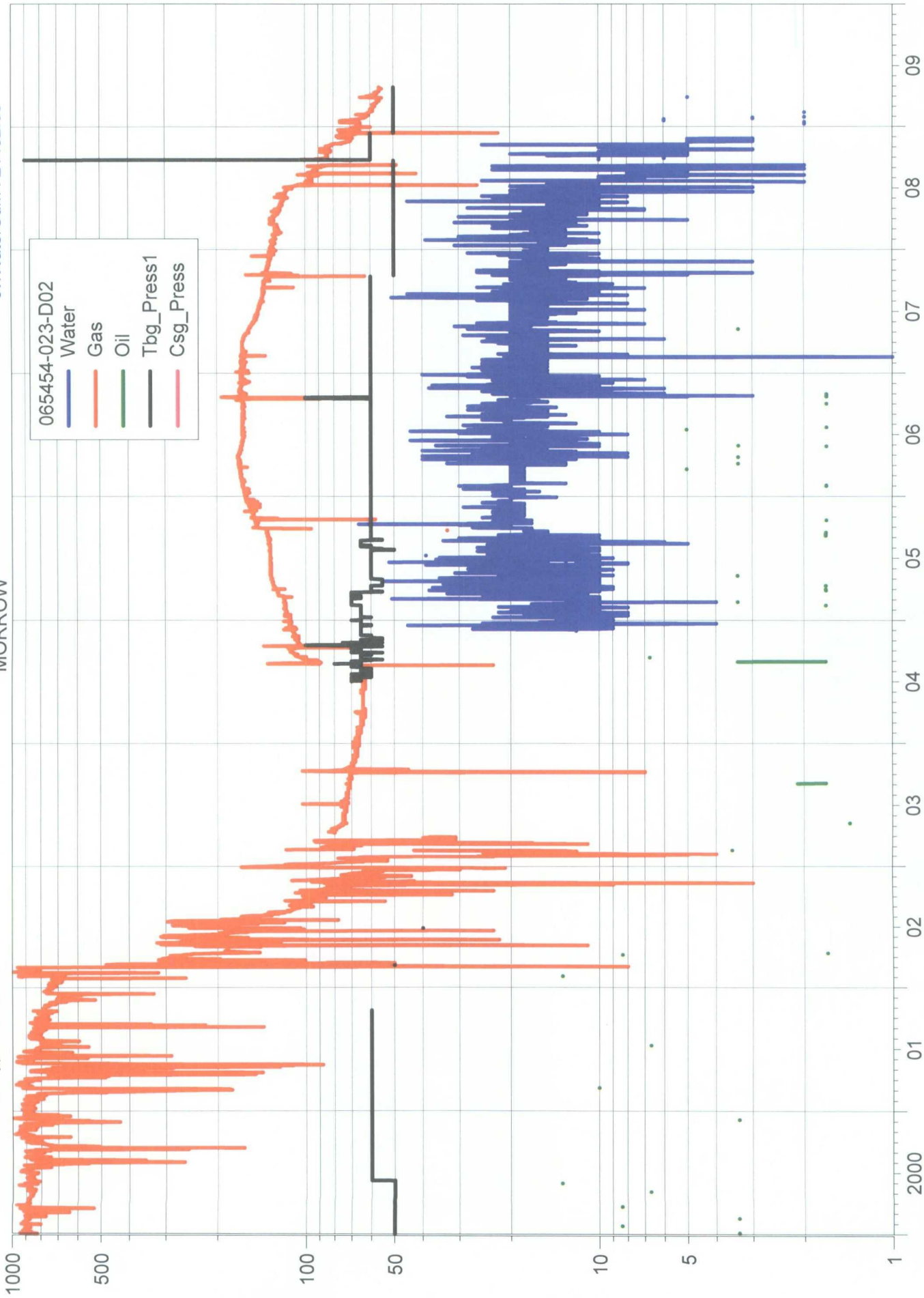
0 500 650 190 1320 1650 1980 2310 2640 2900 3500 4000 500 0

Field Group: CATCLAW DRAW AREA
Lease: BURTON FLAT DEEP UNIT
Well Type: GAS

BFDU 03 (M)

Sand Name: MRRW
MORROW

cv.OilCum : 167.97
cv.GasCum : 913.78 M
cv.WaterCum : 21452.00

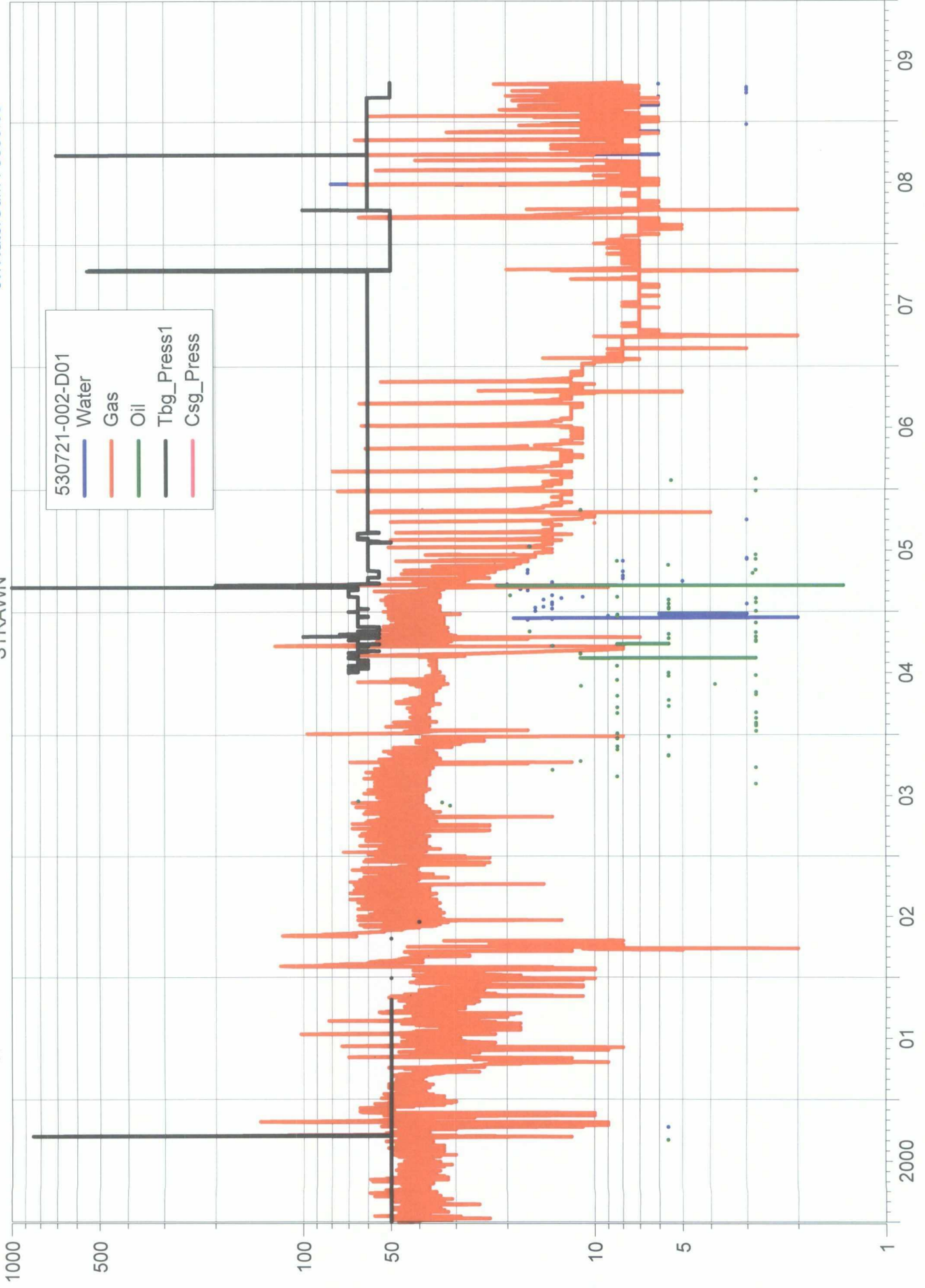


Field Group: CATCLAW DRAW AREA
Lease: BURTON FLAT DEEP UNIT
Well Type: GAS

BFDU 03 (S)

Sand Name: STRN
STRAWN

cv.OilCum : 586.41
cv.GasCum : 90.88 M
cv.WaterCum : 5500.00



Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Morrow Production 065454-023-D02

Date	Monthly Gas Mcf	Monthly Oil bbl	Monthly Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
12/01/1986	114.	0.	0.			
01/01/1987	638.	0.	0.			
02/01/1987	1077.	0.	0.			
03/01/1987	263.	0.	0.			
04/01/1987	1608.	0.	0.			
05/01/1987	1087.	0.	0.			
06/01/1987	1595.	0.	0.			
07/01/1987	163.	0.	0.			
08/01/1987	73.	0.	0.			
09/01/1987	224.	0.	0.			
10/01/1987	240.	0.	0.			
11/01/1987	92.	0.	0.			
12/01/1987	1577.	0.	0.			
01/01/1988	152.	0.	0.			
02/01/1988	1176.	0.	0.			
03/01/1988	6706.	0.	0.			
04/01/1988	4829.	0.	0.			
05/01/1988	349.	0.	0.			
06/01/1988	1984.	0.	0.			
07/01/1988	96.	0.	0.			
08/01/1988	3796.	0.	0.			
09/01/1988	4384.	0.	0.			
10/01/1988	1833.	0.	0.			
11/01/1988	10092.	0.	0.			
12/01/1988	1742.	0.	0.			
01/01/1989	1284.	0.	0.			
02/01/1989	1086.	0.	0.			
03/01/1989	795.	0.	0.			
04/01/1989	1039.	0.	0.			
05/01/1989	493.	0.	0.			
06/01/1989	0.	0.	0.			
07/01/1989	0.	0.	0.			
08/01/1989	0.	0.	0.			
09/01/1989	0.	0.	0.			
10/01/1989	1196.	0.	0.			
11/01/1989	6023.	0.	0.			
12/01/1989	5202.	0.	0.			
01/01/1990	22210.	25.	0.			
02/01/1990	21048.	3.	0.			
03/01/1990	20471.	0.	0.			
04/01/1990	22210.	3.	0.			
05/01/1990	20853.	0.	0.			
06/01/1990	14295.	0.	0.			
07/01/1990	24936.	0.	0.			
08/01/1990	23569.	0.	0.			
09/01/1990	21484.	0.	0.			
10/01/1990	22864.	0.	0.			
11/01/1990	22442.	0.	0.			
12/01/1990	22187.	0.	0.			
01/01/1991	23598.	0.	0.			
02/01/1991	33397.	0.	0.			
03/01/1991	8161.	0.	0.			

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Morrow Production 065454-023-D02

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
04/01/1991	7029.	0.	0.			
05/01/1991	6805.	0.	0.			
06/01/1991	6596.	0.	0.			
07/01/1991	5457.	0.	0.			
08/01/1991	4383.	0.	0.			
09/01/1991	3526.	0.	0.			
10/01/1991	4030.	0.	0.			
11/01/1991	4118.	0.	0.			
12/01/1991	5229.	0.	0.			
01/01/1992	5204.	0.	0.			
02/01/1992	4872.	0.	0.			
03/01/1992	5237.	0.	0.			
04/01/1992	5108.	0.	0.			
05/01/1992	5183.	0.	0.			
06/01/1992	4770.	0.	0.			
07/01/1992	4736.	0.	0.			
08/01/1992	4566.	0.	0.			
09/01/1992	4138.	0.	0.			
10/01/1992	1791.	0.	0.			
11/01/1992	4129.	0.	0.			
12/01/1992	4231.	0.	0.			
01/01/1993	3876.	0.	0.			
02/01/1993	1427.	0.	0.			
03/01/1993	1723.	0.	0.			
04/01/1993	1599.	0.	0.			
05/01/1993	1364.	0.	0.			
06/01/1993	1055.	0.	0.			
07/01/1993	1581.	0.	0.			
08/01/1993	1574.	0.	0.			
09/01/1993	1488.	0.	0.			
10/01/1993	1461.	0.	0.			
11/01/1993	1231.	0.	0.			
12/01/1993	1973.	0.	0.			
01/01/1994	2161.	0.	0.			
02/01/1994	1557.	0.	0.			
03/01/1994	1514.	0.	0.			
04/01/1994	1165.	0.	0.			
05/01/1994	1593.	0.	0.			
06/01/1994	1562.	0.	0.			
07/01/1994	1271.	0.	0.			
08/01/1994	1270.	0.	0.			
09/01/1994	1258.	0.	0.			
10/01/1994	1407.	0.	0.			
11/01/1994	1376.	0.	0.			
12/01/1994	1438.	0.	0.			
01/01/1995	1444.	0.	0.			
02/01/1995	1342.	0.	0.			
03/01/1995	1469.	0.	0.			
04/01/1995	1499.	0.	0.			
05/01/1995	1720.	0.	0.			
06/01/1995	1800.	0.	0.			
07/01/1995	1967.	0.	0.			

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Morrow Production 065454-023-D02

Date	Monthly Gas Mcf	Monthly Oil bbl	Monthly Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
08/01/1995	2108.	0.	0.			
09/01/1995	2418.	0.	0.			
10/01/1995	3612.	0.	0.			
11/01/1995	2917.	0.	0.			
12/01/1995	2673.	0.	0.			
01/01/1996	2299.	0.	0.			
02/01/1996	2279.	0.	0.			
03/01/1996	2517.	0.	0.			
04/01/1996	2373.	0.	0.			
05/01/1996	2642.	0.	0.			
06/01/1996	2406.	0.	0.			
07/01/1996	2562.	0.	0.			
08/01/1996	2698.	0.	0.			
09/01/1996	2508.	0.	0.			
10/01/1996	3053.	0.	0.			
11/01/1996	2537.	0.	0.			
12/01/1996	2245.	0.	0.			
01/01/1997	2290.	0.	0.			
02/01/1997	2154.	0.	0.			
03/01/1997	2595.	0.	0.			
04/01/1997	2606.	0.	0.			
05/01/1997	2715.	0.	0.			
06/01/1997	2576.	0.	0.			
07/01/1997	2349.	0.	0.			
08/01/1997	1793.	0.	0.			
09/01/1997	1733.	0.	0.			
10/01/1997	2626.	0.	0.			
11/01/1997	2269.	0.	0.			
12/01/1997	1933.	0.	0.			
01/01/1998	1703.	0.	0.			
02/01/1998	1563.	0.	0.			
03/01/1998	1777.	0.	0.			
04/01/1998	1766.	0.	0.			
05/01/1998	1827.	0.	0.			
06/01/1998	1817.	0.	0.			
07/01/1998	1903.	0.	0.			
08/01/1998	1852.	0.	0.			
09/01/1998	1604.	0.	0.			
10/01/1998	3505.	0.	0.			
11/01/1998	4888.	0.	0.			
12/01/1998	3820.	0.	0.			
01/01/1999	2565.	0.	0.			
02/01/1999	2019.	0.	0.			
03/01/1999	2170.	12.	3.			
04/01/1999	2109.	0.	0.			
05/01/1999	0.	12.	0.			
06/01/1999	6860.	7.	25.			
07/01/1999	10001.	2.	7.			
08/01/1999	10834.	0.	0.			
09/01/1999	12567.	8.	0.			
10/01/1999	19496.	0.	0.			
11/01/1999	20178.	8.	0.			

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Morrow Production 065454-023-D02

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
12/01/1999	16262.	0.	0.			
01/01/2000	27562.	12.	0.	0.00	0.	50.
02/01/2000	25161.	3.	0.	0.00	0.	50.
03/01/2000	26842.	8.	0.	0.00	0.	50.
04/01/2000	26169.	0.	0.	0.00	0.	50.
05/01/2000	26819.	20.	0.	0.00	0.	50.
06/01/2000	25797.	0.	0.	0.00	0.	50.
07/01/2000	25268.	0.	0.	0.00	0.	60.
08/01/2000	21431.	0.	0.	0.00	0.	60.
09/01/2000	18580.	0.	0.	0.00	0.	60.
10/01/2000	25729.	0.	0.	0.00	0.	60.
11/01/2000	23859.	0.	0.	0.00	0.	60.
12/01/2000	24861.	3.	0.	0.00	0.	60.
01/01/2001	26359.	0.	0.	0.00	0.	60.
02/01/2001	21502.	0.	0.	0.00	0.	60.
03/01/2001	19483.	10.	0.	0.00	0.	60.
04/01/2001	13463.	0.	0.	0.00	0.	60.
05/01/2001	11777.	0.	0.	0.00	0.	60.
06/01/2001	16805.	0.	0.	0.00	0.	60.
07/01/2001	15955.	7.	0.	0.00	0.	60.
08/01/2001	17003.	0.	0.	0.00	0.	60.
09/01/2001	20553.	0.	0.	0.00	0.	60.
10/01/2001	21970.	0.	0.	0.00	0.	60.
11/01/2001	17089.	0.	0.	0.00	0.	0.
12/01/2001	21180.	0.	0.	0.00	0.	0.
01/01/2002	20534.	0.	0.	0.00	0.	0.
02/01/2002	23338.	13.	0.	0.00	0.	0.
03/01/2002	6323.	0.	0.	0.00	0.	0.
04/01/2002	4938.	10.	0.	0.00	0.	0.
05/01/2002	5953.	0.	0.	0.00	0.	0.
06/01/2002	5485.	0.	0.	0.00	0.	0.
07/01/2002	6398.	0.	0.	0.00	0.	0.
08/01/2002	3761.	0.	0.	0.00	0.	0.
09/01/2002	2920.	0.	0.	0.00	0.	0.
10/01/2002	2409.	0.	0.	0.00	0.	0.
11/01/2002	1823.	0.	0.	0.00	0.	0.
12/01/2002	1973.	0.	0.	0.00	0.	0.
01/01/2003	2398.	0.	0.	0.00	0.	0.
02/01/2003	855.	3.	0.	0.00	0.	0.
03/01/2003	2015.	0.	0.	0.00	0.	0.
04/01/2003	1594.	0.	0.	0.00	0.	0.
05/01/2003	2314.	1.	0.	0.00	0.	0.
06/01/2003	2203.	0.	0.	0.00	0.	0.
07/01/2003	2250.	0.	0.	0.00	0.	0.
08/01/2003	2220.	0.	0.	0.00	0.	0.
09/01/2003	2123.	4.	0.	0.00	0.	0.
10/01/2003	2096.	0.	0.	0.00	0.	0.
11/01/2003	2029.	0.	0.	0.00	0.	0.
12/01/2003	2068.	0.	0.	0.00	0.	0.
01/01/2004	2051.	0.	0.	0.00	0.	0.
02/01/2004	1871.	0.	0.	0.00	0.	0.
03/01/2004	1974.	0.	0.	0.00	0.	0.

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Morrow Production 065454-023-D02

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
04/01/2004	1901.	0.	0.	0.00	0.	0.
05/01/2004	1973.	0.	0.	0.00	0.	0.
06/01/2004	1907.	0.	0.	0.00	0.	0.
07/01/2004	1964.	0.	0.	64.00		70.
08/01/2004	2136.	5.	0.	64.00		65.
09/01/2004	3146.	7.	0.	64.00		65.
10/01/2004	3088.	0.	0.	0.00	0.	65.
11/01/2004	3242.	0.	0.	0.00	0.	65.
12/01/2004	3473.	0.	0.	0.00	0.	65.
01/01/2005	3562.	0.	0.	0.00	0.	65.
02/01/2005	3273.	3.	0.	0.00	0.	65.
03/01/2005	3770.	3.	0.		0.	70.
04/01/2005	3787.	2.	473.	0.00	0.	60.
05/01/2005	4003.	3.	493.	0.00	0.	60.
06/01/2005	3885.	0.	445.	0.00	0.	60.
07/01/2005	4028.	0.	484.	0.00	0.	60.
08/01/2005	4055.	0.	506.	0.00	0.	60.
09/01/2005	3338.	7.	396.	0.00	0.	60.
10/01/2005	4100.	2.	605.	0.00	0.	60.
11/01/2005	4453.	0.	605.	0.00	0.	60.
12/01/2005	4741.	0.	612.	0.00	0.	60.
01/01/2006	4889.	2.	587.	0.00	0.	60.
02/01/2006	4504.	2.	544.	0.00	0.	60.
03/01/2006	5073.	5.	600.	0.00	0.	60.
04/01/2006	4959.	7.	518.	0.00	0.	60.
05/01/2006	5048.	5.	594.	0.00	0.	60.
06/01/2006	4790.	0.	548.	0.00	0.	60.
07/01/2006	4961.	7.	610.	0.00	0.	60.
08/01/2006	4952.	0.	626.	0.00	0.	60.
09/01/2006	4779.	0.	577.	0.00	0.	60.
10/01/2006	4538.	8.	425.	0.00	0.	60.
11/01/2006	4870.	0.	550.	0.00	0.	60.
12/01/2006	4967.	0.	594.	0.00	0.	60.
01/01/2007	4977.	0.	613.	0.00	0.	60.
02/01/2007	4469.	0.	511.	0.00	0.	60.
03/01/2007	4963.	0.	572.	0.00	0.	60.
04/01/2007	4740.	0.	566.	0.00	0.	60.
05/01/2007	4660.	3.	581.	0.00	0.	60.
06/01/2007	4321.	0.	552.	0.00	0.	60.
07/01/2007	4338.	0.	501.	0.00	0.	60.
08/01/2007	4246.	0.	596.	0.00	0.	60.
09/01/2007	4040.	0.	485.	0.00	0.	60.
10/01/2007	3706.	0.	423.	0.00	0.	60.
11/01/2007	3924.	0.	486.	0.00	0.	50.
12/01/2007	3975.	0.	483.	0.00	0.	50.
01/01/2008	3910.	0.	486.	0.00	0.	50.
02/01/2008	3584.	0.	485.	0.00	0.	50.
03/01/2008	3891.	0.	485.	0.00	0.	50.
04/01/2008	3676.	0.	413.	0.00	0.	50.
05/01/2008	3652.	0.	418.	0.00	0.	50.
06/01/2008	3459.	0.	391.	0.00	0.	50.
07/01/2008	2918.	0.	286.	0.00	0.	50.

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Morrow Production 065454-023-D02

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
08/01/2008	2849.	0.	207.	0.00	0.	50.
09/01/2008	1338.	0.	83.	0.00	0.	50.
10/01/2008	2565.	0.	218.	64.00	0.	60.
11/01/2008	2206.	0.	141.	64.00	0.	60.
12/01/2008	2118.	0.	0.	64.00	0.	60.
01/01/2009	2042.	0.	36.	64.00	0.	50.
02/01/2009	1663.	0.	2.	64.00	0.	50.
03/01/2009	1760.	0.	5.	64.00	0.	50.

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Strawn Production 0530721-002-D01

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
10/01/1986	680.	141.	0.			
11/01/1986	0.	31.	0.			
12/01/1986	2363.	72.	0.			
01/01/1987	1034.	47.	0.			
02/01/1987	869.	45.	140.			
03/01/1987	1150.	22.	155.			
04/01/1987	924.	36.	60.			
05/01/1987	203.	40.	31.			
06/01/1987	266.	0.	0.			
07/01/1987	1300.	31.	0.			
08/01/1987	1922.	36.	124.			
09/01/1987	1876.	47.	120.			
10/01/1987	1663.	49.	155.			
11/01/1987	1506.	45.	0.			
12/01/1987	1230.	76.	0.			
01/01/1988	1949.	45.	217.			
02/01/1988	0.	20.	203.			
03/01/1988	986.	49.	93.			
04/01/1988	2121.	37.	87.			
05/01/1988	2248.	44.	87.			
06/01/1988	1911.	30.	90.			
07/01/1988	2358.	32.	87.			
08/01/1988	1368.	23.	93.			
09/01/1988	1988.	36.	660.			
10/01/1988	1663.	33.	62.			
11/01/1988	1802.	45.	60.			
12/01/1988	1125.	38.	56.			
01/01/1989	1498.	43.	58.			
02/01/1989	1651.	46.	96.			
03/01/1989	1773.	39.	58.			
04/01/1989	1794.	52.	150.			
05/01/1989	29.	0.	0.			
06/01/1989	0.	0.	0.			
07/01/1989	0.	0.	0.			
08/01/1989	0.	0.	0.			
09/01/1989	0.	0.	0.			
10/01/1989	781.	28.	0.			
11/01/1989	3349.	42.	0.			
12/01/1989	1033.	45.	120.			
01/01/1990	1888.	47.	124.			
02/01/1990	957.	28.	112.			
03/01/1990	1918.	45.	87.			
04/01/1990	1586.	0.	90.			
05/01/1990	1604.	34.	93.			
06/01/1990	1349.	11.	23.			
07/01/1990	1544.	37.	31.			
08/01/1990	811.	17.	60.			
09/01/1990	945.	14.	54.			
10/01/1990	1654.	28.	56.			
11/01/1990	1876.	53.	60.			
12/01/1990	942.	25.	52.			
01/01/1991	1246.	31.	62.			

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Strawn Production 0530721-002-D01

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
02/01/1991	427.	16.	28.			
03/01/1991	1306.	25.	28.			
04/01/1991	1020.	14.	25.			
05/01/1991	868.	53.	29.			
06/01/1991	817.	14.	28.			
07/01/1991	715.	22.	30.			
08/01/1991	739.	14.	30.			
09/01/1991	723.	3.	30.			
10/01/1991	504.	8.	26.			
11/01/1991	931.	44.	29.			
12/01/1991	679.	3.	31.			
01/01/1992	670.	14.	30.			
02/01/1992	640.	17.	0.			
03/01/1992	732.	11.	0.			
04/01/1992	702.	11.	0.			
05/01/1992	660.	0.	0.			
06/01/1992	639.	6.	0.			
07/01/1992	684.	17.	0.			
08/01/1992	711.	14.	0.			
09/01/1992	672.	6.	0.			
10/01/1992	787.	20.	0.			
11/01/1992	603.	7.	0.			
12/01/1992	692.	14.	0.			
01/01/1993	686.	14.	0.			
02/01/1993	675.	6.	0.			
03/01/1993	694.	10.	0.			
04/01/1993	593.	14.	0.			
05/01/1993	618.	8.	0.			
06/01/1993	631.	11.	0.			
07/01/1993	634.	8.	0.			
08/01/1993	625.	14.	0.			
09/01/1993	589.	3.	0.			
10/01/1993	572.	8.	0.			
11/01/1993	774.	25.	10.			
12/01/1993	651.	6.	3.			
01/01/1994	633.	11.	0.			
02/01/1994	639.	11.	5.			
03/01/1994	719.	14.	5.			
04/01/1994	629.	11.	4.			
05/01/1994	658.	14.	5.			
06/01/1994	655.	8.	3.			
07/01/1994	639.	14.	5.			
08/01/1994	647.	7.	3.			
09/01/1994	630.	6.	1.			
10/01/1994	624.	11.	3.			
11/01/1994	605.	8.	3.			
12/01/1994	628.	3.	3.			
01/01/1995	626.	22.	4.			
02/01/1995	559.	14.	4.			
03/01/1995	606.	6.	3.			
04/01/1995	572.	8.	2.			
05/01/1995	568.	3.	1.			

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Strawn Production 0530721-002-D01

Date	Monthly Gas Mcf	Monthly Oil bbl	Monthly Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
06/01/1995	556.	11.	6.			
07/01/1995	565.	3.	0.			
08/01/1995	568.	0.	0.			
09/01/1995	522.	0.	0.			
10/01/1995	567.	0.	0.			
11/01/1995	574.	0.	0.			
12/01/1995	562.	0.	0.			
01/01/1996	604.	0.				
02/01/1996	506.	0.				
03/01/1996	553.	0.				
04/01/1996	548.	0.				
05/01/1996	580.	0.				
06/01/1996	524.	0.				
07/01/1996	551.	0.				
08/01/1996	591.	0.				
09/01/1996	555.	0.				
10/01/1996	534.	0.				
11/01/1996	536.	0.				
12/01/1996	559.	0.				
01/01/1997	521.	0.				
02/01/1997	467.	0.				
03/01/1997	503.	0.				
04/01/1997	486.	0.				
05/01/1997	494.	0.				
06/01/1997	500.	0.				
07/01/1997	489.	0.				
08/01/1997	514.	0.				
09/01/1997	491.	0.				
10/01/1997	528.	0.				
11/01/1997	488.	0.				
12/01/1997	508.	0.				
01/01/1998	493.	0.				
02/01/1998	436.	0.				
03/01/1998	462.	0.				
04/01/1998	459.	0.				
05/01/1998	459.	0.				
06/01/1998	441.	0.				
07/01/1998	467.	0.				
08/01/1998	463.	0.				
09/01/1998	431.	0.				
10/01/1998	485.	0.				
11/01/1998	450.	0.				
12/01/1998	450.	0.				
01/01/1999	452.	0.	0.			
02/01/1999	415.	0.	0.			
03/01/1999	447.	0.	3.			
04/01/1999	418.	3.	3.			
05/01/1999	0.	123.	0.			
06/01/1999	1717.	61.	0.			
07/01/1999	1509.	33.	69.			
08/01/1999	925.	0.	0.			
09/01/1999	1050.	0.	16.			

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Strawn Production 0530721-002-D01

Date	Monthly Gas Mcf	Monthly Oil bbl	Monthly Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
10/01/1999	1488.	1.	0.			
11/01/1999	1409.	0.	0.			
12/01/1999	1395.	0.	0.			
01/01/2000	1458.	0.	0.	0.00	0.	50.
02/01/2000	1259.	0.	0.	0.00	0.	50.
03/01/2000	1465.	0.	0.	0.00	0.	50.
04/01/2000	1381.	0.	0.	0.00	0.	50.
05/01/2000	1408.	0.	0.	0.00	0.	50.
06/01/2000	1330.	0.	0.	0.00	0.	50.
07/01/2000	1369.	0.	0.	0.00	0.	50.
08/01/2000	1404.	0.	0.	0.00	0.	50.
09/01/2000	1374.	0.	0.	0.00	0.	50.
10/01/2000	1468.	0.	6.	0.00	0.	50.
11/01/2000	1323.	0.	0.	0.00	0.	50.
12/01/2000	1512.	0.	0.	0.00	0.	50.
01/01/2001	1423.	0.	0.	0.00	0.	50.
02/01/2001	1303.	0.	0.	0.00	0.	50.
03/01/2001	1298.	0.	0.	0.00	0.	50.
04/01/2001	948.	0.	0.	0.00	0.	50.
05/01/2001	1171.	0.	0.	0.00	0.	50.
06/01/2001	1161.	0.	0.	0.00	0.	50.
07/01/2001	1122.	0.	0.	0.00	0.	50.
08/01/2001	1171.	0.	0.	0.00	0.	50.
09/01/2001	1077.	0.	0.	0.00	0.	50.
10/01/2001	1036.	0.	0.	0.00	0.	50.
11/01/2001	750.	0.	0.	0.00	0.	0.
12/01/2001	693.	0.	0.	0.00	0.	0.
01/01/2002	779.	0.	0.	0.00	0.	0.
02/01/2002	1702.	0.	0.	0.00	0.	0.
03/01/2002	723.	0.	0.	0.00	0.	0.
04/01/2002	282.	0.	0.	0.00	0.	0.
05/01/2002	1971.	0.	0.	0.00	0.	0.
06/01/2002	1233.	0.	0.	0.00	0.	0.
07/01/2002	1296.	0.	0.	0.00	0.	0.
08/01/2002	1302.	0.	0.	0.00	0.	0.
09/01/2002	1279.	0.	0.	0.00	0.	0.
10/01/2002	1356.	0.	0.	0.00	0.	0.
11/01/2002	1383.	0.	0.	0.00	0.	0.
12/01/2002	1320.	0.	0.	0.00	0.	0.
01/01/2003	1351.	0.	0.	0.00	0.	0.
02/01/2003	1227.	0.	0.	0.00	0.	0.
03/01/2003	1353.	0.	0.	0.00	0.	0.
04/01/2003	1262.	0.	0.	0.00	0.	0.
05/01/2003	1337.	0.	0.	0.00	0.	0.
06/01/2003	1297.	130.	0.	0.00	0.	0.
07/01/2003	1336.	0.	0.	0.00	0.	0.
08/01/2003	1291.	11.	0.	0.00	0.	0.
09/01/2003	1228.	17.	0.	0.00	0.	0.
10/01/2003	1151.	22.	0.	0.00	0.	0.
11/01/2003	1123.	17.	0.	0.00	0.	0.
12/01/2003	804.	14.	0.	0.00	0.	0.
01/01/2004	1267.	14.	0.	0.00	0.	0.

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Strawn Production 0530721-002-D01

Date	Monthly Gas Mcf	Monthly Oil bbl	Monthly Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
02/01/2004	1114.	8.	0.	0.00	0.	0.
03/01/2004	1211.	25.	0.	0.00	0.	0.
04/01/2004	1117.	17.	0.	0.00	0.	0.
05/01/2004	1113.	18.	0.	0.00	0.	0.
06/01/2004	1090.	17.	0.	0.00	0.	0.
07/01/2004	1076.	14.	0.	64.00		70.
08/01/2004	1066.	25.	0.	64.00		65.
09/01/2004	899.	28.	0.	64.00		65.
10/01/2004	1035.	22.	0.	0.00	0.	65.
11/01/2004	1070.	20.	0.	0.00	0.	65.
12/01/2004	1124.	17.	86.	0.00	0.	65.
01/01/2005	1157.	22.	92.	0.00	0.	65.
02/01/2005	1032.	28.	53.	0.00	0.	65.
03/01/2005	1002.	23.	74.		0.	70.
04/01/2005	800.	3.	41.	0.00	0.	60.
05/01/2005	678.	17.	47.	0.00	0.	60.
06/01/2005	531.	6.	22.	0.00	0.	60.
07/01/2005	499.	17.	20.	0.00	0.	60.
08/01/2005	540.	0.	36.	0.00	0.	60.
09/01/2005	425.	8.	18.	0.00	0.	60.
10/01/2005	470.	11.	42.	0.00	0.	60.
11/01/2005	422.	0.	0.	0.00	0.	60.
12/01/2005	4741.	3.	50.	0.00	0.	60.
01/01/2006	446.	5.	0.	0.00	0.	60.
02/01/2006	470.	3.	39.	0.00	0.	60.
03/01/2006	448.	0.	0.	0.00	0.	60.
04/01/2006	379.	0.	0.	0.00	0.	60.
05/01/2006	524.	0.	0.	0.00	0.	60.
06/01/2006	342.	0.	0.	0.00	0.	60.
07/01/2006	562.	0.	0.	0.00	0.	60.
08/01/2006	378.	0.	0.	0.00	0.	60.
09/01/2006	487.	0.	0.	0.00	0.	60.
10/01/2006	368.	0.	0.	0.00	0.	60.
11/01/2006	453.	0.	0.	0.00	0.	60.
12/01/2006	354.	0.	0.	0.00	0.	60.
01/01/2007	292.	0.	0.	0.00	0.	60.
02/01/2007	226.	0.	0.	0.00	0.	60.
03/01/2007	235.	0.	0.	0.00	0.	60.
04/01/2007	202.	0.	0.	0.00	0.	60.
05/01/2007	224.	0.	0.	0.00	0.	60.
06/01/2007	215.	0.	0.	0.00	0.	60.
07/01/2007	218.	0.	0.	0.00	0.	60.
08/01/2007	215.	0.	0.	0.00	0.	60.
09/01/2007	225.	0.	0.	0.00	0.	60.
10/01/2007	237.	0.	0.	0.00	0.	60.
11/01/2007	230.	0.	0.	0.00	0.	50.
12/01/2007	244.	0.	0.	0.00	0.	50.
01/01/2008	242.	0.	0.	0.00	0.	50.
02/01/2008	191.	0.	0.	0.00	0.	50.
03/01/2008	526.	0.	0.	0.00	0.	50.
04/01/2008	218.	0.	0.	0.00	0.	50.
05/01/2008	217.	0.	0.	0.00	0.	60.

Burton Flat Deep Unit 3: API # 30-015-20799

Monthly Strawn Production 0530721-002-D01

Date	Monthly.Gas Mcf	Monthly.Oil bbl	Monthly.Water bbl	Dly. Chokesize	Dly.Csg_ pressure psi	Dly.Tbg_ press1 psi
06/01/2008	361.	0.	140.	0.00	0.	60.
07/01/2008	254.	0.	0.	0.00	0.	60.
08/01/2008	348.	0.	47.	0.00	0.	60.
09/01/2008	271.	0.	55.	0.00	0.	60.
10/01/2008	280.	0.	0.	64.00	0.	60.
11/01/2008	352.	0.	68.	64.00	0.	60.
12/01/2008	317.	0.	21.	64.00	0.	60.
01/01/2009	322.	0.	33.	64.00	0.	60.
02/01/2009	301.	0.	27.	64.00	0.	60.
03/01/2009	338.	0.	9.	64.00	0.	60.

Burton Flat Deep Unit 3 DHC Notification List:

Claremont Corporation
P.O. Box 3226
Tulsa, OK 74101-3226
7002-2030-0001-3840-5076

Patricia Boyle Young
P.O. Box 1639
Solano Beach, CA 92075
7002-2030-0001-3840-5090

GW Holdings, Inc.
Great Western Drilling Ltd dba
Great Western Drilling Company
P.O. Box 1659
Midland, TX 79702
7002-2030-0001-3840-5168

Davoil, Inc.
P.O. Box 200292
Dallas, TX 75320-0292
7002-2030-0001-3840-5175

Edward R. Hudson Trust #4
Mary T. Hudson Ard, Trustee
222 W. 4th Street PH 5
Fort Worth, TX 76102
7002-2030-0001-3840-5182

Minerals Management Service
Royalty Management Program
P.O. Box 5810
Denver, CO 80217-5810
7002-2030-0001-3840-5199

State of New Mexico
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87505-1148
7002-2030-0001-3840-5205

Swinehart 1973 Trust
Judy Swinehart & Leslie A Mallett Co-Trustees
10713 S. Logan Canyon Road
S. Jordan, Utah 84095
7002-2030-0001-3840-5212

Redfern Enterprises, Inc.
P.O. Box 2127
Midland, TX 79702
7002-2030-0001-3840-5229

Edith B. Myers
2717 South Lyon
Indianapolis, IN 46241
7002-2030-0001-3840-5236

Margaret M. Palm
311 Grandview Place
San Antonio, TX 78209
7002-2030-0001-3840-5243

Mary Curtiss Mayfield
P.O. 110915
Big Bear Lake, CA 92315
7002-2030-0001-3840-5250

W.T. Probandt
415 W. Wall, Suit 1608
Midland, TX 79701
7002-2030-0001-3840-5267

Betty Sumner Moran
11100 Los Lagos NE
Albuquerque, NM 87111-7533
7002-2030-0001-3840-5274

Mary Gene Weber Living Trust
P.O. Box 255
Elmer, OK 73539
7002-2030-0001-3840-5281

Rosina C. Schutz
22 Brilliant Sky Drive
Santa Fe, NM 87508
7002-2030-0001-3840-5298

Dorothy Sumner Corn
2421 Quinton Avenue #105
Lubbock, TX 79710-1734
7002-2030-0001-3840-5304

John Halagan
70 Shadowplay
Irvine, CA 92620-4810
7002-2030-0001-3840-5311

Hudson New Mexico Minerals Trust
616 Texas Street
Fort Worth, TX 76102-4612
7002-2030-0001-3840-5328

Southeast Royalties, Inc.
P.O. 1658
Carlsbad, NM 88221-1658
7002-2030-0001-3840-5335

John W. Gates, LLC
706 West Grand Avenue
Artesia, NM 88210
7002-2030-0001-3840-5342

Oakland Society for Prevention of Cruelty to Animals
8323 Baldwin Street
Oakland, CA 94609
7002-2030-0001-3840-5359

Children's Hospital Foundation
2201 Broadway FL6
Oakland, CA 94612-3024
7002-2030-0001-3840-5366

Marcia S. Mayfield Revocable Trust
Marcia S. Mayfield Trustee
9398 Viscount Building 5B
El Paso, TX 79925
7002-2030-0001-3840-5373

Sieb Resources
P.O. Box 1107
Richmond, TX 77406-1107
7002-2030-0001-3840-5380

J & L Resources
310 Morton Street, Suite 160
Richmond, TX 77469
7002-2030-0001-3840-5397

Gene E. Trowbridge, Jr.
P.O. Box 1169
Saratoga, WY 82331
7002-2030-0001-3840-5403

Ann T. Tollefson Revocable Living Trust
Dated June 7, 2006
Ann Tollefson Trustee
231 East 10th Street
Casper, WY 82601
7002-2030-0001-3840-5410

Connie Fong Dunn
5511 N. Delno
Fresno, CA 93711
7002-2030-0001-3840-5427

Mary Hudson Ard
222 West 4th Street PH5
Fort Worth, TX 76102
7002-2030-0001-3840-5434

Sol West III
P.O. Box 10120
El Paso, TX 79992
7008-1140-0004-6108-7447

Nora Helen McCaw, Trustee
Of the McCaw Family Trust
210 Crossbow Road
Artesia, NM 88210
7007-0710-0000-0857-3133

Thomas G. Laros Estate
Dianne D. Laros, Independent Executrix
5711 Stanford Avenue
Dallas, TX 75209
7007-0710-0000-0857-3140

Joe B. Schutz
P.O. Box 973
Santa Fe, NM 87501
7007-0710-0000-0857-3157

Hudson Oil Company of Texas
616 Texas Street
Fort Worth, TX 76102-4612
7007-0710-0000-0857-3126

Reva Co, a Partnership
c/o Colorado State Bank & Trust NA
Successor Managing Partner
P.O. Box 1588
Tulsa, OK 74010-1588
7008-1140-0004-6107-8452

Gwendolyn Taylor Rutledge
28 Scotts Place
Santa Fe, NM 87507
7008-1140-0004-6107-8469

Agnes Dunigan Independent Executrix
Of the Estate of Joseph L. Dunigan
4024 La Adelita Drive
El Paso, TX 79922-2312
7008-1140-0004-6107-8476

Sharon K. Clark
P.O. 1469
Edgewood, NM 87015
7008-1140-0004-6107-8483

Suzanne L. Simpson
5127 Nassif Court NW
Albuquerque, NM 87129-2174
7008-1140-0004-6107-8490

William M. or Tina M. Sumner
11811 Eagle Rock Avenue NE
Albuquerque, NM 87122
7008-1140-0004-6107-8506

George V. Janzen
3488 "B" Calle Azul
Laguna Woods, CA 92653
7008-1140-0004-6107-8513

Helen and John Frankot Trust dated June 2, 1997
Helen Frankot Trustee
1940 Verbania Drive
Las Vegas, NV 89134
7008-1140-0004-6107-8520

LLoyd Co, a Partnership
c/o Colorado State Bank & Trust NA
Successor Managing Partner
P.O. Box 1588
Tulsa, OK 74010-1588
7008-1140-0004-6107-8537

United States Department of the Interior
Bureau of Land Management
Carlsbad Field Office
620 East Greene Street
Carlsbad, NM 88220-6292
7008-1140-0004-6107-8544

Burton Flat Deep Unit 3 DHC Notification List:

RECEIVED

2009 MAY 27 PM 12 02

Claremont Corporation
P.O. Box 3226
Tulsa, OK 74101-3226
7002-2030-0001-3840-5076
Sent certified mail 05/07/2009
Date delivered 05/12/2009

* **Black Font: Copies of Certified Return Receipts**

* **Red Font: Certified Return Receipts not Received to Date**

Patricia Boyle Young
P.O. Box 1639
Solano Beach, CA 92075
7002-2030-0001-3840-5090
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

GW Holdings, Inc.
Great Western Drilling Ltd dba
Great Western Drilling Company
P.O. Box 1659
Midland, TX 79702
7002-2030-0001-3840-5168
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Davoil, Inc.
P.O. Box 200292
Dallas, TX 75320-0292
7002-2030-0001-3840-5175
Sent certified mail 05/07/2009
Date delivered: 05/13/2009

Edward R. Hudson Trust #4
Mary T. Hudson Ard, Trustee
222 W. 4th Street PH 5
Fort Worth, TX 76102
7002-2030-0001-3840-5182
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Minerals Management Service
Royalty Management Program
P.O. Box 5810
Denver, CO 80217-5810
7002-2030-0001-3840-5199
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State of New Mexico
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87505-1148
7002-2030-0001-3840-5205
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Swinehart 1973 Trust
Judy Swinehart & Leslie A Mallett Co-Trustees
10713 S. Logan Canyon Road
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Albuquerque, NM 87111-7533
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Elmer, OK 73539
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22 Brilliant Sky Drive
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El Paso, TX 79925
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Date delivered: 05/18/09

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El Paso, TX 79992
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Fort Worth, TX 76102-4612
7007-0710-0000-0857-3126
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Successor Managing Partner
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Tulsa, OK 74010-1588
7008-1140-0004-6107-8452
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Santa Fe, NM 87507
7008-1140-0004-6107-8469
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P.O. 1469

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Albuquerque, NM 87129-2174
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Laguna Woods, CA 92653
7008-1140-0004-6107-8513
Sent certified mail 05/07/2009

Helen and John Frankot Trust dated June 2, 1997
Helen Frankot Trustee
1940 Verbania Drive
Las Vegas, NV 89134
7008-1140-0004-6107-8520
Sent certified mail 05/07/2009

LLoyd Co, a Partnership
c/o Colorado State Bank & Trust NA
Successor Managing Partner
P.O. Box 1588
Tulsa, OK 74010-1588
7008-1140-0004-6107-8537
Sent certified mail 05/07/2009

United States Department of the Interior
Bureau of Land Management
Carlsbad Field Office
620 East Greene Street
Carlsbad, NM 88220-6292
7008-1140-0004-6107-8544

Sent certified mail 05/07/2009
Date delivered: 05/10/2009

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Claremont Corporation
P.O. Box 3226
Tulsa, OK 74101-3226

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Linda Pook

C. Date of Delivery

5/2/09

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Patricia Boyle Young
P.O. Box 1639
Solano Beach, CA 92075

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5090

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Patricia Young

C. Date of Delivery

5/1/09

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GW Holdings, Inc. - Great Western Drilling Ltd dba
Great Western Drilling Company
P.O. Box 1659
Midland, TX 79702

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5168

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. Bell

C. Date of Delivery

5/1/11

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Davoil, Inc.
P.O. Box 200292
Dallas, TX 75320-0292

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5175

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Minerals Management Service
Royalty Management Program
P.O. Box 5810
Denver, CO 80217-5810

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5199

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

State of New Mexico
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87505-1148

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5205

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Heakita Collins* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Heakita Collins C. Date of Delivery **MAY 13 2009**

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

*MINERALS MANAGEMENT SERVICE
ROYALTY MANAGEMENT PROGRAM
DOCUMENT PROCESSING SECTION* C. Date of Delivery **MAY 11 2009**

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

[Signature] C. Date of Delivery **MAY 11 2009**

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Swinehart 1973 Trust
Judy Swinehart & Leslie A Mallett Co-Trustees
10713 S. Logan Canyon Road
S. Jordan, Utah 84095

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5212

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Redfern Enterprises, Inc.
P.O. Box 2127
Midland, TX 79702

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5229

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Edith B. Myers
2717 South Lyon
Indianapolis, IN 46241

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5236

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Leslie Mallett* ☐ Agent
☐ Address

B. Received by (Printed Name)

Leslie Mallett

C. Date of Delivery

5/14/0

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes
☐ No

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Shirley Choate* ☐ Agent
☐ Address

B. Received by (Printed Name)

Shirley Choate

C. Date of Delivery

5/13/09

D. Is delivery address different from item 1?

If YES, enter delivery address below: ☐ Yes
☐ No

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

W.T. Probandt
415 W. Wall, Suit 1608
Midland, TX 79701

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5267

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mary Gene Weber Living Trust
P.O. Box 255
Elmer, OK 73539

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5281

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Rosina C. Schutz
22 Brilliant Sky Drive
Santa Fe, NM 87508

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5298

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Dorothy Sumner Corn
2421 Quinton Avenue #105
Lubbock, TX 79710-1734

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5304

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John Halagan
70 Shadowplay
Irvine, CA 92620-4810

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5311

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Hudson New Mexico Minerals Trust
616 Texas Street
Fort Worth, TX 76102-4612

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5328

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Southeast Royalties, Inc.
P.O. 4658
Carlsbad, NM 88221-1658

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5335

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

21

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

John W. Gates, LLC
706 West Grand Avenue
Artesia, NM 88210

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5342

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

22

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Oakland Society for Prevention of Cruelty to Animals
8323 Baldwin Street
Oakland, CA 94609

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5359

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☒ Agent ☐ Address

B. Received by (Printed Name)

Michael D. [Signature] ☒ Date of Delivery *5/14/09*

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☒ Agent ☐ Address

B. Received by (Printed Name)

MARGARET GATES ☒ Date of Delivery *5/11/09*

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☒ Agent ☐ Address

B. Received by (Printed Name)

Kendra Adams ☒ Date of Delivery *5-12-09*

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Children's Hospital Foundation
2201 Broadway FL6
Oakland, CA 94612-3024

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5366

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

24

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Marcia S. Mayfield Revocable Trust
Marcia S. Mayfield Trustee
9398 Viscount Building 5B
El Paso, TX 79925

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5373

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

25

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sieb Resources
P.O. Box 1107
Richmond, TX 77406-1107

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5380

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☐ Address
B. Received by (Printed Name) C. Date of Delivery
5-11-09

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☐ Address
B. Received by (Printed Name) C. Date of Delivery
Juanita Alarcon MAY 12 2009

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] ☐ Agent ☐ Address
B. Received by (Printed Name) C. Date of Delivery
Jim Siebenthal 5/12/09

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

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

J & L Resources
310 Morton Street, Suite 160
Richmond, TX 77469

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5397

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

27

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Gene E. Trowbridge, Jr.
P.O. Box 1169
Saratoga, WY 82331

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5403

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

28

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ann T. Tollefson Revocable Living Trust Dated June 7, 2006
Ann Tollefson Trustee
231 East 10th Street
Casper, WY 82601

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5410

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☐ Agent
- ☐ Address

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

5/12/09

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☐ Agent
- ☐ Address

B. Received by (Printed Name)

SUDIE TROWBRIDGE

C. Date of Delivery

5-14-09

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☐ Agent
- ☒ Address

B. Received by (Printed Name)

Ann Tollefson

C. Date of Delivery

5-13-09

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Connie Fong Dunn
5511 N. Delno
Fresno, CA 93711

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5427

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

30

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mary Hudson Ard
222 West 4th Street PH5
Fort Worth, TX 76102

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5434

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

31

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sol West III
P.O. Box 10120
El Paso, TX 79992

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 7447

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Dunn

C. Date of Delivery

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

5/18/06

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

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

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

MAY 11

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Nora Helen McCaw, Trustee
Of the McCaw Family Trust
210 Crossbow Road
Artesia, NM 88210

2. Article Number
(Transfer from service label)

7007 0710 0000 0857 3133

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102595-02-M-11

33

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Address
X Robert McCaw
- B. Received by (Printed Name) C. Date of Delivery
Robert McCaw 5-11
- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Thomas G. Laros Estate
Dianne D. Laros, Independent Executrix
5711 Stanford Avenue
Dallas, TX 75209

2. Article Number
(Transfer from service label)

7007 0710 0000 0857 3140

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102595-02-M-15

3-

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☐ Address
X Dianne Regan
- B. Received by (Printed Name) C. Date of Delivery
Dianne Regan 5
- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

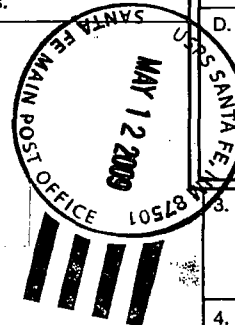
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Joe B. Schutz
P.O. Box 973
Santa Fe, NM 87501



2. Article Number
(Transfer from service label)

7007 0710 0000 0857 3157

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102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Hudson Oil Company of Texas
616 Texas Street
Fort Worth, TX 76102-4612

2. Article Number

(Transfer from service label)

7007 0710 0000 0857 3126

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102595-02-M-11

38

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Laura Collins

☐ Agent
☐ Address

B. Received by (Printed Name)

Laura Collins

C. Date of Delivery

5/13/09

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail
☐ Registered
☐ Insured Mail

☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Agnes Dunigan Independent Executrix
Of the Estate of Joseph L. Dunigan
4024 La Adelita Drive
El Paso, TX 79922-2312

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8476

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Domestic Return Receipt

102595-02-M-11

39

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Patricia A. Martin

☐ Agent
☐ Address

B. Received by (Printed Name)

Patricia A. Martin

C. Date of Delivery

05/13/09

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail
☐ Registered
☐ Insured Mail

☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Sharon K. Clark
P.O. 1469
Edgewood, NM 87015

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8483

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102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Sharon K. Clark

☐ Agent
☐ Address

B. Received by (Printed Name)

VERNON CLARK

C. Date of Delivery

05/13/09

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☐ Certified Mail
☐ Registered
☐ Insured Mail

☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Suzanne L. Simpson
5127 Nassif Court NW
Albuquerque, NM 87129-2174

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8490

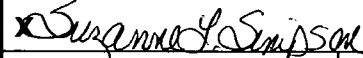
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Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐
- Agent
-
- ☐
- Address

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

- ☐
- Yes
-
- ☐
- No

3. Service Type

- ☐
- Certified Mail
- ☐
- Express Mail
-
- ☐
- Registered
- ☐
- Return Receipt for Merchandise
-
- ☐
- Insured Mail
- ☐
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐
- Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

William M. or Tina M. Sumner
11811 Eagle Rock Avenue NE
Albuquerque, NM 87122

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8506

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Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐
- Agent
-
- ☐
- Address

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

- ☐
- Yes
-
- ☐
- No

3. Service Type

- ☐
- Certified Mail
- ☐
- Express Mail
-
- ☐
- Registered
- ☐
- Return Receipt for Merchandise
-
- ☐
- Insured Mail
- ☐
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐
- Yes

SENDER: COMPLETE THIS SECTION

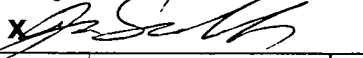
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

United States Department of the Interior
Bureau of Land Management Carlsbad Field Office
620 East Greene Street
Carlsbad, NM 88220-6292

COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐
- Agent
-
- ☐
- Address

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

- ☐
- Yes
-
- ☐
- No

3. Service Type

- ☐
- Certified Mail
- ☐
- Express Mail
-
- ☐
- Registered
- ☐
- Return Receipt for Merchandise
-
- ☐
- Insured Mail
- ☐
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐
- Yes

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8544

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15