

DATE IN: 10-1-09	SUSPENSE	ENGINEER: Egeanyim	LOGGED IN: 10-1-09	TYPE: CTB	PT&W APP NO: 0927450392
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ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
- Engineering Bureau -
1220 South St. Francis Drive, Santa Fe, NM 87505



Yates Petroleum

30-015-21733

Eddy Co

Fed

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 SEO
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.

MAITE REVER
Print or Type Name

M. Reves
Signature

Production Comm 9-25-09
Title Date

CTB-604

mayter@yatespetroleum.com
e-mail Address

District I
1525 N. French Drive, Hobbs, NM 88240
District II
1301 W. Grand Ave, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St Francis Dr, Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-B
Revised June 10, 2003

OIL CONSERVATION DIVISION
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

Submit the original
application to the Santa Fe
office with one copy to the
appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: YATES PETROLEUM CORPORATION
OPERATOR ADDRESS: 105 SOUTH 4TH STREET ARTESIA NM 88210
APPLICATION TYPE:

☐ Pool Commingling ☒ Lease Commingling ☐ Pool and Lease Commingling ☐ Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE: ☒ Fee ☐ State ☐ Federal

Is this an Amendment to existing Order? ☐ Yes ☐ No If "Yes", please include the appropriate Order No. _____
Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
☐ Yes ☐ No

(A) POOL COMMINGLING

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes

- (2) Are any wells producing at top allowances? ☐ Yes ☐ No
(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No.
(4) Measurement type: ☐ Metering ☐ Other (Specify)
(5) Will commingling decrease the value of production? ☐ Yes ☐ No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING

Please attach sheets with the following information

- (1) Pool Name and Code.
(2) Is all production from same source of supply? ☒ Yes ☐ No
(3) Has all interest owners been notified by certified mail of the proposed commingling? ☒ Yes ☐ No
(4) Measurement type: ☒ Metering ☐ Other (Specify)

(C) POOL and LEASE COMMINGLING

Please attach sheets with the following information

- (1) Complete Sections A and E.

(D) OFF-LEASE STORAGE and MEASUREMENT

Please attached sheets with the following information

- (1) Is all production from same source of supply? ☐ Yes ☐ No
(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)

Please attach sheets with the following information

- (1) A schematic diagram of facility, including legal location.
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.
(3) Lease Names, Lease and Well Numbers, and API Numbers.

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

SIGNATURE: Mate Reyes

TITLE: PRODUCTION CLERK

DATE: 9-25-09

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.
30-015-21733

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

Dayton FN #1

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

Yates Petroleum Corporation

3. Address of Operator

105 South Fourth Street, Artesia, NM 88210

4. Well Location

Unit Letter C 990' feet from the North line and 2310' feet from the West line

Section 28

Township 18S

Range 26E

NMPM Eddy

County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETION ☐

OTHER: Surface Commingle Oil only ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Yates Petroleum Corporation respectfully request administrative approval to Surface Commingle Oil Only the following wells.

FEE	FEE	FEE	FEE
Dayton FN #1	Dayton FN #2	Dayton FG #1	Dayton FO #2
Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E
Atoka/San Andres	Atoka/San Andres	Atoka/San Andres	Atoka/San Andres
Eddy County, NM	Eddy County, NM	Eddy County, NM	Eddy County, NM
API# 30-015-21733	API# 30-015-28878	API# 30-015-21721	API# 30-015-22331

W code
03610

The Battery is located at Section 28-18S-26E. Please see attached map and site facility diagram.

Owners were notified.

Each of these wells shall be equipped with continuous metering separators for oil production prior to oil being commingled for sales. The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production. Estimated daily production for the Dayton FN #1 is 0-3 bls of oil per day, for the Dayton FN #2 is 0-3 bls of oil per day, for the Dayton FG #1 is 0-2 bls of oil per day, and for the Dayton FO #2 if 0-3 bls of oil per day.

The purpose of the surface commingling is to reduce operating costs for storage and treating. Due to the age of some of this equipment and a battery failure on one of these leases, Yates would like to utilize only one of the existing batteries for these marginal producing wells.

The proposed commingling is necessary for economic operation of the above referenced leases.

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

SIGNATURE Mayte Reyes TITLE Production Secretary DATE September 25, 2009

Type or print name Mayte Reyes Telephone No. (505) 748-4213

(This space for State use)

APPROVED BY _____ TITLE _____ DATE _____

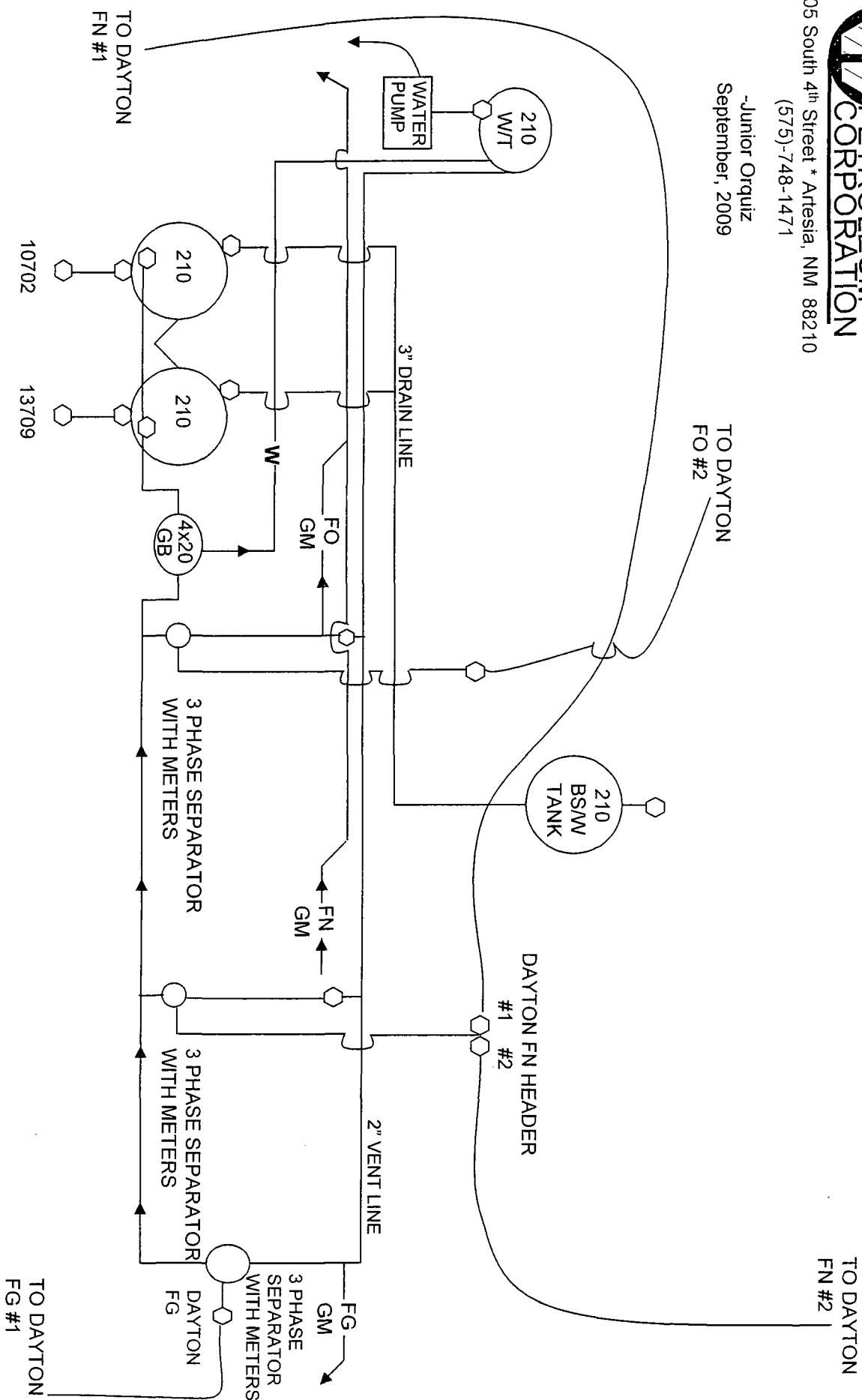
Conditions of approval, if any:



DAYTON BATTERY

105 South 4th Street * Artesia, NM 88210
(575)-748-1471

-Junior Orquiza
September, 2009



This diagram is subject to the Yates Petroleum Corporation August 1983 Security Plan
which is on file at 105 South 4th Street, Artesia, NM

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-015-22331		2 Pool Code 03610		3 Pool Name Atoka San Andres	
4 Property Code 012185		5 Property Name Dayton FO			6 Well Number 2
7 OGRID No. 025575		8 Operator Name Yates Petroleum Corporation			9 Elevation 3408' GR

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	28	18S	26E		1650	North	1650	West	Eddy

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 40	13 Joint or Infill	14 Consolidation Code	15 Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16 	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief. Signature Rusty Klein Printed Name Production Clerk Title August 9, 1995 Date
	18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. REFER TO ORIGINAL PLAT Date of Survey Signature and Seal of Professional Surveyor:
	Certificate Number

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

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

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

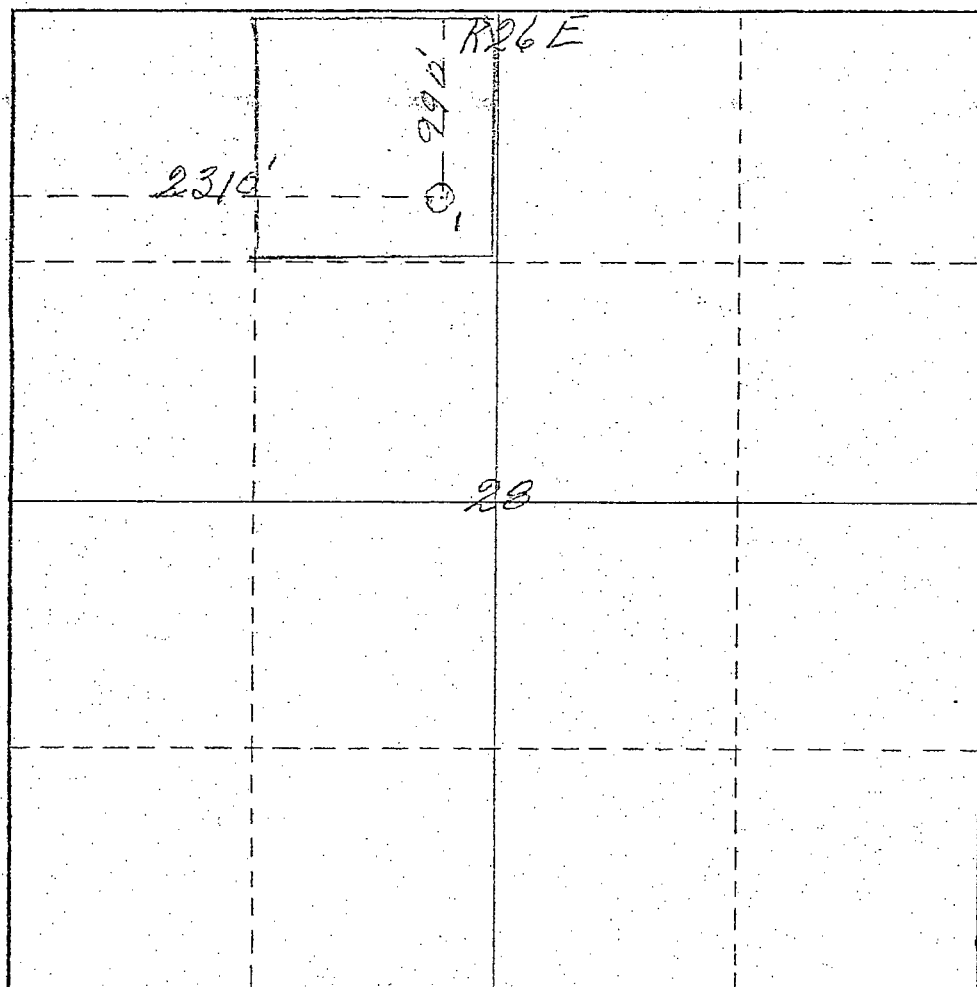
Operator <i>Yates Petroleum Corp.</i>		Lease <i>Dayton FN</i>		Well No. <i>1</i>	
Unit Letter <i>C</i>	Section <i>28</i>	Township <i>18 South</i>	Range <i>26 East</i>	County <i>Eddy</i>	
Actual Footage Location of Well: <i>990</i> feet from the <i>North</i> line and <i>2310</i> feet from the <i>West</i> line.					
Ground Level Elev. <i>3404</i>	Producing Formation <i>San Andres</i>		Pool <i>Atoka (S.A.)</i>	Dedicated Acreage: <i>40</i> 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 communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

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.



CERTIFICATION

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

Eddie M. Mahfood
Name

Eddie M. Mahfood

Position
Engineer

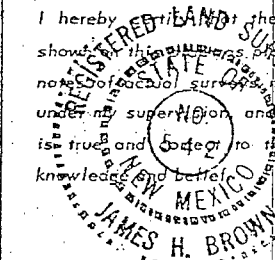
Company

Yates Petroleum Corp.

Date

2-5-76

I hereby certify that the well location shown on this plat was derived 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

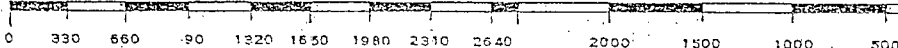
February 3rd 1976

Registered Professional Engineer and/or Land Surveyor

James H. Brown

Certificate No.

542



District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-102
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-015-28878		2 Pool Code 3610		3 Pool Name Atoka, San Andres	
4 Property Code		5 Property Name DAYTON FN			6 Well Number 2
7 OGRID No. 025575		8 Operator Name YATES PETROLEUM CORPORATION			9 Elevation 3406.

10 Surface Location

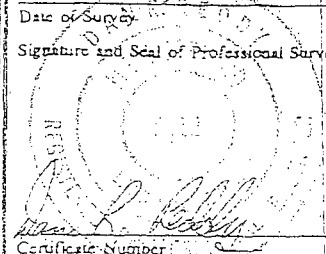
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	28	18-S	26-E		330	NORTH	1650	WEST	EDDY

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 40	13 Joint or Infill	14 Consolidation Code	15 Order No.
--------------------------	--------------------	-----------------------	--------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16	1650'	330'	FEET			17 OPERATOR CERTIFICATION	
						I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
						Signature <i>Ken Beardemph</i>	
						Printed Name Ken Beardemph	
						Title Landman	
						Date 3-15-1996	
						18 SURVEYOR CERTIFICATION	
						I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.	
						MARCH 2, 1996	
						Date of Survey	
						Signature and Seal of Professional Surveyor:	
							
						Certificate Number NM PE&PS NO. 5412	

NF EXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

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

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

Operator <i>Yates Petroleum Corp.</i>		Lease <i>Dayton Township "F"</i>		Well No. <i>1</i>
Unit Letter <i>B</i>	Section <i>28</i>	Township <i>18 South</i>	Range <i>26 East</i>	County <i>Eddy</i>
Actual Postage Location of Well: <i>450</i> feet from the <i>North</i> line and <i>2310</i> feet from the <i>East</i> line				
Ground Level Elev. <i>3392</i>	Producing Formation <i>San Andres</i>	Pool <i>Atoka S.A.</i>	Dedicated Acreage: <i>70</i> 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 communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

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.

CERTIFICATION

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

Eddie M. Mahfood
Name
Eddie M. Mahfood
Position
Engineer
Company
Yates Petroleum Corp.
Date
1-14-76

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.

JAMES H. BROWN

Date Surveyed
January 10th 1976
Registered Professional Engineer and/or Land Surveyor
James H. Brown
Certificate No. *542*

MARTIN YATES, III
1912-1985

FRANK W. YATES
1936-1986

S.P. YATES
1914-2008



105 SOUTH FOURTH STREET
ARTESIA, NEW MEXICO 88210-2118
TELEPHONE (575) 748-1471

JOHN A. YATES
CHAIRMAN OF THE BOARD
PRESIDENT

JOHN A. YATES JR.
ASSISTANT TO THE PRESIDENT

JAMES S. BROWN
CHIEF OPERATING OFFICER

JOHN D. PERINI
CHIEF FINANCIAL OFFICER

September 25, 2009

To Whom It May Concern:

Re: Surface Commingle Oil Only
Eddy County, New Mexico

Dear Interest Owner:

Yates Petroleum Corporation is requesting administrative approval from the Oil Conservation Division to Surface Commingle Oil only the following wells.

FEE	FEE	FEE	FEE
Dayton FN #1	Dayton FN #2	Dayton FG #1	Dayton FO #2
Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E
Atoka/San Andres	Atoka/San Andres	Atoka/San Andres	Atoka/San Andres
Eddy County, NM	Eddy County, NM	Eddy County, NM	Eddy County, NM
API# 30-015-21733	API# 30-015-28878	API# 30-015-21721	API# 30-015-22331

Each of these wells shall be equipped with continuous metering separators for oil production prior to oil being commingled for sales. The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production.

The proposed commingling is necessary for economic operation of the above referenced leases.

The purpose of the surface commingling is to reduce operating costs for storage and treating. Due to the age of some of this equipment and a battery failure on one of these leases, Yates would like to utilize only one of the existing batteries for these marginal producing wells.

Any objection must be filed in writing with the Oil Conservation Division in Santa Fe within 20 days from the date the division received the application. Application will be sent in conjunction with notification to owners.

If you should have any questions, please give me a call at (505) 748-4213 (direct line).

Sincerely,

Mayte Reyes
Production Clerk

I hereby approve this application

Company: Yates Petroleum Corporation.

KATHY H. PORTER
SECRETARY

DENNIS G. KINSEY
TREASURER

MARTIN YATES, III
1912-1985

FRANK W. YATES
1936-1986

S.P. YATES
1914-2008



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ARTESIA, NEW MEXICO 88210-2118
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September 25, 2009

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Eddy County, New Mexico

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Yates Petroleum Corporation is requesting administrative approval from the Oil Conservation Division to Surface Commingle Oil only the following wells.

FEE	FEE	FEE	FEE
Dayton FN #1	Dayton FN #2	Dayton FG #1	Dayton FO #2
Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E
Atoka/San Andres	Atoka/San Andres	Atoka/San Andres	Atoka/San Andres
Eddy County, NM	Eddy County, NM	Eddy County, NM	Eddy County, NM
API# 30-015-21733	API# 30-015-28878	API# 30-015-21721	API# 30-015-22331

Each of these wells shall be equipped with continuous metering separators for oil production prior to oil being commingled for sales. The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production.

The proposed commingling is necessary for economic operation of the above referenced leases.

The purpose of the surface commingling is to reduce operating costs for storage and treating. Due to the age of some of this equipment and a battery failure on one of these leases, Yates would like to utilize only one of the existing batteries for these marginal producing wells.

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If you should have any questions, please give me a call at (575) 748-4213 (direct line).

Sincerely,

Mayte Reyes
Production Clerk

I hereby approve this application

Company: MYCO Industries, Inc.

MARTIN YATES, III
1912-1985

FRANK W. YATES
1936-1986

S.P. YATES
1914-2008



105 SOUTH FOURTH STREET
ARTESIA, NEW MEXICO 88210-2118
TELEPHONE (575) 748-1471

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JOHN A. YATES JR.
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September 25, 2009

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Eddy County, New Mexico

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FEE	FEE	FEE	FEE
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Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E	Sec-28-18S-26E
Atoka/San Andres	Atoka/San Andres	Atoka/San Andres	Atoka/San Andres
Eddy County, NM	Eddy County, NM	Eddy County, NM	Eddy County, NM
API# 30-015-21733	API# 30-015-28878	API# 30-015-21721	API# 30-015-22331

Each of these wells shall be equipped with continuous metering separators for oil production prior to oil being commingled for sales. The proposed commingling of production is in the interest of conservation and will not result in reduced royalty or improper measurement of production.

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If you should have any questions, please give me a call at (505) 748-4213 (direct line).

Sincerely,

Mayte Reyes
Production Clerk

I hereby approve this application

Company: ABO Petroleum Corporation.

KATHY H. PORTER
SECRETARY

DENNIS G. KINSEY
TREASURER

MARTIN YATES, III
1912-1985

FRANK W. YATES
1936-1986

S.P. YATES
1914-2008



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September 25, 2009

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Dear Interest Owner:

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Sincerely,

Mayte Reyes
Production Clerk

I hereby approve this application

Company: Yates Drilling Company.

MARTIN YATES, III

1912-1985

FRANK W. YATES

1936-1986

S.P. YATES

1914-2008



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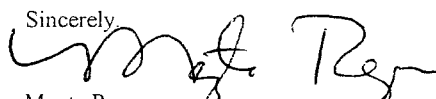
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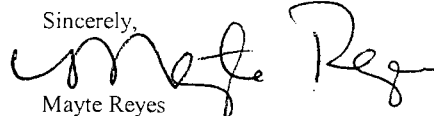
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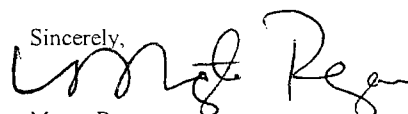
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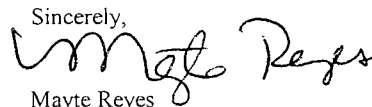
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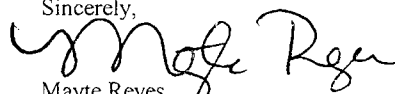
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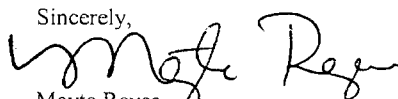
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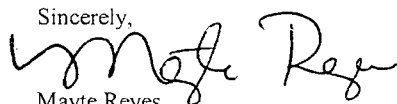
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FRANK W. YATES

1936-1986

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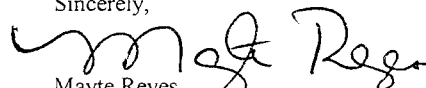
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UNITED STATES POSTAL SERVICE
FIRST CLASS PERMIT NO. 1000
CHICAGO, ILL. 60601

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:

White Terry A. & Carla K.
1302 West Third St.
Chanute, KS 66720

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery

Fee) ☐ Yes

Article Number
(Transfer from serv) 7008 1830 0001 4119 5598
S Form 3811, February 2004 Domestic Return Receipt

Certified Mail

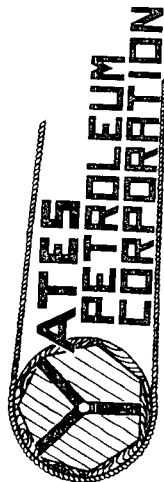
- A mailing receipt
- A unique identifier
- A record of delivery

Important Restrictions

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, postage
- For an additional delivery, To Receipt (PS Form 3811) fee. Endorsement a duplicate required.
- For an addressee endorsement
- If a postmark is at the receipt is

IMPORTANT:
PS Form 3800

102595-02-M-1540



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5598
7008 1830 0001 4119 5598

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

Dayton FN #1 & #2, Dayton FG
Dayton FO #2. Surface Comm
Oil Conservation Division/Santa Fe Off
September 28, 2009
Mayte Reyes-Production
Restricted Delivery Fee
(Endorsement Required)

Total F

Sent To
Street, A
or PO Box
City, State

White Terry A. & Carla K.
1302 West Third St.
Chanute, KS 66720

PS Form 3800, August 2006 See Reverse for

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:

Porter, Alan Charles
1805 Rio Grande
Las Cruces, NM 88001

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number **7008 1830 0001 4119 5581**
(Transfer from service)

Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

Certified Mail

- ☒ A mailing receipt
- ☒ A unique identification number
- ☒ A record of delivery

Important Restrictions

- ☒ Certified Mail
- ☒ Certified Mail
- ☒ NO INSURANCE for valuables.
- ☒ For an addressee's delivery. To Receipt (PS Form 3811, fee. Endorsement a duplicate required.
- ☒ For an addressee's endorsement.
- ☒ If a postmark is at the receipt is required.

IMPORTANT

PS Form 3800.



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5581
7008 1830 0001 4119 5581

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #
Dayton FO #2. Surface Commingl
Oil Conservation Division/Santa Fe Office
September 28, 2009

(End) Mayte Reyes-Production

Restricted Delivery Fee
(Endorsement Required)

Total Porter, Alan Charles

Sent To 1805 Rio Grande

Street, or PO Las Cruces, NM 88001

City, St.

PS Form 3800, August 2005

See Reverse for

Porter
1805 R
Las Cr

SENDER: COMPLETE THIS SECTION

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

Mailpiece Addressed to:

von Energy/ Product
P.O. Box #843559
Dallas, TX 75284-3559

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Number of Pieces from service **7008 1830 0003 4119 5574**

3811, February 2004

Domestic Return Receipt

102595-02-M-1540

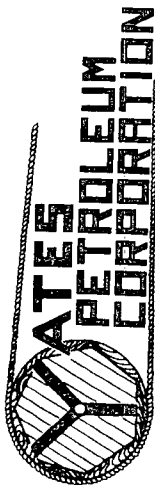
Certified Mail

- A mailing receipt
- A unique identification number
- A record of delivery

Important Restrictions

- Certified Mail cannot be used for delivery of perishable, flammable, explosive, or hazardous materials.
- NO INSURANCE for valuables, postage, or other items.
- For an additional delivery. To receive a Return Receipt (PS Form 3800), a duplicate must be required.
- For an addressee's endorsement.
- If a postmark is placed at the time of receipt is not required.

IMPORTANT:
PS Form 3800, 10-2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5574
7008 1830 0001 4119 5574

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
(E) Mayte Reves-Production
Restricted Delivery Fee
(Endorsement Required)

To: Devon Energy Product
P.O. Box #843559
Dallas, TX 75284-3559

Sent
Street
or P.O.
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

Devon Energy
P.O. Box #843559
Dallas, TX 75284-3559

SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Write your name and address on the reverse of this card to the back of the mailpiece, the front if space permits.

Addressed to:

Ms. Dorothy S.
Craig Hauschildt
2000 Dale Avenue Ste 400
74135

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery

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

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

Invoice # 7008 1830 0001 4119 5567

February 2004 Domestic Return Receipt

102595-02-44-1540

Certified Mail Pro

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail must be paid for
- Certified Mail is not insurable
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain Receipt (PS Form 3800, April 2004) fee. Endorsement required.
- For an additional addressee's endorsement.
- If a postmark is not clear at the post office, a receipt is not required.

IMPORTANT:
PS Form 3800, April 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED



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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reves-Production

Restricted Delivery Fee
(Endorse)

Total Harroun, Dorothy S.
Attn: Craig Hauschildt
5110 S Yale Avenue Ste 400
Tulsa, OK 74135

PS Form 3800, August 2006 See Reverse for Instructions

7008 1830 0001 4119 5567
7008 1830 0001 4119 5567

Harroun
Attn: C
5110 S
Tulsa, C

- 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:

Glass, Janette Wolf
847 Ratliff
Shreveport, LA 71104

2. Article Number

(Transfer from sent)

7006 1630 0001 4119 5550

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

A. Signature

X

☐ Agent
☐ Addressee

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

Certified Mail

- A mailing receipt
- A unique identification number
- A record of delivery

Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain Receipt (PS Form 3811), a duplicate receipt is required.
- For an additional addressee's endorsement
- If a postmark is placed at the post office, receipt is not required.

IMPORTANT:
PS Form 3800, August 2003

7008 1830 0001 4119 5550
7008 1830 0001 4119 5550

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

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

Dayton FN #1 & #2, Dayton FG
Dayton FO #2. Surface Commi
Oil Conservation Division/Santa Fe O
September 28, 2009

(L) Mavte Reves-Production

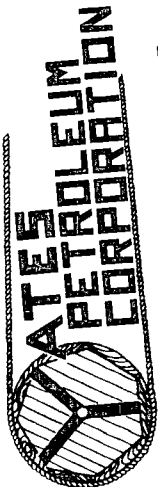
Restricted Delivery Fee
(Endorse)

Total: Glass, Janette Wolf

Sent To 847 Ratliff
Street, Shreveport, LA 71104
or PO
City, State, ZIP

PS Form 3800, August 2006

Glass, Janette Wolf
847 Ratliff
Shreveport, LA



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

1. Article Addressed to:

- 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:

Higgins, Trust, Inc
P.O. Box #6905
Thomasville, GA 31758-6905

2. Service Type

A. Signature		<input type="checkbox"/> Agent
<input checked="" type="checkbox"/>		<input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type		
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee)		<input type="checkbox"/> Yes

Article Number 7008 1830 0001 4119 5543
Transfer from service

Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

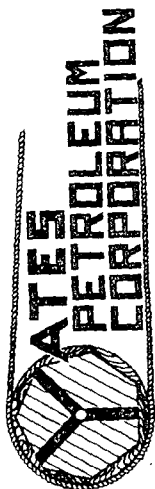
Important Reminders

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain a Receipt (PS Form 3811), fee. Endorse a duplicate if required.
- For an addressee's endorsement
- If a postmark is at the place of receipt is not

IMPORTANT: PS Form 3800, A



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5543
7008 1830 0001 4119 5543

U.S. Postal Service
CERTIFIED MAIL REC
(Domestic Mail Only; No Insurance Co

For delivery information visit our website at

Dayton FN #1 & #2, Dayton
Dayton FO #2. Surface Com
Oil Conservation Division/Santa Fe
September 28, 2009

(E) Mayte Reyes-Production

Restrictor Delivery Fee
(End

To Higgins, trust, Inc

Sen P.O. Box #6905

Str Thomasville, GA 31758-6901

or F

City, State, ZIP+4

PS Form 3800, August 2006

See

H P H

A. Signature **X**

B. Receipts

D. Is delinquent

Delivery address different from above? ☐ YES, enter below: _____

C. Date of Delivery: _____

...ness below:

☐ Yes

☐ No

☐ Agent
☐ Address
Date of Delivery
☐ Yes
☐ No

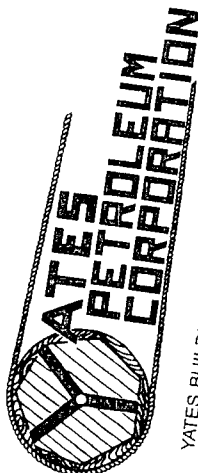
- | | |
|------------------------------------|--|
| <input type="checkbox"/> Agent | |
| <input type="checkbox"/> Addressee | |
| Date of Delivery | |
| Yes | |
| No | |

<input type="checkbox"/> Agent	
<input type="checkbox"/> Addressee	
Date of Delivery	
Yes	
No	

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Agent | |
| <input type="checkbox"/> Addressee | |
| Date of Delivery | |
| Yes | |
| No | |

<input type="checkbox"/> Agent	
<input type="checkbox"/> Addressee	
Date of Delivery	
Yes	
No	

102595-02-M-154



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

REGISTERED MAIL

U.S. Postal Service
CERTIFIED MAIL RE
(Domestic Mail Only; No Insurance)

For
Dayton FN #1 & #2, Dayton
Dayton FO #2. Surface Co
Oil Conservation Division/Santa
September 28, 2009
Mayte Reyes-Production

Return to
(Endorsement Required)
Restricted Delivery Fee
(Endorser)

Total P

Sent To
Hoover, David Earl
5926 N.E. Alton Street
Portland, OR 97213

Street, or PO B.
City, State, ZIP

PS Form 3800, August 2006

See Reverse

7008 1830 0001 4119 5536
7008 1830 0001 4119 5536

**INTELLUM
CORPORATION**

105 SOUTH FOURTH ST.
/ MEXICO 88210-2118

COPIES REQUESTED

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reves-Production

Restricted Delivery Fee
(Endorsement Required)

Total

Sent To: Kent, Homer A. Jr.
305 6th Street
Winona Lake, IN 46590

City, St.

PS Form 3800, August 2006

See Reverse for Instructions

mark
are

7008 1830 0001 4119 5529
7008 1830 0001 4119 5529



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:

Kent, Homer A. Jr.
305 6th Street
Winona Lake, IN 46590

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type	
<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merch
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Article Number 7008 1630 0001 4119 5529

Domestic Return Receipt

ATES PETROLEUM CORPORATION

BUILDING - 105 SOUTH FOURTH ST.
SIA, NEW MEXICO 88210-2118

LESS SERVICE REQUESTED

Kent,
16644
Buena

U.S. Postal Service
CERTIFIED MAIL
RECEIPT
(Domestic Mail Only. No Insurance/Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Res. Mayte Reyes-Production
(Endorsement Required)

Total Postage

Sent to Kent, Wendell E.
Street, Apt. No. 16644 CR 369
City, State, Zip Buena Vista, CO 81211

PS Form 3800, August 2009 See Reverse for Instructions

7008 1830 0001 4119 5512
7008 1830 0001 4119 5512

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:

Kent, Wendell E.
16644 CR 369
Buena Vista, CO 81211

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

3.7 ~~Service Type~~

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

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

2. Article Number
(Transfer from sen

7008 1830 0001 4119 5512

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540;

Gifted Mail meaning recording of a unique identifier for the returned item. **Priority Return** certified Mail[®] or Registered Mail[®] with return receipt. **Insurable** items, plus an additional \$5.00 shipping, to obtain a receipt (PS Form 3800, Aug 2013)

SS SERVICE REQUESTED

LDING - 105 SOUTH FOURTH ST.
1A, NEW MEXICO 88210-2118

444444

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Endorsement Required)
Restricted Delivery Fee
Total Postage & Fees

Sent To
Pinnell, Virginia M.
209 N. Camino Del Varonil
Gren Valley, AZ 85614-3208
City, State, ZIP
or PO Box No.
PS Form 3800

7008 1630 0001 4119 5505
7008 1630 0001 4119 5505

See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Pinnell, Virginia M.
209 N. Camino Del Varonil
Green Valley, AZ 85614-3208

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

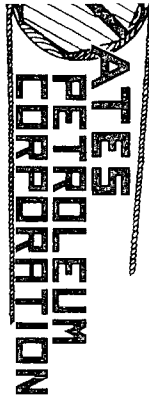
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5505
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



3 BUILDING - 105 SOUTH FOURTH ST.
ATESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

VERIFIED MAIL

7008 1A30 0001 4119 5499
7008 1A30 0001 4119 5499

U.S. Postal Service TM	
CERTIFIED MAIL TM RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	(E) Mayte Reyes-Production Mayte Reyes-Production (Endorsement Required)
Total	
Sent	City
Pope, Nancy Gayle	Clovis, NM 88101
108 Tanning Way	or PO
108	City
Pope	City
Clovis	City
PS Form 3800, August 2006	
See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Pope, Nancy Gayle
108 Tanning Way
Clovis, NM 88101

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

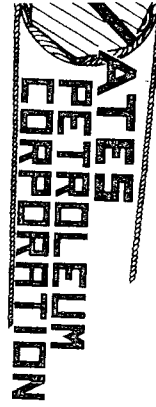
7008 1830 0001 4119 5499

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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



S BUILDING - 105 SOUTH FOURTH ST.
ATESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

VERIFIED MAIL

7008 1830 0001 4119 5482
7008 1830 0001 4119 5482

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
En Mayte Reyes-Production
(Endorsement Required)

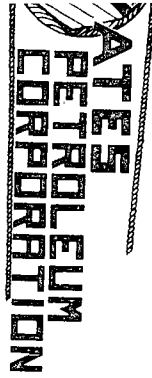
To: Rowland, Jimmie & Nellie
C/O Roby Rowland
709 Tierra Del Sol, Apt C
City: Carlsbad, NM 88220-3889

PS Form 3800 August 2006[®] See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<div><input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</div> <div><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</div> <div><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</div>		<div>A. Signature X<div><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</div></div> <div>B. Received by (Printed Name)<div>C. Date of Delivery</div></div> <div>D. Is delivery address different from item 1? If YES, enter delivery address below:<div><input type="checkbox"/> Yes <input type="checkbox"/> No</div></div>	
1. Article Addressed to: Rowland, Jimmie & Nellie C/O Roby Rowland 709 Tierra Del Sol, Apt C Carlsbad, NM 88220-3889		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from) 7008 1830 0001 4119 5482		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		102595-02-M-1540	

ed Mail
ailing receiv
nique identi
record of deli
tant Remin
tified Mail n
tified Mail is
INSURAN
ables, plea
an addition
ivery. To obt
ceipt (PS Fo
Endorse m
uplicate ret
lured.
an additi
dressee's ad
dorsement
a postmark
at the pos
ceipt is not
ORTANT: S
m 3800, Aug



UILDING - 105 SOUTH FOURTH ST.
ESIA, NEW MEXICO 88210-2118

RESS SERVICE REQUESTED

Silva,
1666
San L

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009
(En)	Mayte Reyes-Production
(Endorsement Required)	Restricted Delivery Fee
Total -	
Sent	Silva, Cathy Jo
Site or Pk	1666 Colina CT.
City	San Luis Obispo, CA 93401
PS Form 3800, January 2006 See Reverse for Instructions	

102595-02-M-1540

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Silva, Cathy Jo
1666 Colina CT.
San Luis Obispo, CA 93401

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from servk)

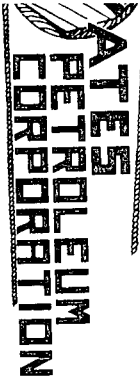
7008 1830 0001 4119 5475

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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BUILDING - 105 SOUTH FOURTH ST.
TESIA, NEW MEXICO 88210-2118

DRESS SERVICE REQUESTED

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
(Er) Mayle Reyes-Production
Restricted Delivery Fee
(Endorsement Required)

Total \$
Sent To Thompson, Dorothy Hoover
Street 15 Broad St. Apt 242
City, S. Van Luis Obispo, CA 93405-1768

PS Form 3800, August 2006 See Reverse for Instructions

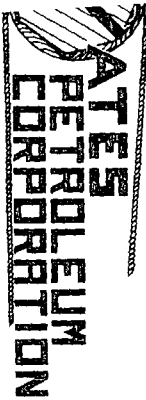
7008 1830 0001 4119 5468
7008 1830 0001 4119 5468

STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD ALONG DOTTED LINE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Thompson, Dorothy Hoover 55 Broad St. Apt 242 San Luis Obispo, CA 93405-1768</p> <p>2. Article Number (Transfer from service)</p> <p>7008 1830 0001 4119 5468</p> <p>PS Form 3811, February 2004</p>		<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent</p> <p><input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail</p> <p><input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee)</p> <p><input type="checkbox"/> Yes</p>	

Certified Mail
A mailing receipt
A unique identifier
A record of delivery
Important Reminder
Certified Mail
Certified Mail
NO INSURANCE
For an additional
delivery. To obtain
Receipt (PS Form
fee. Endorsement
a duplicate receipt
required.
For an addressee's
endorsement
If a postmaster
clears at the
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S Form 3800

102595-02-M-1540



BUILDING - 106 SOUTH FOURTH ST.
 ITESIA, NEW MEXICO 88210-2118

DRESS SERVICE REQUESTED

GALELLI WALL

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)		For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production		(Endorsement Required) Restricted Delivery Fee	
Total		7008 1830 0001 4119 5444	
Sent to: Welborn, Annie C. Hoover 4031 Bayberry Street Chino Hills, CA 91709		7008 1830 0001 4119 5444	
City or PO: Chino Hills, CA 91709		PS Form 3800, August 2009	

Welborn
 4031 B
 Chino Hills

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</p> <p>Welborn, Annie C. Hoover 4031 Bayberry Street Chino Hills, CA 91709</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
		<p>B. Received by (Printed Name) C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7008 1830 0001 4119 5444</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	
		<p>102595-02-M-1540</p>	

1. Article Addressed to:
Welborn, Annie C. Hoover
4031 Bayberry Street
Chino Hills, CA 91709

2. Article Number
(Transfer from service label)
7008 1830 0001 4119 5444

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

4. Restricted Delivery? (Extra Fee)
☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



ES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

White
1703
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U.S. Postal Service™			
CERTIFIED MAIL™ RECEIPT			
<small>(Domestic Mail Only. No Insurance Coverage Provided)</small>			
<small>For delivery information, visit our website at www.usps.com</small>			
OFFICIAL USE			
Postage	\$		
Certified Fee			
Return Receipt Fee			
<small>(Endorsement Required)</small>			
Restricted Delivery Fee			
<small>(Endorsement Required)</small>			
To			
Send	Street	City	PS Form 3800, August 2006
White, Jack H. and Frankie M.			
1703 Watson CT.			
Carlsbad, NM 88220			
<small>See Reverse for Instructions</small>			

7008 1830 0001 4129 5451
7008 1830 0001 4129 5451

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AND TAPED LINE.

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<div>1. Article Addressed to: White, Jack H. and Frankie M. 1703 Watson CT. Carlsbad, NM 88220</div>		A. Signature X	<div><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</div>
<div>2. 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.</div>		B. Received by (Printed Name)	C. Date of Delivery
<div>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.</div>		<div>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
<div>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</div>			
<div>2. Article Number (Transfer from service lat) 7008 1830 0001 4119 5451</div>			
<div>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</div>			

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



BUILDING - 105 SOUTH FOURTH ST.
ESIA, NEW MEXICO 88210-2118

LESS SERVICE REQUESTED

7008 1830 0001 4119 5437
7008 1830 0001 4119 5437

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

For
Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Endorsement Required)
Restricted Delivery Fee

Wolf, D. William
1410 Simpson Drive
Roswell, NM 88201

PS Form 3800, August 2006
See Reverse for Instructions

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

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:

Wolf, D. William
1410 Simpson Drive
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature X		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee)		<input type="checkbox"/> Yes

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 5437

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



BUILDING - 105 SOUTH FOURTH ST.
ESIA, NEW MEXICO 88210-2118

RESS SERVICE REQUESTED

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)

Total: 7008 1830 0001 4119 5406

Sent To: Wolf, Donald M.
Street: 1 East Kike Street
City, St: Chevy Chase, MD 20815

PS Form 3800, August 2006
See Reverse for Instructions

OF THE RETURN ADDRESS FOLD AT DOTTED LINE

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:

Wolf, Donald M.
1 East Kirke Street
Chevy Chase, MD 20815

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service)

7006 1830 0001 4117 5406

PS Form 3811, February 2004

Domestic Return Receipt

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YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5116
7008 1830 0001 4119 5116

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

For ☐ Dayton FN #1 & #2, Day
Dayton FO #2. Surface C
Oil Conservation Division/San
September 28, 2009
Mayte Reyes-Production
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Kerling, Pamela R.
Sent To 3040 June Meadows Rd
Street or PO Reno, NV 89519-8316
City, State, ZIP+4

PS Form 3800, August 2006

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SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Kerling, Pamela R.
3040 June Meadows Rd
Reno, NV 89519-8316

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number (Transfer from service label) 7008 1830 0001 4119 5116

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL™

7008 1830 0001 4119 5123
7008 1830 0001 4119 5123

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**

For delivery to: Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production

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

Postmark
Here

Sent To
Hunt, Wanda
Street, Apt. or PO Box 20194 Broad Run Rd.
City, State Sterling, VA 20165

PS Form 38

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:

Hunt, Wanda
20194 Broad Run Rd.
Sterling, VA 20165

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ ☐ Agent
☐ Addressee

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

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from seal) 7008 1830 0001 4119 5123

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery. To obtain Receipt (PS Form 3811), fee. Endorsement a duplicate receipt is required.
- ☐ For an additional addressee's endorsement
- ☐ If a postmark is placed at the post office, receipt is not required.

IMPORTANT: Send to

PS Form 3800, August 2003



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<div>1. Article Addressed to: Hendrix, Christine A 17319 E Teal Dr Fountain Hills, AZ 85268</div>		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
<div>2. Article Number (Transfer from service) 7006 1830 0001 4119 5130</div>		B. Received by (Printed Name)	C. Date of Delivery
<div>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.</div>		<div>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
<div>5. Is delivery address different from item 1? If YES, enter delivery address below:</div>		<div>6. Is delivery address different from item 1? If YES, enter delivery address below:</div>	
PS Form 3811, February 2004		Domestic Return Receipt	
102595-02-M-1540			

Article
Number
7006 1830 0001 4119 5130
Certified Mail
Domestic Return Receipt
PS Form 3811, February 2004
102595-02-M-1540

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

For delivery to:
 Dayton FN #1 & #2, Dayton FG #1,
 Dayton FO #2, Surface Commingle
 Oil Conservation Division/Santa Fe Office
 September 28, 2009

Mayte Reyes-Production

Postmark
 Here

Return receipt fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)

Total Postage

7008 1A30 0001 4119 5130
 7008 1A30 0001 4119 5130

Sent To: Hendrix, Christine A
 17319 E Teal Dr
 Fountain Hills, AZ 85268

Street, Apt. 1
 or PO Box A
 City, State, ZIP

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ONS

- 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:

Hendrix, Webb
C/O Christine Hendrix
17319 E Teal Dr
Fountain Hills, AZ 85268

2. Article Number
(Transfer from service label)

7008 1630 0001 4119 5147

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

X

☐ Agent
☐ Addressee

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

Certified Mail Pro

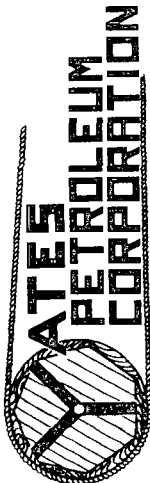
- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail may
- ☐ Certified Mail is not
- ☐ NO INSURANCE on valuables, please
- ☐ For an additional delivery. To obtain Receipt (PS Form 3811), fee. Endorse mail a duplicate return required.
- ☐ For an additional addressee's endorsement.
- ☐ If a postmark or date at the post receipt is not required.

IMPORTANT SA
PS Form 3800, August 2003

CERTIFIED MAIL



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only - No International)	
For	Dayton FN #1 & #2, Dayton Dayton FO #2. Surface Co Oil Conservation Division/Santa September 28, 2009 Mayte Reyes-Production
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To	Hendrix, Webb C/O Christine Hendrix 17319 E Teal Dr Fountain Hills, AZ 85268
Street, Apt or PO Box	
City, State	
PS Form 3800, August 2006	

PETROLEUM CORPORATION

DING -- 105 SOUTH FOURTH ST.
A. NEW MEXICO 88210-2118

ISS SERVICE REQUESTED

U.S. Postal Service		CERTIFIED MAIL		RECEIPT	
(Domestic Mail Only. No Insurance Coverage Provided)					
For delivery information visit our website at www.usps.com					
Dayton FN #1 & #2, Dayton FG #1,		Dayton FO #2, Surface Commingle		Oil Conservation Division/Santa Fe Office	
September 28, 2009		Mayte Reyes-Production		(Endorsement Required)	
Restricted Delivery Fee		Endorsement Required		Total P	
7008 1830 0001 4119 5154		7008 1830 0001 4119 5154		7008 1830 0001 4119 5154	
Sent To		Harroun, D. Stuart		7020 Edith, N.E.	
Street, A		Albuquerque, NM 87113		City, Sta	
or PO Box					
PS Form 3800, August 2006					

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Harroun, D. Stuart
7020 Edith, N.E.
Albuquerque, NM 87113

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X ☐ Addressee

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

2. Article Number
(Transfer from ser)

7008 1830 0001 4119 5154

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

TES PETROLEUM CORPORATION

3 - 105 SOUTH FOURTH ST.
EL PASO, TEXAS 79901-2118

SERVICE REQUESTED

U.S. Postal Service™		CERTIFIED MAIL™ RECEIPT		(Domestic Mail Only)		For	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production							
Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		Total		Sent To	
						Harris, Celenia	
						1402 Meadow Drive	
						Round Rock, TX 78681	
						City, S	
						Street, or PO	
						PS Form 3800, August 2006	

Postmark Here

7008 1830 0001 4119 5161
7008 1830 0001 4119 5161

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. HOLD AT DOTTED LINE.

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:

Harris, Celenia
1402 Meadow Drive
Round Rock, TX 78681

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

7008 1830 0001 4119 5161

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PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

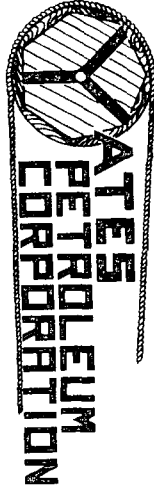
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ES STROLEUM CORPORATION

- 105 SOUTH FOURTH ST.
W MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle c Oil Conservation Division/Santa Fe Office September 28, 2009 Return to: (Endorsement) Mavte Reves-Production (Restricted Delivery Fee) <input type="checkbox"/>	
Total Postage	
7008 1830 0001 4119 5192	7008 1830 0001 4119 5192
Sent To: Gushwa, Zane Street, Apt. or PO Box: 2448 S. Roosevelt Rd Y City, State: Elida, NM 88116	



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
For delivery to: Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Rel. MAYTE Reves-Production (Endorsement Required)	
Total Payment: Hansen, Jeanette Saddle Creek Apts. 10801 Old Manchaca Rd. Apt #503 Austin, TX 78748 PS Form 3800, 2009 See Reverse for Instructions	
7008 1830 0001 4119 5178	7008 1830 0001 4119 5178

FOR THE RETURN ADDRESS, FOLD ALONG THIS LINE
CERTIFIED MAIL

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:

Hansen, Jeanette
Saddle Creek Apts.
10801 Old Manchaca Rd.
Apt #503
Austin, TX 78748

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Num 7008 1830 0001 4119
(Transfer from outer envelope)

TESS PETROLEUM CORPORATION

G - 105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service CERTIFIED MAIL - RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office Centil September 28, 2009	
Return Rec. (Endorsement Required)	Restricted Delivery Fee (Endorsement Required)
Total:	
Sent To Gushwa, Roy Dale 1916A E US Highway 80 Mineola, TX 75773-5078	City, State or PO Box
PS Form 3800, August 2006 See Reverse for Instructions	

7008 1830 0001 4119 5185
7008 1830 0001 4119 5185



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:

Gushwa, Roy Dale
1916A E US Highway 80
Mincola, TX 75773-5078

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number
(Transfer from se

7008 1830 0001 4119 5185

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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COMPLETE THIS SECTION ON DELIVERY

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:

Gushwa, Virginia H.
C/O Somerset Lodge Apt 132
88330 Cason Road
Gladstone, OR 97027

2. Article Number:

(11/13/01, 11/14/01, 11/15/01)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent

☐ Address:

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

☐ Yes
☐ No

D. Is delivery address different from item 1?
If YES, enter delivery address below:

3. Service Type

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

☐ Yes

Certified Mail ■ A mailing receipt
■ A record of date
■ **Important Return**
■ Certified Mail
■ Certified Mail
■ **NO INSURANCE**
■ Valuable, priceless
■ For an additional
delivery (PS Form
Receipt) (PS Form
fee, Endorsement
a duplicate return
required.
■ For an additional
addressee's and
endorsement
■ If a postmark or
date at the post
receipt is not ne
IMPORTANT: SAY
PS Form 3800, August



YATES BUILDING - 106 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery to addressee only, please use the website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle	
Oil Conservation Division/Santa Fe Office	
September 28, 2009	
Return to: Mavte Reves-Production	
(Endorsement Required)	
Restricted Delivery Fee	
Total	
Gushwa, Virginia H.	
C/O Somerset Lodge Apt 132	
8330 Cason Road	
Gladstone, OR 97027	
City, State, or P.O. Box	
PS Form 3800, August 2008	
See Reverse for Instructions	

7008 1830 0001 4119 5208
7008 1830 0001 4119 5208





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:

Fuller, Kathy Radene
4517 86th Street
Lubbock, TX 79424

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5215

(Transfer from service tag only)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ORPORATION

- 105 SOUTH FOURTH ST.
NW MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL, RECEIPT	
<small>(Domestic Mail Only, No Insurance Coverage Provided)</small>	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office
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September 28, 2009	Mayte Reves-Production
	(Endorsement Required)
	Restricted Delivery Fee
	(Endorsement Required)
Fuller, Kathy Radene	St
4517 86 th Street	St
Lubbock, TX 79424	Cl
PS Form 3849, August 2008. See Reverse for Instructions.	

7008 1830 0001 4119 5215
7008 1830 0001 4119 5215

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Graham, Verna
C/O Jack L. Callison
11327 Sagetrail Dr.
Houston, TX 77089-4417

COMPLETE THIS SECTION ON DELIVERY

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

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

CEC PETROLEUM CORPORATION

40 - 105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

S SERVICE REQUESTED

CERTIFIED MAIL™

7008 1830 0001 4119 5222
7008 1830 0001 4119 5222

US Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office

September 28, 2009
Mayte Reyes-Production

Return R
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)

Graham, Verna
C/O Jack L. Callison
11327 Sagetrail Dr.
Houston, TX 77089-4417

PS Form 3800, August 1, 2006
See Reverse for Instructions

PS Form 3811, February 2004

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:

Harroun, Dorothy S.
Attn: Craig Hauschildt
5110 S. Yale Avenue Ste 400
Tulsa, OK 74135

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5239
(Transfer from service)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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105 SOUTH FOURTH ST.
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VOICE REQUESTED

CERTIFIED MAIL

7008 1830 0001 4119 5239
7008 1830 0001 4119 5239

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

For Mailing

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

Endorsement (Required)
Mayte Reyes-Production

To: [Redacted]
Restricted Delivery Fee
(Endorsement Required)

Sent: Hartoun, Dorothy S.
Attn: Craig Hauschildt
5110 S. Yale Avenue Ste 400
City: Tulsa, OK 74135

PS Form 3800, August 2006. See Reverse for Instructions.

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Fletcher, Evan M.
877 Donovan Court
Davis, CA 95618

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number 7008 1830 0001 4119 5246
(Transfer from service)

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

REPRODUCTION

05 SOUTH FOURTH ST.
MEXICO 88210-2118

VICE REQUESTED

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery to:
Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
c. September 28, 2009
Return to: Mayte Reyes-Production
Here

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Restricted Delivery Fee (Endorsement Required)				
Return to: Mayte Reyes-Production (Endorsement Required)				
Sent to: Fletcher, Evan M. 877 Donovan Court Davis, CA 95618				
City: Davis, CA 95618				
PS Form 3800, August 2006				

PS Form 3811, February 1992
FIRST CLASS PERMIT NO. 1000 COLUMBIA, MO
POSTAGE WILL BE PAID BY ADDRESSEE
PLACE STICKER IN THIS SPACE
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Dixon, Kent H. 99 Broadmore Blvd Springfield, OH 45504		B. Received by (Printed Name)	C. Date of Delivery
		D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

2. Article Number
(Transfer from service label) 7008 1830 0001 4119 5253

PS Form 3811 February 1992

NG -- 105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
Return (Endorsement)
Restricted Delivery Fee
(Endorsement Required)

Total Post

7008	1830	0001	4119	5253
7008	1830	0001	4119	5253

Sent to
Street, Apt.
or PO Box
City, State,
Springfield, OH 45504

Dixon, Kent H.
99 Broadmore Blvd
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PS Form 3800, August 2008 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Dale, Betty
3072 S. Zebonia Street
Denver, CO 80236

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5260

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**OLEUM
CORPORATION**

OUTH FOURTH ST.
CO 88210-2118

REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
-ord	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Relu Mayte Reyes-Production
Here	(Endorsement Required)
	(Restricted Delivery Fee Endorsement Required)
Total	
Sent to: Dale, Betty	
Street, 3072 S. Zebonia Street	
City, S Denver, CO 80236	
PS Form 3800, August 2006 See Reverse for Instructions	

7008 1830 0001 4119 5260
7008 1830 0001 4119 5260



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:

Dale, Betty Verinia
3072 S. Zebonia Street
Denver, CO 80236

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from sen*) 7008 1830 0001 4119 5277

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



BUILDING - 105 SOUTH FOURTH ST.
ESIA, NEW MEXICO 88210-2118

LESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office Certified Return Receipt (Endorsement Required) September 28, 2009 Mayte Reyes-Production Restituted Delivery Fee (Endorsement Required) Toll	
7008 1830 0001 4119 5277	7008 1830 0001 4119 5277
Sent Dale, Betty Verinia Street 3072 S. Zebonia Street City & PO Denver, CO 80236	
PS Form 3800, August 2006	
See Reverse for Instructions	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Culpepper, Robert S.
Wells Fargo N.A. Agent
Attn: Operations
P.O. Box #5383
Denver, CO 80217

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1A30 0001 4119 5284
(Transfer from service tag)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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PETROLEUM CORPORATION

ILDING - 105 SOUTH FOURTH ST.
SIA, NEW MEXICO 88210-2118

ESS SERVICE REQUESTED

Culpepper
Wells Fargo
Attn: Oper
P.O. Box #
Denver, CO

Denver, CO 80217

P.O. Box #5383

Attn: Operations

Wells Fargo N.A. Agent

Culpepper, Robert S.

Total Postage & Fees \$

(Endorsement Required)

Restricted Delivery Fee

(Endorsement Required)

Return Re

Cel

September 28, 2009

Mayte Reyes-Production

Oil Conservation Division/Santa Fe Office

Dayton FO #2, Surface Commingle

Dayton FN #1 & #2, Dayton FG #1,

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

(Domestic Mail Only: No Insurance Coverage Provided)

U.S. Postal Service™

CERTIFIED MAIL™ RECEIPT

7008 1830 0001 4119 5284
7008 1830 0001 4119 5284

Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE.

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:

Culpepper, Amelia L.
C/O Culpepper, Richard Leake
P.O. Box#5023
Alexandria, LA 71307-5023

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
☐ Addressee

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

2. Article Number

(Transfer from service label)

7008 1830 0001 4119 5291

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
■ A mailing receipt
■ A unique identifier
■ A record of delivery
Important Reminder
■ Certified Mail
■ Certified Mail Insurance
■ NO INSURANCE FOR ADDITIONAL DELIVERY TO OTHER ADDRESSES
■ For an additional fee, Endorsement required.
■ For an additional fee, Endorsement required.
■ If a postmark is not required, receipt is not required.
IMPORTANT: Send PS Form 3800, August

7153 PETROLEUM CORPORATION

ING - 105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

S SERVICE REQUESTED

PS Form 3800, August 2006 See Reverse for Instructions

7008 1830 0001 4119 5291
Culpepper, Amelia L.
C/O Culpepper, Richard Leake
P.O. Box #5023
Alexandria, LA 71307-5023

Return to: Mayte Reyes-Production
(Endorsement required)
Restricted Delivery Fee
(Endorsement Required)
Here

ce September 28, 2009
Oil Conservation Division/Santa Fe Office
Dayton FO #2, Surface Commingle
Dayton FN #1 & #2, Dayton FG #1,
For delivery

U.S. Postal Service
CERTIFIED MAIL
RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

OF THE RETURN ADDRESS, FOLD TO INDICATE WHERE TO RETURN

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:

Culpepper, Richard Leake
P.O. Box#5023
Alexandria, LA 71307-5023

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 5307

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
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

ES **ETROLEUM** **ORPORATION**

105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Return Re (Endorsement Required) Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total Culppeper, Richard Leake P.O. Box#5023 Alexandria, LA 71307-5023	Sent Street or P.O. City
PS Form 3800, August 2006	Instructions

7008 1830 0001 4119 5307
7008 1830 0001 4119 5307

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:

Culpepper, R.S. & Mary
Wells Fargo, N.A. Agent
Attn: Operations
P.O. #5383
Denver CO 80217

2. Article Number

(Transfer from service label)

7008 1830 0001 4119 5031

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PETROLEUM CORPORATION

JING - 105 SOUTH FOURTH ST.
A, NEW MEXICO 88210-2118

35 SERVICE REQUESTED

US Postal Service		7008 1830 0001 4119 5031	
CERTIFIED MAIL - RECEIPT		7008 1830 0001 4119 5031	
(Domestic Mail Only, No Insurance Coverage Provided)			
For	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production		
Total	Culpepper, R.S. & Mary Wells Fargo, N.A. Agent Attn: Operations P.O. #5383 Denver CO 80217		
Return Receipt (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			
PS Form 3800 August 2006			

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLLOW THE DOTTED LINE.

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:

Culpepper, Charles
P.O. Box#229
Farmington, NM 87499

2. Article Number

(Transfer from servc

7008 1830 0001 4119 504A

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
☒ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
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

CORPORATION

BUILDING - 105 SOUTH FOURTH ST
 ATESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service TM		CERTIFIED MAIL TM RECEIPT		(Domestic Mail Only; No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production		Return Receipt Fee (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)	
To:		Sent		City or P.O. Box	
Culpepper, Charles		P.O. Box#229		Farmington, NM 87499	
PS Form 3800, August 2006		See Reverse for Instructions			

7008 1830 0001 4119 5048
 7008 1830 0001 4119 5048

CERTIFIED MAIL™

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:

Combs, C. Roberta
10 Michele Manor
Charleston, SC 29406

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

3. Service Type

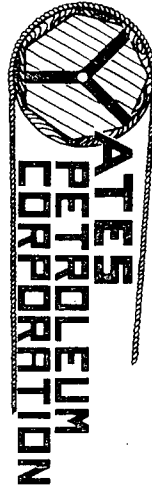
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5055
(Transfer from 4)

PS Form 3811, February 2004

Domestic Post



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL - RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009
f. Mayte Reyes-Production	
(Endorsement Required)	
Restricted Delivery Fee	
(Endorsement Required)	
Total Postage	
Sent To	
Street, Apt. or PO Box	Combs, C. Roberta 10 Michele Manor Charleston, SC 29406
City, State	
PS Form 3841, April 2008	
See Reverse for Instructions	

7008 1A30 0001 4119 5055
7008 1A30 0001 4119 5055

OF THE RETURN ADDRESS, FOLD ALONG DOTTED LINE

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:

Carrier Ruth Noreen
C/O Joe Hermann
2445 Sequester CT
San Jose, CA 95133

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

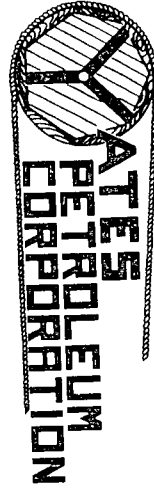
2. Article Number
(Transfer from ser.)

7008 1830 0001 4119 5062

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL

U.S. Postal Service	
CERTIFIED MAIL - RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Return Re Mayte Reyes-Production Endorsement Restricted Delivery Fee (Endorsement Required)
Total	
Sent Carrier Ruth Noreen C/O Joe Hermann 2445 Sequester CT San Jose, CA 95133	City, S State or PO
PS Form 3800, August 2006 See Reverse for Instructions	

7008 1830 0001 4119 5052
7008 1830 0001 4119 5052

PLACE STICKER ATTACHMENT OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. DO NOT ATTACH HERE.

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:

Buoni, Dorothy Culpepper
P.O. Box #541302
Merritt Island, FL 32954

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 5079

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PIRULLEUM CORPORATION

- 105 SOUTH FOURTH ST.
 : W MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)		For delivery to: Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Rel Maxye Reves-Production (Endorsement Required)		Total Postage & Fees 2008 1830 0001 4119 5079 2008 1830 0001 4119 5079	
Sent to: Buoni, Dorothy Culpepper P.O. Box #541302 Merritt Island, FL 32954		Restricted Delivery Fee (Endorsement Required)		PS Form 3849, April 2008 See Reverse for Instructions	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

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:

Brown, Janice M.
5004 S. 233rd Place
Kent, WA 98032

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service)

7008 1830 0001 4119 5093

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7

PLACE STICKER AT TOP OF ENVELOPE
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</p> <p>Bloomquist, Mary Gene 14050 E. Linvale PL #202 Aurora, CO 80014</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>2. Article Number (Transfer from) 7008 1830 0001 4119 5086</p> <p>PS Form 3811, February 2004</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

102595-02-M-1540

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LES PETROLEUM CORPORATION

105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

SERVICE REQUESTED

MAILING LABEL

U.S. Postal Service TM		CERTIFIED MAIL TM		RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)					
For					
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009					
F. Mayte Reyes-Production					
(Endorsement Required)					
Restricted Delivery Fee					
(Endorsement Required)					
Total					
2008	1830	0001	4119	5086	
2008	1830	0001	4119	5086	
Sent					
Bloomquist, Mary Gene					
14050 E. Linvale Pl #202					
Aurora, CO 80014					
City, State or PO					
PS Form 3800, August 2006					



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. HOLD STICKER IN PLACE UNTIL ENVELOPE IS OPENED.

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:

Bell, Linda A
P.O. Box #1027
Castle Rock, CO 80104

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5109
(Transfer from service lab)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ES PETROLEUM CORPORATION

105 SOUTH FOURTH ST.
N MEXICO 88210-2118

SERVICE REQUESTED

7008 1A30 0001 4119 5109
7008 1A30 0001 4119 5109

U.S. Postal Service		PS Form 3800, August 2006	
CERTIFIED MAIL RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)	
Total		Sent to Bell, Linda A P.O. Box #1027 Castle Rock, CO 80104 Street, or PO City, St	

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

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:

Banks, Martin Scott
924 Arlington Ave
Berkeley, CA 94707

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 5024

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

5
ROLEUM
PROPORTION

35 SOUTH FOURTH ST.
EXICO 88210-2118

ICE REQUESTED

U.S. Postal Service[®]
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery to:
Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Return to:
Mayte Reyes-Production
[Redacted Box]
Here

Total: Banks, Martin Scott
Sent to: 924 Arlington Ave
Street or PO: Berkeley, CA 94707
City & State: [Redacted Box]

PS Form 3800, August 2006
See Reverse for Instructions

7008	1830	0001	4119	5024
7008	1830	0001	4119	5024

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Allen, Lucy
P.O. Box #459
Jal, NM 88252

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number
(Transfer from service label) 7008 1830 0001 4119 5017

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ES TROLEUM PROPORTION

105 SOUTH FOURTH ST.
MEXICO 88210-2118

VOICE REQUESTED

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production	For Restricted Delivery Fee (Endorsement Required) Total Post
Sent To Allen, Lucy P.O. Box #459 Jal, NM 88252	Street, Apt. or PO Box City, State
PS Form 3800, August 2006 Seal Reverse for Instructions	

7008 1830 0001 4119 5017
7008 1830 0001 4119 5017

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Kornman, Peggy A.
2215 Rancho Siringo #8
Santa Fe, NM 87505

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6533

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

102595-02-M-1540

**ES
TROLEUM
PRODUCTION**

105 SOUTH FOURTH ST.
MEXICO 88210-2118

VICE REQUESTED

7008 1830 0001 4119 6533
7008 1830 0001 4119 6533

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Endorsement Required)

Total F

Sent To
Korman, Peggy A.
2215 Rancho Siringo #8
Santa Fe, NM 87505
City, State or PO Box, Street, Apt.

PS Form 3800, August 2006
See Reverse for Instructions

PLACE STICKER ATTACHED TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

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:

Lackey, Florence
5510 Buffalo Street
Midlothian, TX 76065

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from serv)

7008 1830 0001 4119 6526

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ES PETROLEUM CORPORATION

- 105 SOUTH FOURTH ST.
N MEXICO 88210-2118

RYCE REQUESTED

U.S. Postal Service TM		PS Form 3800, August 2006	
CERTIFIED MAIL [®] RECEIPT		See Reverse for Instructions	
(Domestic Mail Only, No Insurance Coverage Provided)			
For		City, State	
Dayton FN #1 & #2, Dayton FG #1,		Street, A	
Dayton FO #2, Surface Commingle		or PO Box	
Oil Conservation Division/Santa Fe Office		Sent To	
September 28, 2009		Total	
Mayte Reyes-Production		Lackey, Florence	
(Endorsement required)		5510 Buffalo Street	
Restricted Delivery Fee		Midlothian, TX 76065	
(Endorsement required)			

7008 1830 0001 4119 6526
7008 1830 0001 4119 6526

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. CANNOT BE USED TO MAIL
LIMITED MAIL.

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:

Looney, Marilyn
1307 West Thomas Street
Carlsbad, NM 88220-4044

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6519

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

- ☐ Yes ☐ No

ES PETROLEUM CORPORATION

- 105 SOUTH FOURTH ST.
- W MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service		CERTIFIED MAIL RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
For		Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle		Dayton FO #2, Surface Commingle	
Oil Conservation Division/Santa Fe Office		September 28, 2009		Mayte Reyes-Production	
(Endorsement Required)		Restricted Delivery Fee		(Endorsement Required)	
To		Looney, Marilyn		1307 West Thomas Street	
Sent		Carlbad, NM 88220-4044		City	
7008 1830 0001 4119 6519		7008 1830 0001 4119 6519		PS Form 3800, August 2006	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS TO BE MAILED LINE

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:

Lopez, Ricardo Hernandez
5610 Avita Road
Carlsbad, NM 88220

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number

(Transfer from service label)

7008 1830 0001 4119 6489

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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mailing receipt
unique identifier
record of delivery
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INSURANCE
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ROLEUM
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05 SOUTH FOURTH ST.
 MEXICO 88210-2118

VICE REQUESTED

U.S. Postal Service		CERTIFIED MAIL RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1,		Dayton FO #2, Surface Commingle		Oil Conservation Division/Santa Fe Office	
September 28, 2009		Mayte Reyes-Production		(Endorsement Required)	
Restricted Delivery Fee		Total		Sent To	
City, St.		Street, or PO		City, St.	
Carlsbad, NM 88220		5610 Avita Road		Lopez, Ricardo Hernandez	
PS Form 3800, August 2005		See Reverse for Instructions			

7008 1830 0001 4119 6489
 7008 1830 0001 4119 6489

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AND POSTAGE LINE.

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:

McCauley, John R.
P.O. Box #3784
Edgewood, NM 87015

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1630 0001 4119 6502
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail is not insurable for valuable contents, please use Registered Mail for such items.
- For an additional delivery, To obtain a duplicate return receipt, Endorsement fee. Endorsement fee. Endorsement fee.

- For an additional address, endorsement is required.
- If a postmark or receipt is not needed at the post office, a postmark or receipt is not needed.

IMPORTANT: See

PS Form 3800, August 2003

PE5 **PETROLEUM** **CORPORATION**

3 - 105 SOUTH FOURTH ST.
 EW MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service CERTIFIED MAIL - RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 (Mayte Reyes-Production)	Restricted Delivery Fee (Endorsement Required)
McCauley, John R. P.O. Box #3784 Edgewood, NM 87015	
PS Form 3800, August 2005 See Reverse for Instructions	

7008 1830 0001 4119 6502
 7008 1830 0001 4119 6502

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS FOLD AT DOTTED LINE

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:

Middleton, Joan C.
One Bishop Gadspen Way
Apt #149
Charleston, SC 29412

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6496

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

ATES PETROLEUM CORPORATION

DING - 105 SOUTH FOURTH ST.
A. NEW MEXICO 88210-2118

SS SERVICE REQUESTED

CERTIFIED MAIL

7008 1830 0001 4119 6496
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U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Endo
Restricted Delivery Fee
(Endorsement Required)

St. Middleton, Joan C.
St. One Bishop Gadsden Way
St. Apt #149
St. Charleston, SC 29412

PS Form 3800, August 2006
See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

McGowen, Mary E.
3615 Anita Drive
Bell, CA 90201

COMPLETE THIS SECTION ON DELIVERY

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

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

- 4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7006 1830 0001 4119 6472
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

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ES **PETROLEUM** **CORPORATION**

105 SOUTH FOURTH ST.
 W MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only: No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)	
7008 1830 0001 4119 6472 7008 1830 0001 4119 6472	McGowen, Mary E. 3615 Anita Drive Bell, CA 90201 PS Form 3800, August 2006 See Reverse for Instructions

PLACE STICKER AT TOP OF RETURN ENVELOPE, FOLD AT DOTTED LINE
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Merchant, John D. II
P.O. Box #338
Carlsbad, NM 88220

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6441

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

TES PETROLEUM CORPORATION

G - 105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

SERVICE REQUESTED

CERTIFIED MAIL

7008 1630 0001 4119 6441
2008 1630 0001 4119 6441

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

Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Enc. Restricted Delivery Fee Endorsement)

Total Postage
Merchant, John D. II
P.O. Box #338
Carlsbad, NM 88220
Street, Apt. / or PO Box N
City, State, Z.

PS Form 3800, August 2006 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

McGinnes Resources Company
P.O. Box #527
Artesia, NM 88211-0527

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6458

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
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

TES PETROLEUM CORPORATION

- 105 SOUTH FOURTH ST.
W MEXICO 88210-2118

NOVICE REQUESTED

CERTIFIED MAIL

7008 1830 0001 4119 6458
7008 1830 0001 4119 6458

U.S. Postal Service CERTIFIED MAIL, RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)		For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Re Endors Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)		Total Postage Sent To P.O. Box #527 Artesia, NM 88211-0527 City, State or PO Box Street, Apt PS Form 3800 August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

McGowen, Vergia Elle
C/O David E. Burks
8216 County Rd 518
Burleson, TX 76028-1504

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent

☒ Addressee

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

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

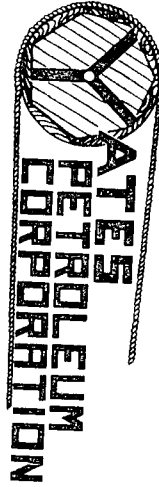
2. Article Number 7008 1830 0001 4119 6465
(Transfer from service)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

PS Form 3811, February 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED



US Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office	
September 28, 2009	
(Em) Mayte Reyes-Production	
(Endorsement Required)	
Total P	McGowen, Vergia Elle
Sent To	C/O David E. Burks
Street, Apt or PO Box	8216 County Rd 518
City, State	Burleson, TX 76028-1504
PS Form 3800, August 2006	
See Reverse for Instructions	

7008 1830 0001 4119 6465
7008 1830 0001 4119 6465

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Tellers, Matthew
11902 Cyclops St
Norwalk, CA 90650

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6250

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes



BUILDING - 105 SOUTH FOURTH ST.
ITESIA, NEW MEXICO 88210-2118

DRESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL - RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery to addressee only, no return address required.	
Dayton FN #1 & #2, Dayton FG #1,	Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office	
September 28, 2009	
(Endor: Mavte Reves-Production	
Restricted Delivery Fee	
(Endorsement Required)	
Total Postage & Fees	
Sen	2008 1830 0001 4119 6250
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City	Norwalk, CA 90650
Tellers, Matthew	
11902 Cyclops St	
Norwalk, CA 90650	
See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Moore, Robin Susan Tellers
3610 Centralia
Lakewood CA 90712

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7008 1830 0001 4119 6267

2011 February 2004

Domestic Return Receipt

102595-02 M-1540

ATES PETROLEUM CORPORATION

JING - 105 SOUTH FOURTH ST.
A, NEW MEXICO 88210-2118

SS SERVICE REQUESTED

Moore,
3610 C
Lakewood

US Postal Service CERTIFIED MAIL - RECEIPT <small>(Domestic Mail Only; No Insurance Coverage Provided)</small>	
<small>For delivery information visit our website at: www.usps.com</small>	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 (End)	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 (End)
Restricted Delivery Fee (Endorsement Required)	Restricted Delivery Fee (Endorsement Required)
Total F	Total F
Sent to: Moore, Robin Susan Tellers Street, Apt. 3610 Centralia or PO Box City, State Lakewood CA 90712	Sent to: Moore, Robin Susan Tellers Street, Apt. 3610 Centralia or PO Box City, State Lakewood CA 90712
PS Form 3800, August 2006 See Reverse for Instructions	

7008 1830 0001 4119 6267
 7008 1830 0001 4119 6267



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		A. Signature	<input type="checkbox"/> Agent
<input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name)	<input type="checkbox"/> Addressee
<input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.			C. Date of Delivery
1. Article Addressed to:		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Kurt W. Tellers 2570 Noble Dr. Tallahassee, FL 32308-6486			
		3. Service Type	<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
		<input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise	
		<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes
2. Article Number (Transfer from service)		7008 1830 0001 4119 6274	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

PERMISSION

SOUTH FOURTH ST.
ICO 88210-2118

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7008 1A30 0001 4119 6274

US Postal Service CERTIFIED MAIL RECEIPT <small>(Domestic Mail Only. No Insurance Coverage Provided)</small>	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	(End) Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)
Total	
Sent to Kurt W. Tellers 2570 Noble Dr. City, St. Tallahassee, FL 32308-6486	(PS Form 3800, August 2006) See Reverse for Instructions

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Tellers, William J.
3610 Centralia
Lakewood CA 90712

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 6281
(Transfer from serv)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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105 SOUTH FOURTH ST.
W MEXICO 88210-2118

SERVICE REQUESTED

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U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production,
Restricted Delivery Fee
(Endorsement Required)

To
Sent Tellers, William J.
3610 Centralia
Lakewood CA 90712
City, State or PO

PS Form 3800, August 2008 See Reverse for Instructions

7008 1830 0001 4119 6281
2008 1830 0001 4119 6281

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Tellers, Michael J. C/O Kurt W. Tellers 2570 Noble Dr. Tallahassee, FL 32308-6486		B. Received by (Printed Name)	C. Date of Delivery
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service if)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	

102595-02-M-15-00

ATES PETROLEUM CORPORATION

DING - 105 SOUTH FOURTH ST.
A, NEW MEXICO 88210-2118

SS SERVICE REQUESTED

7008 1830 0001 4119 6298
7008 1830 0001 4119 6298

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production,
(Endorsement Required)
Tellers, Michael J.
C/O Kurt W. Tellers
2570 Noble Dr.
Tallahassee, FL 32308-6486

City: Tallahassee, FL 32308-6486
State or PO: 32308-6486

PS Form 3800, August 2006
See Reverse for Instructions

PLACE STICKER ON TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. SOLD AT AUCTION FEB 17, 2004

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		A. Signature	<input type="checkbox"/> Agent
<input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.		B. Received by (Printed Name)	<input type="checkbox"/> Addressee
<input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.			C. Date of Delivery
1. Article Addressed to:		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Smith, Ralph Leland			
C/O Sue Weber			
1907 Buena Vista Dr. S. E. TR. #12			
Albuquerque, NM 87106			
3. Service Type		<input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail	
<input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise		<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee)		<input type="checkbox"/> Yes	
2. Article Number		4119 6304	
(Transfer from sub)			
PS Form 3811, February 2004		Domestic Return Receipt	
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ATES PETROLEUM CORPORATION

LDING - 105 SOUTH FOURTH ST.
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ESS SERVICE REQUESTED

VERIFIED MAIL

7008 1830 0001 4119 6304
7008 1830 0001 4119 6304

PS Form 3800 August 2006

City, State or PO Box
Albuquerque, NM 87106

Sent To: Smith, Ralph Leland
C/O Sue Weber
1907 Buena Vista Dr. S. E. TR. #12

Rest. (Endorsement Required)
Mayte Reyes-Production
September 28, 2009
Oil Conservation Division/Santa Fe Office
Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle

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

U.S. Postal Service
CERTIFIED MAIL
(Domestic Mail Only, No Insurance Coverage Provided)
RECEIPT

OF THE RETURN ADDRESS FOLD ALONG DOTTED LINE
REVERSE SIDE

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:

Smith, C. K. Jr.
8902 Circle R View Lane
Escondido, CA 92026

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
X ☐ Addressee
- 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

2. Article Number 7008 1830 0001 4119 6311
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

REGISTRATION

105 SOUTH FOURTH ST.
MEXICO 88210-2118

PRICE REQUESTED

Smith
8907
Esc

U.S. Postal Service		CERTIFIED MAIL - RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com					
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production (Endorsement Required)					
Total		7008 1830 0001 4119 6311			
Sent to		7008 1830 0001 4119 6311			
Street		8902 Circle R View Lane			
City, St.		Escondido, CA 92026			
PS Form 3800, August 2006 See Reverse for Instructions					

DO NOT WRITE IN THESE SPACES
OR THE RETURN ADDRESS FOLD AT DOTTED LINE

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:

Singleterry, Judy Ciushwa
P.O. Box #5071
Hobbs, NM 88241

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label) 7008 1830 0001 4119 6328

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7008	1.830	0001	4119	6328
7008	1.830	0001	4119	6328

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

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:

Sharbro Oil LTD. CO
P.O. Box #840
Artesia, NM 88211-0840

2. Article Number
(Transfer from service history)

7008 1830 0001 4119 6335

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
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

LES PETROLEUM CORPORATION

3 - 105 SOUTH FOURTH ST.
JEW MEXICO 88210-2118

SERVICE REQUESTED

VERIFIED MAIL

7008 1A30 0001 4119 6335
7008 1A30 0001 4119 6335

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle

Oil Conservation Division/Santa Fe Office
September 28, 2009

(Endor: Mayte Reyes-Production

Restricted Delivery Fee

Sharbro Oil LTD. CO

P.O. Box #840

Artesia, NM 88211-0840

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Roger & Leahe Serpan LVG
4323 Arcady Avenue
Dallas, TX 75205

2. Article Number

(Transfer from service)

7008 3830 0001 4119 6342

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent ☒ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
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

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TES PETROLEUM CORPORATION

G - 105 SOUTH FOURTH ST.
NEW MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service		PS Form 3800, August 2006	
CERTIFIED MAIL RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reves-Production (Endorsement Required)		The Roger & Leahe Serpan LVG 4323 Arcady Avenue Dallas, TX 75205	
For Domestic Mail Only, No Insurance Coverage Provided		Restricted Delivery Fee (Endorsement Required)	

7008 1830 0001 4119 6342
2008 1830 0001 4119 6342

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD TO FOLLOW DOTTED LINE.

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:

Rockwell, Linda
206 CR 2336
Mineola, TX 75773

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from serv)

7008 1830 0001 4119 6359

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

LES PETROLEUM CORPORATION

- 105 SOUTH FOURTH ST.
W. MEXICO 88210-2118

SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	To: (Endorsement Required) Restricted Delivery Fee (MAYTE REVES-PRODUCTION)
Sent Rockwell, Linda 206 CR 2336 Mineola, TX 75773	City: or PO Street
PS Form 3800, August 2006	

7008 1630 0001 4119 6359
7008 1630 0001 4119 6359

2 2 2

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Roberson, Reba
P.O. Box #1222
Portales, NM 88130

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6366

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

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

5 ROLEUM PORTION

5 SOUTH FOURTH ST.
XICO 88210-2118

CE REQUESTED

U.S. Postal Service CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		For Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production (Endorsement Required)		Restricted Delivery Fee (Endorsement Required)		Tr	
PSN Form 3800, August 2000 Special Delivery Instructions		City Portales, NM 88130		State NM		Zip 88130	
Recipient's Name Roberson, Reba P.O. Box #1222		City Portales, NM 88130		State NM		Zip 88130	

7008 1830 0001 4119 6366
7008 1830 0001 4119 6366

PLACE STICKER AT TOP OF ENVELOPE OR TOP OF BOX
DO NOT WRITE OR PRINT ON THIS STICKER

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:

Receconi, Susan K.
22 Laughing Horse Lane
Santa Fe, NM 87508

2. Article Number
(Transfer from ser.)

7008 1830 0001 4119 6373

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

**SOLEUM
CORPORATION**

SOUTH FOURTH ST.
XICO 88210-2118

CE REQUESTED

CERTIFIED MAIL

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

Enc: Mayte Reyes-Production
Restricted Delivery Fee
(Endorsement Required)

Total P

7008 1830 0001 4119 6373
7008 1830 0001 4119 6373

Sent To: Receconi, Susan K.
22 Laughing Horse Lane
Santa Fe, NM 87508
City, State, or PO Box
PS Form 3800, August 2006
See Reverse for Instructions

Re 22
Sal



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:

Ramsey, Thelma, L.
711 N. Happy Valley Road
Carlsbad, NM 88220

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent
☐ Addressee

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

2. Article Number 7006 1830 0001 4119 6380
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

ES TROLEUM CORPORATION

105 SOUTH FOURTH ST.
V MEXICO 88210-2118

RVICE REQUESTED

7008 1630 0001 4119 6380

7008 1630 0001 4119 6380

U.S. Postal Service		CERTIFIED MAIL - RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1,		Dayton FO #2, Surface Commingle		Oil Conservation Division/Santa Fe Office	
September 28, 2009		(Enc. Mayte Reyes-Production		Restricted Delivery Fee	
Total		Endorsement Required		PS Form 3800, August 2006	
Sent To		Street, or P.O. Box		City, State	
Ramsey, Thelma, L.		711 N. Happy Valley Road		Carlsbad, NM 88220	
PS Form 3800, August 2006		See Reverse for Instructions			

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD ALONG DOTTED LINE
TO PREPARE FOR MAIL SERVICE.

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:

Pitch Energy Corporation
P.O. Box #304
Artesia, NM 88211-0304

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number

7008 1830 0001 4119 6397

Return Receipt

102595-02-M-1540

5
PROLEUM
PROPORTION

05 SOUTH FOURTH ST.
MEXICO 88210-2118

TCE REQUESTED

REGISTERED MAIL

7008 1830 0001 4119 6397
7008 1830 0001 4119 6397

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)

Total Postage

Sent To
Pitch Energy Corporation
P.O. Box #304
Artesia, NM 88211-0304
City, State, ZIP
or PO Box No.
Street, Apt. No.

PS Form 3800, August 2006 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Painter, Nichols, John
P.O. Box #212
Irons, MI 49644-0212

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number 7008 1830 0001 4119 6403
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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**OLEUM
CORPORATION**

20TH FOURTH ST.
PO 88210-2118

REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information, visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	(End. Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)
Total F	
Sent To Painter, Nichols, John P.O. Box #212 Irons, MI 49644-0212	City, Sta or PO B.
PS Form 3800, August 2005 See Reverse for Instructions	

7008 1830 0001 4119 6403
7008 1830 0001 4119 6403

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Nichols, Heidi B.
7205 Bullion Hill Rd.
Flagstaff, AZ 86004

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 6410
(Transfer from service history)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

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POLEUM CORPORATION

SOUTH FOURTH ST.
NICO 88210-2118

NO REQUESTED

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Re (Endors)
Mayte Reyes-Production
Restricted Delivery Fee
(Endorsement Required)

Total

Sent To Nichols, Heidi B.
Street, 7205 Bullion Hill Rd.
City, St. Flagstaff, AZ 86004

PS Form 3800 August 2006 See Reverse for Instructions

7008 1830 0001 4119 6410
7008 1830 0001 4119 6410



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Neal Trust, Under trust
1311 Doepp Dr.
Carlsbad, NM 88220

2. Article Number
(Transfer from)

7008 1830 0001 4119 6427

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

DE REQUESTED

U.S. Postal Service		CERTIFIED MAIL RECEIPT <i>(Domestic Mail Only, No Insurance Coverage Provided)</i>	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production			
Restricted Delivery Fee (Endorsement required)		Total Postage	
Endorsement Required			
City:		City:	
State:		State:	
Zip:		Zip:	
Post Office:		Post Office:	
See Reverse for Instructions		PSI	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

National Bank of Comm Trust
Wells Fargo Bank Trust Oil & Gas
P.O. Box #5383
Denver, CO 80217

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number 7008 1830 0001 4119 6434
(Transfer from service)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

SOLEUM PORTION

5 SOUTH FOURTH ST.
XICO 88210-2118

CE REQUESTED

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production

(Endorsement Required)
Restricted Delivery Fee

Total P

Sent To National Bank of Comm Trust
Wells Fargo Bank Trust Oil & Gas
P.O. Box #5383
Denver, CO 80217

City, State or PO Box
Street, A
PS Form 3800, November 2008

7008 1830 0001 4119 6434
2008 1830 0001 4119 6434



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:

Tellers, Patrick J. Estate
C/O Kurt W. Tellers
2570 Noble Dr.
Tallahassee, FL 32308-6486

2. Article Number

(Transfer from service label)

7008 1830 0001 4119 6243

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

SOLEUM CORPORATION

SOUTH FOURTH ST.
JCO 88210-2118

RE REQUESTED

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<small>(Domestic Mail Only, No Insurance Coverage Provided)</small>	
<small>For delivery information visit our website at www.usps.com</small>	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
(En) Mayte Reyes-Production	
Restricted Delivery Fee (Endorsement Required)	
Total P	
Sent To	Tellers, Patrick J. Estate
Street, Apt or PO Box	C/O Kurt W. Tellers 2570 Noble Dr.
City, State	Tallahassee, FL 32308-6486
<small>PS Form 3800, August 2006 See Reverse for Instructions</small>	

2008 1630 0001 4119 6243
2008 1630 0001 4119 6243

PLACE STICKER TOP OF ENVELOPE TO THE RIGHT

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:

Brown, James A. & Judith A.
P.O. Box #928
Elk City, OK 73648

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

2. Article Number **7008 1830 0001 4119 6045**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

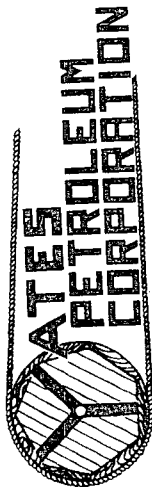
- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery. To obtain Receipt (PS Form 3811), fee. Endorsement a duplicate receipt is required.
- ☐ For an additional addressee's endorsement
- ☐ If a postmark is placed at the post office, receipt is not required.

IMPORTANT:

PS Form 3800, August 1999



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6045
7008 1830 0001 4119 6045

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery to:

Dayton FN #1 & #2, Dayton FG #
Dayton FO #2. Surface Comming
Oil Conservation Division/Santa Fe Offi
September 28, 2009

Return (Endorsement Required) Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)

Total Postage

Sent To

Brown, James A. & Judith A.
P.O. Box #928

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

Elk City, OK 73648

PS Form 3800, August 2006

See Reverse for

Bro
P.O.
Elk

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT NOTCH

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:

Brown, David B.
C/O Peggy Lawson
6156 Jays Way
Milton, FL 32570

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

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)

7008 1830 0001 4119 6052

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

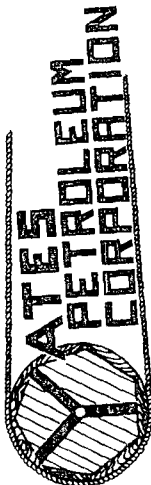
- ☒ A mailing receipt
- ☒ A unique identifier
- ☒ A record of delivery

Important Reminders

- ☒ Certified Mail
- ☒ Certified Mail
- ☒ NO INSURANCE for valuables, please
- ☒ For an additional delivery. To receive a Receipt (PS Form 3811), fee. Endorsement a duplicate is required.
- ☒ For an addressee's endorsement
- ☒ If a postmark is at the receipt is required.

IMPORTANT

PS Form 3800, February 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6052
7008 1830 0001 4119 6052

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office

September 28, 2009

Ret.
(Endorse) Mayte Reyes-Production
Restricted Delivery Fee
(Endorsement Required)

Total Post: Brown, David B.

Sent To C/O Peggy Lawson
Street, Apt.,
or PO Box A 6156 Jays Way
City, State, ZIP+4 Milton, FL 32570

PS Form 3800, August 2006 See Reverse for Instructions

Bro
C/O
615
MI



SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Wingfield, Elizabeth
1007 South Kentucky
Roswell, NM 88203-4347

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X ☐ Addressee

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

1. Article Number
(Transfer from service label)

7008 1830 0001 4119 6069

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

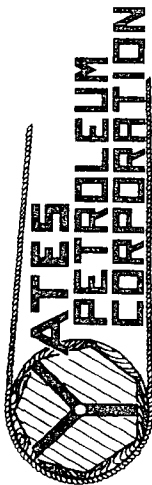
- ☐ A mailing receipt
- ☐ A unique identification number
- ☐ A record of delivery

Important Restrictions

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, perishables, or live animals
- ☐ For an additional delivery. To obtain a Return Receipt (PS Form 3811), Endorsee's signature and address required.
- ☐ For an additional addressee's endorsement
- ☐ If a postmark is placed at the time of mailing, receipt is not required.

IMPORTANT:

PS Form 3800, April 2003



YATES BUILDING — 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6069
7008 1830 0001 4119 6069

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009
Re	Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To	Wingfield, Elizabeth
Street, Apt. No., or PO Box No.	1007 South Kentucky
City, State, ZIP+	Roswell, NM 88203-4347
PS Form 3800, August 2006. See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Moore, Virginia Lynn
506 South Kentucky
Roswell, NM 88203

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒

B. Received by (Printed Name)

☐ Agent
☐ Addressee

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service 1)

7008 1830 0001 4119 6076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

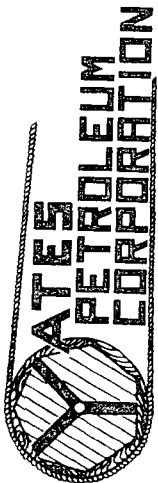
- ☐ A mailing receipt
- ☐ A unique identification number
- ☐ A record of delivery

Important Restrictions

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables
- ☐ For an addressee delivery, To Receipt (PS Form 3811) fee, Endorsement a duplicate required.
- ☐ For an addressee endorsement
- ☐ If a postmark is required at the time of receipt is required

IMPORTANT

PS Form 3800, February 2004



YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6076
7008 1830 0001 4119 6076

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only, No Insurance Coverage Provided)</i>	
For delivery to:	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009
Return (Endorsement required)	Mayte Reyes-Production
Restricted Delivery Fee (End)	
To	Moore, Virginia Lynn
See	506 South Kentucky
See or	Roswell, NM 88203
City, State, ZIP+4	
PS Form 3800, August 2006 See Reverse for Instructions	

PLACE STICKER ON TOP OF MAIL TO THE RIGHT OF THE RETURN ADDRESS TO BE RETURNED TO THE POST OFFICE. DO NOT WRITE OR SIGN HERE.

ER: 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, in the front if space permits.

Addressed to:

Victor Mitchell
Box #488
Myetta, OK 74437

COMPLETE THIS SECTION ON DELIVERY

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

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

File Number 7008 1830 0001 4119 6083
Transfer from service lat
Domestic Return Receipt
rm 3811, February 2004
102595-02-M-1540

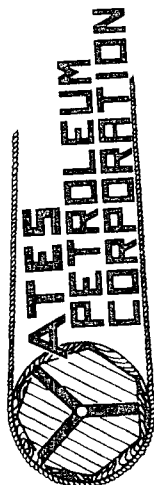
Certified Mail

- A mailing record
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain a Receipt (PS Form 3800), a fee. Endorsement a duplicate receipt is required.
- For an additional addressee's endorsement
- If a postmark is placed at the post office, the receipt is not valid.

IMPORTANT: See PS Form 3800, August 2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6083
7008 1830 0001 4119 6083

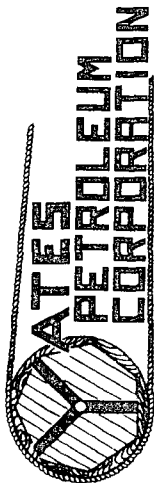
U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery to:	Dayton FN #1 & #2, Dayton FG; Dayton FO #2. Surface Comming Oil Conservation Division/Santa Fe Off September 28, 2009
Return to:	Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total Postage	Mitchell Minerals, L. Attn: Victor Mitchell P.O. Box #488 Henryetta, OK 74437
Sent To	
Street, Apt or PO Box	
City, State	
PS Form 3800, August 2006	See Reverse

- A mailing receipt
- A unique identification number
- A record of the item's location

Important Features

- Certified Mail®
- Certified Mail with Restricted Receipt®
- NO INSURANCE for valuables, please
- For an additional delivery, to obtain Receipt (PS Form 3800, fee, Endorsement required. A duplicate receipt is required.
- For an additional addressee's address, endorsement required.
- If a postmark cancellation is not required, a receipt is not necessary.

IMPORTANT: Send PS Form 3800, August 1990



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL™

7008 1830 0001 4119 6090
7008 1830 0001 4119 6090

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For: Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle -
Oil Conservation Division/Santa Fe Office
September 28, 2009

Re Mayte Reyes-Production
(Endorsement Required)

Restrict
(Endorse)

Total F Ingram, Mary Jo
Rt. 1-5200 W. Pine Lodge Rd.
Roswell, NM 88201

Sent To

Street,
or PO B.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Ins



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:

ETZ, Oil Properties, LTD
P.O. Box #73406
Phoenix, AZ 85050

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent
☐ Addressee

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 **7008 1830 0001 4119 6106**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

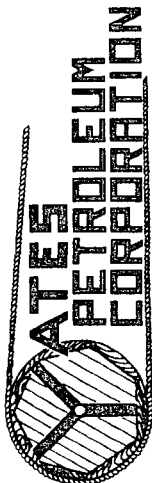
- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Restrictions

- ☐ Certified Mail cannot be used for:
- ☐ Certified Mail International
- ☐ NO INSURANCE for valuables, perishables, or hazardous materials
- ☐ For an additional delivery. To receive a duplicate receipt (PS Form 3811), a fee is required.
- ☐ For an addressee's endorsement.
- ☐ If a postmark is at the receipt is not valid.

IMPORTANT

PS Form 3800.



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6106
7008 1830 0001 4119 6106

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

(Enc. **Mayte Reyes-Production**

Restricted Delivery Fee
(Endorsement Required)

Total P

Sent To

Street, Apt.

or PO Box

City, State

ETZ, Oil Properties, LTD
P.O. Box #73406
Phoenix, AZ 85050

PS Form 3800, August 2006

See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

ETZ, George H. III A Single Man
1105 Xanthisma
McAllen, TX 78504

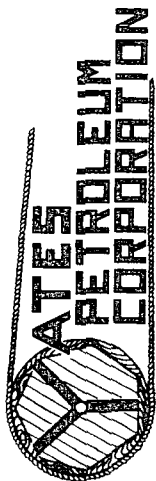
COMPLETE THIS SECTION ON DELIVERY

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

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

Article Number 7008 1830 0001 4119 6113
Transfer from service
Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Certified Mail
A mailing receipt
A unique identifier
A record of delivery
Important Reminder
Certified Mail
Certified Mail
NO INSURANCE
valuable, please
For an additional
delivery. To obtain
Receipt (PS Form 3811),
fee. Endorsement
a duplicate receipt
required.
For an address
addressee's
endorsement
If a postmark
cle at the time
receipt is not
IMPORTANT:
PS Form 3800, A



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6113
7008 1830 0001 4119 6113

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For:	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009
Re:	Mayte Reyes-Production
(Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	
Sent To:	ETZ, George H. III A Single Man
Street or PO:	1105 Xanthisma
City, St:	McAllen, TX 78504
PS Form 3800 August 2006	
See Reverse for Instructions	

ETZ
110
Mc

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:

ETZ, Southern Trust George H.
1105 Xanthisma
McAllen, TX 78504

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6120

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

Certified Mail

- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Return Receipt

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery. To obtain Receipt (PS Form 3800), fee. Endorsement a duplicate is required.
- ☐ For an addressee's endorsement
- ☐ If a postmark is at the post office receipt is not required.

IMPORTANT:
PS Form 3800, A

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:

ETZ, Southern Trust George H.
1105 Xanthisma
Mcallen, TX 78504

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6120

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

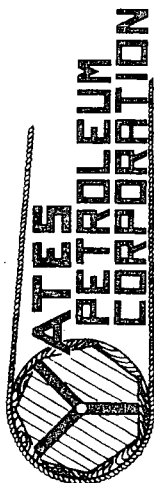
Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Return Receipt

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain Receipt (PS Form 3800, A) fee. Endorse a duplicate receipt is required.
- For an additional addressee's endorsement.
- If a postmark is at the post office receipt is not required.

IMPORTANT:
PS Form 3800, A



YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6120
7008 1830 0001 4119 6120

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

F Mayte Reyes-Production
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Price

Sent To

Street, A
or PO B.

City, State

ETZ, Southern Trust George H.
1105 Xanthisma
McAllen, TX 78504

PS Form 3800, August 2006

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Write your name and address on the reverse of this card to return the card to you. Do not write on the front of the mailpiece, as the front of the card is for the addressee.

Addressed to:

George H. Sr., Trust
Xanthisma
Ilen, TX 78504

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Number 7008 1830 0001 4119 6137
PS Form 3800, Aug 1999
3811, February 2004 Domestic Return Receipt 102595-02 M-1540

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain a Receipt (PS Form 3800), fee. Endorse on a duplicate receipt required.
- For an additional addressee's address endorsement
- If a postmark is placed at the post office, receipt is not required.

IMPORTANT: Send to:
PS Form 3800, Aug 1999

11/11/09 11:11:11 AM

7008 1830 0001 4119 6137
7008 1830 0001 4119 6137

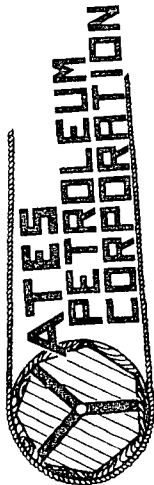
U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage)

For delivery to:
Dayton FN #1 & #2, Dayton FC
Dayton FO #2. Surface Commi
Oil Conservation Division/Santa Fe C
September 28, 2009
R Mayte Reyes-Production
(Endor.)

Restricted Delivery Fee
(Endorsement Required)

Total P_c
Sent To
Street, Ap.
or PO Box
City, State,
ETZ, George H. Sr., Trust
1105 Xanthisma
McAllen, TX 78504

PS Form 3800, August 2006 See R



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

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:

ETZ, Benjamin Cole
1105 Xanthisma
McAllen, TX 78504

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 6144

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

A. Signature

☐ Agent
☐ Addressee

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

Certified Mail

- ☒ A mailing receipt
- ☒ A unique identification number
- ☒ A record of delivery

Important Reminders

- ☒ Certified Mail
- ☒ Certified Mail
- ☒ NO INSURANCE for valuables, please
- ☒ For an additional delivery, To obtain Receipt (PS Form 3811), fee, Endorsement a duplicate receipt required.
- ☒ For an additional addressee's endorsement
- ☒ If a postmark is not, receipt is not.

IMPORTANT: S

PS Form 3800, Aug

7008 1830 0001 4119 6144
7008 1830 0001 4119 6144

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

R. Mayte Reyes-Production
(Endorsement Required)

Here

Restricted Delivery Fee
(Endorsement Required)

Total Postage

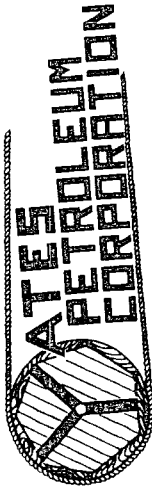
Sent To

Street, Apt.
or PO Box 1

City, State, & Zip

ETZ, Benjamin Cole
1105 Xanthisma
McAllen, TX 78504

PS Form 3800, August 2005 See Reverse for Instructions



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

MAILING LABEL 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:

Amcon Resources, INC
P.O. Box #3025
Oklahoma City, OK 73101

Article Number **7008 1830 0001 4119 6151**
(Transfer from service)

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X ☐ Addressee

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

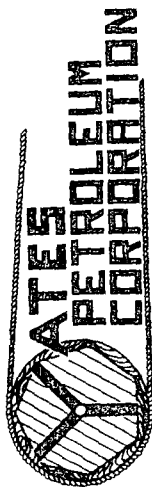
Certified Mail

- ☐ A mailing receipt
- ☐ A unique identification number
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery. To obtain Receipt (PS Form 3811, fee. Endorsement a duplicate return required.
- ☐ For an additional addressee's address endorsement
- ☐ If a postmark is late at the post office, receipt is not valid

IMPORTANT: See PS Form 3800, August 2003



YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL

7008 1830 0001 4119 6151
7008 1830 0001 4119 6151

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

(Endo) Mayte Reyes-Production

Restricted Delivery Fee
(Endorsement Required)

Total Pos

Sent To

Street, Apt.
or PO Box
City, State,

Amcon Resources, INC
P.O. Box #3025
Oklahoma City, OK 73101

PS Form 3800, August 2006 See Reverse

Am
P.O.
OK

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete restricted Delivery is desired. name and address on the reverse can return the card to you. card to the back of the mailpiece, front if space permits.

Issued to:

Idene Elora
 17000 BLVD
 Detroit, MI 49283-9633

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

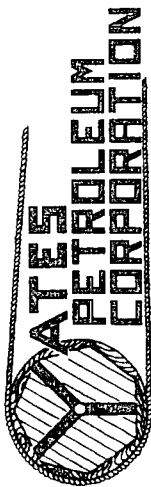
B. Received by (Printed Name) C. Date of Delivery

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

7008 1830 0001 4119 6168
 Domestic Return Receipt
 February 2004
 102595-02-M-1540

Certified Mail
☐ A mailing receipt
☐ A unique identification number
☐ A record of delivery
Important Return Receipt
☐ Certified Mail
☐ Certified Mail
☐ NO INSURANCE for valuables, please
☐ For an additional delivery. To receive a Receipt (PS Form 3800, A) fee. Endorsement a duplicate receipt is required.
☐ For an addressee's endorsement
☐ If a postmark is at the time of receipt is not
IMPORTANT:
 PS Form 3800, A



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6168
7008 1830 0001 4119 6168

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For	Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production <small>(Endorsement Required)</small>
Restricted Delivery Fee <small>(Endorsement Required)</small>	
Total Postage	
Sent To	Ryff, Haroldene Elora 3052 Arborwood BLVD Spring Arbor, MI 49283-9633
Street, Apt. N or PO Box No.	
City, State, Zi	
PS Form 3800, August 2006	
See Reverse for Instructions	

PLACE STICKER TOP TO TOP OF ENVELOPE TO THE RIGHT

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:

Wright, Bruce
P.O. Box #2643
Eugene, OR 97402

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

☐ Agent
☐ Addressee

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

2. Article Number **7008 1830 0001 4119 6175**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery. To obtain Receipt (PS Form 3811), a duplicate receipt is required.
- ☐ For an additional addressee's endorsement
- ☐ If a postmark is clear at the post office, receipt is not required.

IMPORTANT: Send to Post Office

PS Form 3800, August 2003

US MAIL

7008 1830 0001 4119 6175
7008 1830 0001 4119 6175

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

(End) Mayte Reyes-Production

Restricted Delivery Fee
(Endorsement Required)

Total Pos

Sent To

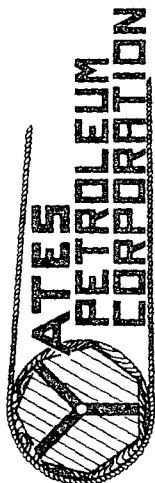
Street, Apt.
or PO Box

City, State, ZIP

Wright, Bruce
P.O. Box #2643
Eugene, OR 97402

PS Form 3800, August 2006

See Reverse for Instructions



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED



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:

Wright, Brian C.
6305 American Court
Nashville, TN 37209

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X ☐ Addressee

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

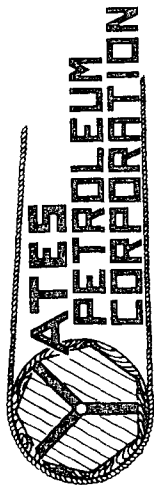
- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7008 1830 0001 4119 6182**
(Transfer from service)

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

Certified Mail
☐ A mailing receipt
☐ A unique identifier
☐ A record of delivery
Important Reminder
☐ Certified Mail
☐ Certified Mail
☐ NO INSURANCE
valuables, please
☐ For an additional
delivery. To obtain
Receipt (PS Form
fee. Endorse a duplicate
required.
☐ For an additional
addressee's
endorsement
☐ If a postmark
clear at the post
receipt is not
IMPORTANT:
PS Form 3800, April



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6182
7008 1830 0001 4119 6182

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

(Endo) Mayte Reyes-Production
Restricted Delivery Fee
(Endorsement Required)

Total Po:

Wright, Brian C.
6305 American Court
Nashville, TN 37209

Sent To
Street, Ap
or PO Box
City, State

PS Form 3800, August 2006 See Reverse for Instructions

PER: 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 that we can return the card to you. Attach this card to the back of the mailpiece, on the front if space permits.

Mailpiece Addressed to:

Forthen, Mary Fletch
317 N. Monroe
Little Rock, AR 72207

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

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

Article Number 7008 1830 0001 4119 6199
Transfer from service label)

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

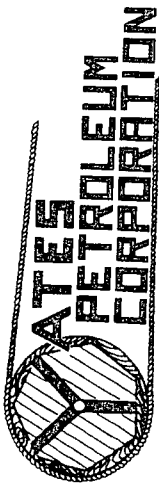
- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail must be paid for by the sender.
- NO INSURANCE coverage for valuables, please.
- For an additional delivery. To obtain a Return Receipt (PS Form 3800), a duplicate return receipt is required.
- For an additional addressee's authorization, an endorsement is required.
- If a postmark is placed at the post office, a return receipt is not required.

IMPORTANT: See
PS Form 3800, August 2003

CERTIFIED MAIL



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6199
7008 1830 0001 4119 6199

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
(End)	Mayte Reyes-Production
Restricted Delivery Fee	
To	Worthen, Mary Fletch
Sen	1817 N. Monroe
St	Little Rock, AR 72207
City	
PS Form 3800, August 2006	
See Reverse for Instructions	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

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:

White, Jack H. & Frankie M.
1703 Watson CT.
Carlsbad, NM 88220

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

☐ Agent
☐ Addressee

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number
(Transfer from service) 7008 1830 0001 4119 6205

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

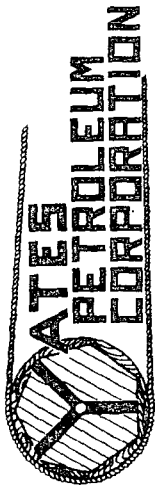
Certified Mail

- A mailing receipt
- A unique identification number
- A record of delivery

Important Reminder

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain a Receipt (PS Form 3811), fee. Endorse a duplicate on required.
- For an additional addressee's endorsement
- If a postmark is placed at the place of receipt is not

IMPORTANT:
PS Form 3800, April 2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6205
7008 1830 0001 4119 6205

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
Re (Endors)	Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fee	
Sent	White, Jack H. & Frankie M.
Street or PO	1703 Watson CT.
City, S	Carlsbad, NM 88220
PS Form	See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Walden, Sue C.
3428 Sage Dr.
Laramie, WY 82070-5758

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X ☐ Addressee

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7008 1830 0001 4119 6212**

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

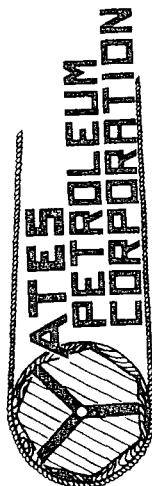
Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Return Receipt

- Certified Mail
- Certified Mail with Restricted Delivery
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain a Return Receipt (PS Form 3811), a duplicate return receipt is required.
- For an additional addressee's endorsement.
- If a postmark is required at the time of receipt is not required.

IMPORTANT:
PS Form 3800, February 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6212
7008 1830 0001 4119 6212

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1
Dayton FO #2, Surface Comming
Oil Conservation Division/Santa Fe Office
September 28, 2009

(End of Restricted Delivery Mail)
Mayte Reyes-Production

Walden, Sue C.
3428 Sage Dr.
Laramie, WY 82070-5758

Se
St
or
Ch

PS Form 3800, August 2006 See Reverse

- ☐ 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:

Waide, Glennis Marie
C/O Sue Weber
1907 Buena Vista Dr. S. E. TR. #12
Albuquerque, NM 87106

A. Signature

X

☐ Agent

☐ Addressee

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number
(Transfer from service label) 7008 1830 0001 4119 6229

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

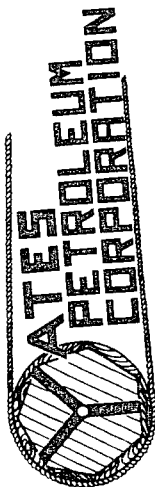
Certified Mail

- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Return Receipt

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery, To: Receipt (PS fee, Endorse a duplicate: required).
- ☐ For an addressed endorsement
- ☐ If a postmark at the receipt is

IMPORTANT!
PS Form 3800



YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6229
7008 1830 0001 4119 6229

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage)

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

Dayton FN #1 & #2, Dayton FG #
Dayton FO #2. Surface Commingl
Oil Conservation Division/Santa Fe Office
September 28, 2009

(E) Mayte Reyes-Production

Re
(En) Waide, Glennis Marie

Tr C/O Sue Weber

1907 Buena Vista Dr. S. E. TR. #1
Albuquerque, NM 87106

Ser

Str
or t

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse

#12

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:

Person, Mary Culpepper
Mount #0273 5014-8501
Box #541297
Critt Island, FL 32954-1297

Article Number
(transfer from service label)

7008 1830 0001 4119 6236

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail must be paid for.
- Certified Mail is not insurable for valuable contents, please use Registered Mail for valuables.
- For an additional delivery. To obtain a Receipt (PS Form 3800), Endorsement "F" is required.
- For an additional addressee's endorsement "F" is required.
- If a postmark or cancellation mark is not present, the receipt is not valid.

IMPORTANT: Save
PS Form 3800, August 2003

☐ Addressee

B. Received by (Printed Name)

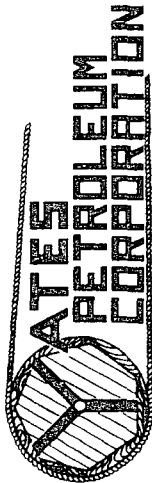
C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes



YATES BUILDING — 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL™

7008 1830 0001 4119 6236
7008 1830 0001 4119 6236

U.S. Postal Service™	
CERTIFIED MAIL™ RE	
(Domestic Mail Only, No Insurance)	
For delivery information visit our webs	
Dayton FN #1 & #2, Da	
Dayton FO #2. Surface	
Oil Conservation Division/S	
September 28, 2009	
(Endo	Mayte Reyes-Productio
Restricted Delivery Fee	
(Endorsement)	
Pearson, Mary Culpepper	
Account #0273 5014-850	
Se	P.O. Box #541297
Sir	Merritt Island, FL 3295
or F	
City	
PS Form 3800, August 2006	

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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:

Harris, Mary E.
P.O. Box #53
Richmond, KS 66080

2. Article Number
(Transfer from service Tag)

7008 2830 0001 4129 5949

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

4. Restricted Delivery? (Extra Fee)

☐ Yes

3. Service Type

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

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

B. Received by (Printed Name)

C. Date of Delivery

A. Signature

X

☐ Agent
☐ Addressee

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Remin

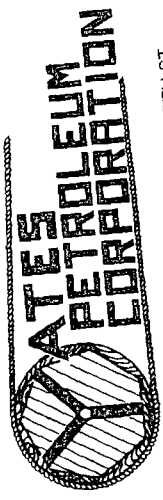
- ☐ Certified Mail n
- ☐ Certified Mail i
- ☐ NO INSURAN
valuables, ple
- ☐ For an additio
delivery. To ob
Receipt (PS F
fee, Endorse
a duplicate re
required.
- ☐ For an add
addressee's:
endorsemen
- ☐ If a postmar
cle at the p
receipt is ne

IMPORTANT:
PS Form 3800..

CERTIFIED MAIL™

7008 1830 0001 4119 5949
7008 1830 0001 4119 5949

U.S. Postal Service	
CERTIFIED MAIL - REG	
(Domestic Mail Only, No Insurance)	
FC	Dayton FN #1 & #2, Dayton Dayton FO #2. Surface C Oil Conservation Division/San September 28, 2009 Mayte Reyes-Production
(Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
SE SE SE SE	Harris, Mary E. P.O. Box #53 Richmond, KS 66080
PS Form 3800 August 2006	



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

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:

Hardgrave, Meredith
6012 E. 114th Street
Tulsa, OK 74137-7761

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X ☐ Addressee

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

2. Article Number **7008 1830 0003 4119 5956**
(Transfer from sent)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

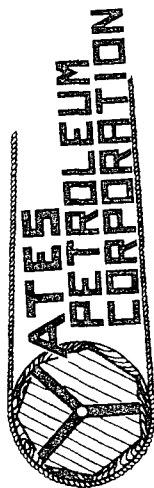
Certified Mail

- ☒ A mailing receipt
- ☒ A unique identification number
- ☒ A record of delivery

Important Reminder

- ☒ Certified Mail
- ☒ Certified Mail
- ☒ NO INSURANCE for valuables, please
- ☒ For an additional delivery, To Order Receipt (PS Form 3811), a fee, Endorsement, and a duplicate receipt are required.
- ☒ For an additional addressee's endorsement
- ☒ If a postmark cancellation at the post office receipt is not required.

IMPORTANT: See PS Form 3800, August 2003



YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1630 0001 4119 5956
7008 1630 0001 4119 5956

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only, No Insurance Coverage)</i>	
For delivery to:	Dayton FN #1 & #2, Dayton FC Dayton FO #2. Surface Commi Oil Conservation Division/Santa Fe C September 28, 2009 Mayte Reyes-Production
Ret (Endorsement)	
Restricted Delivery Fee (Endorsement Required)	
Total	
Sent To	Hardgrave, Meredith
Street, or PO	6012 E. 114 th Street
City, State	Tulsa, OK 74137-7761
PS Form 3800, August 2006	

Hard
6012
Tuls

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

FR: COMPLETE THIS SECTION

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

Card Addressed to:

Ms. Norma Jeanne
Moody CT
Houston, TX 76012

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X ☐ Agent
☐ Addressee

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

Article Number 7008 1830 0001 4119 5963
Transfer from service label

Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

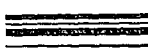
Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain a Receipt (PS Form 3811), a fee. Endorsement required.
- For an additional addressee's endorsement
- If a postmark is clear at the post office, receipt is not required.

IMPORTANT:

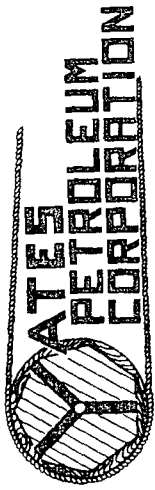
PS Form 3800, August 1999

U.S. MAIL



7008 1830 0001 4119 5963
7008 1830 0001 4119 5963

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
By (Endors)	Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total Post	
Sent To	Gupton, Norma Jenean
Street, Apt., or PO Box #	1902 Moody CT
City, State, ZIP	Arlington, TX 76012
PS Form 3800, August 2006	
See Reverse for Instructions	



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

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:

Fenton, Sharon K.,
3447 SE 35th ST
Topeka, KS 66605

Article Number

(Transfer from sent)

7008 1A30 0001 4119 5970

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables, please
- For an additional delivery. To obtain Receipt (PS Form 3811), fee. Endorsement a duplicate receipt is required.
- For an additional addressee's endorsement
- If a postmark is at the post office receipt is not

IMPORTANT:
PS Form 3800, April 2003

A. Signature

☒

☐ Agent
☐ Addressee

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

STANDARD MAIL

7008 1830 0001 4119 5970
7008 1830 0001 4119 5970

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

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

OFFICIAL

Dayton FN #1 & #2, Dayton
Dayton FO #2, Surface C
Oil Conservation Division/Santa

Return
(Endorsement)

September 28, 2009

Restricted C
(Endorsement)

Mayte Reyes-Production

Total P

Sent To

Fenton, Sharon K.

Street, A
or PO Box

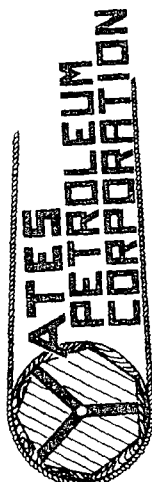
3447 SE 35th ST

City, State

Topeka, KS 66605

PS Form 3800, August 2006

See Reverse



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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:

Coryell, Birdie F.
P.O. Box #1681
Little Rock, AR 72203-1681

2. Article Number

Transfer from service

7008 1830 0001 4119 5987

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

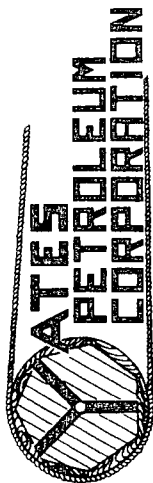
Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Remi

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for
valuables, please
- ☐ For an additional
delivery. To obtain
Receipt (PS Form 3800,
fee. Endorse "no
duplicate receipt
required."
- ☐ For an additional
addressee's address
endorsement
- ☐ If a postmark
circle at the post
receipt is not

IMPORTANT:
PS Form 3800, Aug 1990



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL

7008 1830 0001 4114 3 JUL
7008 1830 0001 4119 5987

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage)

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

Dayton FN #1 & #2, Dayton FG
Dayton FO #2. Surface Comm
Oil Conservation Division/Santa Fe Of
September 28, 2009
Mayte Reyes-Production

Rt
(Endorsement)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

Sent To

Street, Apt.,
or PO Box

City, State, ZIP

Coryell, Birdie F.
P.O. Box #1681
Little Rock, AR 72203-1681

PS Form 38

- ☐ Print your name and address on the card 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:

Collins, Sheryl A.
3032 SW Lydia Ave
Apt 203
Topeka, KS 66614-2947

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

2. Article Number
(Transfer from service label)

7008 1830 0001 4119 5994

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

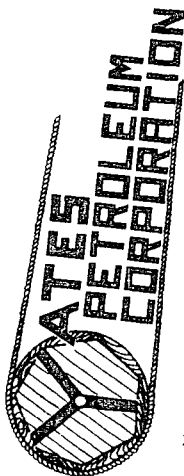
Certified Mail

- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail must be paid for at the time of mailing.
- ☐ Certified Mail is not insurable for more than \$500.
- ☐ NO INSURANCE for valuables, please.
- ☐ For an additional delivery, To obtain a Receipt (PS Form 3811), Endorsement, a duplicate return receipt is required.
- ☐ For an additional addressee's address, Endorsement is required.
- ☐ If a postmark is placed at the post office, the receipt is not valid.

IMPORTANT: See PS Form 3800, August 2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL

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

Dayton FN #1 & #2, Dayton
Dayton FO #2. Surface Com
Oil Conservation Division/Santa Fe
September 28, 2009
(End. Mayte Reyes-Production)

Restricted Delivery Fee
(Endorsement Required)

To
Collins, Sheryl A.
3032 SW Lydia Ave
Apt 203
Topeka, KS 66614-2947

7008 1830 0001 4119 5994
7008 1830 0001 4119 5994

PS Form 3800, August 2006 See Reverse

7 DAY DELIVERY

UNDER: 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:

Collins, Sheryl & Craig
332 SW Lydia Ave
Apt 203
Opeka, KS 66614-2947

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent

B. Received by (Printed Name)
☐ Addressee

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number 7008 1830 0001 4119 6007
Transfer from service
Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Certified Mail

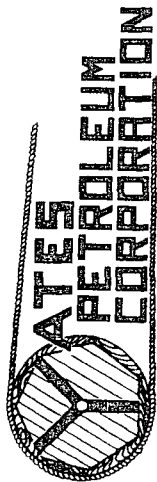
- A mailing
- A unique identifier
- A record of

Important Receipt

- Certified Mail
- Certified Mail
- NO INSURANCE for valuables.
- For an addressee, To Receipt (PS Form 3800) fee. Endorser's duplicate required.
- For an addressee, endorsement.
- If a postmark is at the receipt is a

IMPORTANT

PS Form 3800



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6007
7008 1830 0001 4119 6007

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For	Dayton FN #1 & #2, Dayton FG #1 Dayton FO #2. Surface Commingl Oil Conservation Division/Santa Fe Office September 28, 2009
Rel (Endorsement Required)	Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total	Collins, Sheryl & Craig 3032 SW Lydia Ave Apt 203 Topeka, KS 66614-2947
Sent To	
Street, or PO E	
City, St.	
PS Form 3800, August 2006	
See Reverse for	

UNDER: 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.

Title Addressed to:

Mr. Jimmie Lee
P.O. Box #63
Jin, OK 73538

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

☐ Agent
☐ Addressee

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

Postage Number 7008 1830 0001 4119 6014
Postage from ser
13811, February 2004 Domestic Return Receipt

102595-02-M-1540

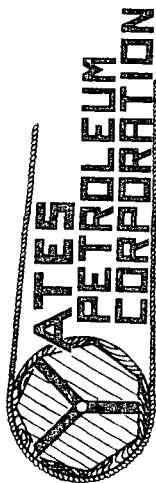
Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail must be paid for at the time of mailing.
- Certified Mail is not insurable for more than \$500. For insured mailpieces, please use Registered Mail or Insured Mail.
- For an additional delivery, To obtain a Return Receipt (PS Form 3800), please attach a duplicate return receipt to the mailpiece.
- For an additional addressee's address, please attach a duplicate return receipt to the mailpiece.
- If a postmark cancellation is not possible, the return receipt is not valid.

IMPORTANT: See
PS Form 3800, August 2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED



7008 1830 0001 4119 6014
7008 1830 0001 4119 6014

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery to addressee, please use the following address:	
Dayton FN #1 & #2, Dayton FG #1	
Dayton FO #2. Surface Comming	
Oil Conservation Division/Santa Fe Offi	
September 28, 2009	
Re (Endors.)	Mayte Reyes-Production
Restricted Delivery Fee (Endorsement Required)	
Total Pr	
Sent To	Collier, Jimmie Lee
Street, Apt. or PO Box	P.O. Box #63
City, State,	Elgin, OK 73538
PS Form 3800, August 2006	
See Reverse for	

UNDER: 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:

Brown, Kenneth W.
7677 Jayhawk Drive
Riverside, CA 92509

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

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

Article Number **7008 1A30 0001 4119 6021**
(Transfer from service)

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

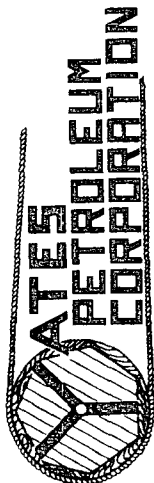
Certified Mail

- ☐ A mailing receipt
- ☐ A unique identification number
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail
- ☐ Certified Mail
- ☐ NO INSURANCE for valuables, please
- ☐ For an additional delivery, To obtain Receipt (PS Form 3811), fee. Endorsement a duplicate return required.
- ☐ For an additional addressee's address, endorsement.
- ☐ If a postmark is placed at the post office, receipt is not required.

IMPORTANT: S
PS Form 3800, August 2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 6021
7008 1830 0001 4119 6021

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

For ☐ www.usps.com
Dayton FN #1 & #2, Dayton FG
Dayton FO #2. Surface Comm
Oil Conservation Division/Santa Fe Off
September 28, 2009
Mayte Reyes-Production

(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required) ☐

Total F

Sent To Brown, Kenneth W.
7677 Jayhawk Drive
Riverside, CA 92509
Street, or PO B
City, Sta

PS Form 3800, August 2006 See Reverse

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PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

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:

Brown, John A.
10001 Peace way Unit 1319
Las Vegas, NV 89147-8097

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service) 7008 1830 0001 4119 6038

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

Certified Mail

- ☐ A mailing receipt
- ☐ A unique identifier
- ☐ A record of delivery

Important Reminders

- ☐ Certified Mail must be paid for at the time of mailing.
- ☐ Certified Mail is not insurable for more than \$500. For insured mailpieces, please use Registered Mail or Insured Mail.
- ☐ For an additional delivery service, such as Restricted Delivery, Signature Required, or Signature Confirmation, a separate fee is required.
- ☐ For an additional addressee's address, a separate fee is required.
- ☐ If a postmark cancellation is required, the postmark must be cancelled at the time of mailing.

IMPORTANT: See
PS Form 3800, August 2003

CERTIFIED MAIL

7008 1830 0001 4119 6038
7008 1830 0001 4119 6038

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009

Return
(Endorsement)

Restricted Delivery Fee
(Endorsement Required)

Mayte Reyes-Production

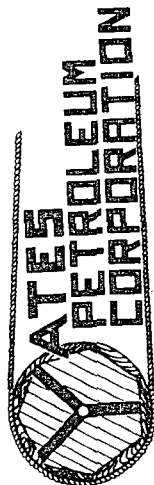
Total

Sent To

Street,
or PO Box
City, State

Brown, John A.
10001 Peace way Unit 1319
Las Vegas, NV 89147-8097

PS Form 3800, August 2006 See Reverse for Instructions



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

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:

Major, John C & Stephen
7751 S Memorial Drive
Apt #5209
Tulsa, OK 74133

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number **7008 1830 0001 4119 5826**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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1000 FOURTH ST.
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REQUESTED

7008 1830 0001 4119 5826
7008 1830 0001 4119 5826

U.S. Postal Service	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2. Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
(Enc Restricted Delivery Fee (Endorsement Required)	Mayte Reyes-Production
Total	
Sent To	Major, John C & Stephen
Street, or PO	7751 S Memorial Drive
City, S	Apt #5209 Tulsa, OK 74133
PS Form 3800, August 2006	
Instructions	

Major
7751
Apt #
Tulsa



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:

Harrel, Landa M. & D.
P.O. Box #443
Fletcher, OK 73541

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number **7008 1830 0001 4119 591A**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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SOLEUM CORPORATION

SOUTH FOURTH ST.
ICO 88210-2118

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Hart
P.O.
Fletcher

US Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
(Encl. Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)	
Total	Harrel, Landa M. & D.
Sent To	P.O. Box #443
Street, or P.O.	Fletcher, OK 73541
City, St.	
PS Form 3800, August 2006	
See Reverse for Instructions	

7008 1630 0001 4119 5918
2008 1630 0001 4119 5918

PS Form 3811, February 2004

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:

Knight, Charlyce, Life Estate
Remaidermen - Stuart McDonald
413 Peery Parkway
Golden, CO 80403-1539

2. Article Number

(Transfer from service lat

7008 1830 0001 4119 5932

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

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

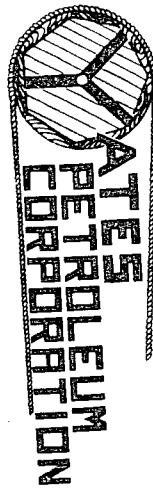
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

102595-02-M-1540

Certified Mail
A mailing
A unique
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PS Form 3800



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information, visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Return (Endorsement) Mayte Reyes-Production (Restricted Delivery Fee) <input type="text"/>
Knight, Charlyce, Life Estate Remaidermen - Stuart McDonald 413 Peery Parkway Golden, CO 80403-1539	Sent to Street, Apt or PO Box City, State
Total P	PS Form 3800, August 2006 See Reverse for Instructions

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7008 1830 0001 4119 5932
7008 1830 0001 4119 5932

CERTIFIED MAIL
UNITED STATES POSTAL SERVICE

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:

Stokovaz, Thomas F.
1311 Redwood Dr.
Loveland, CO 80538-4130

2. Article Number
(Transfer from service it)

7008 1830 0001 4119 5925

PS Form 3811, February 2004

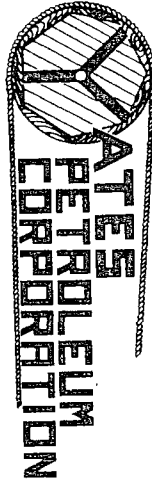
Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
☒ Agent
☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1?
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



YATES BUILDING - 105 SOUTH FOURTH ST.
 ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5925
 7008 1830 0001 4119 5925

U.S. Postal Service		CERTIFIED MAIL RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information, see back of envelope.					
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office		September 28, 2009		Return (Endorsement Required)	
Mayte Reyes-Production		Restricted Delivery Fee (Endorsement Required)		To	
Sen Stokovaz, Thomas F.		Sff 1311 Redwood Dr.		City of Loveland, CO 80538-4130	
PS Form 3800, August 2009					

Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Hopper, Jesma
2926 Columbine
Wichita, KS 67204-5323

2. Article Number

(Transfer from service label)

7008 1830 0001 4119 5901

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

Certified Mail
☐ A mailing receipt
☐ A unique identifier
☐ A record of delivery
Important Return Receipt
☐ Certified Mail
☐ Certified Mail
☐ NO INSURANCE
☐ For an additional fee, a duplicate receipt is required.
☐ For an addressee's endorsement, a duplicate receipt is required.
☐ If a postmaster is not available at the time of delivery, a receipt is not required.
IMPORTANT
PS Form 3800

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FOURTH ST.
10-2118

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Hopper, J
2926 Col
Wichita,

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information when sent	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle - Oil Conservation Division/Santa Fe Office September 28, 2009	Endor: Mayte Reyes-Production (Endorsement Required)
Restricted Delivery Fee	
Tot	
Sent	7008 1630 0001 4119 5901
Street: 2926 Columbine	7008 1630 0001 4119 5901
City, St. Wichita, KS 67204-5323	
PS Form 3800, August 2006	
See Reverse for Instructions	

REGISTERED MAIL

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:

Lundblade, Lois M.
527 E. Clackamas Cir
Woodburn, OR 97071

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7008 1830 0001 4119 5840

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Registered Mail
unique identifier
mailing receipt
record of delivery
For an additional
delivery, To obtain
receipt (PS Form 3800, A)
For an addressee's
endorsement
if a postmark
is at the place
receipt is no
APPORTANT:

SOLEUM CORPORATION

SOUTH FOURTH ST.
ICO 88210-2118

E REQUESTED

CERTIFIED MAIL

US Postal Service		CERTIFIED MAIL RECEIPT		(Domestic Mail Only, No Insurance Coverage Provided)	
For		Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle		Oil Conservation Division/Santa Fe Office	
September 28, 2009		Mayte Reyes-Production		(Endorsement required)	
Restricted Delivery Fee		(Endorsement Required)		Total Postage	
7008 1830 0001 4119 5840		7008 1830 0001 4119 5840		7008 1830 0001 4119 5840	
Sent to		Lundblade, Lois M.		527 E. Clackamas Cir	
Street, Apt. No.		City, State, ZIP		Woodburn, OR 97071	
or PO Box No.		PS Form 3800		(See Reverse for Instructions)	

Lundblade, Lois M.
527 E. Clackamas Cir
Woodburn, OR 97071

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Martin, Julie J.
P.O. Box #10911
Southport, NC 28461-0911

2. Article Number
(Transfer from serv)

7008 1830 0001 4119 5857

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1E

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? ☐ 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

PS Form 3811, February 2004

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Martin
P.O. B
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U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1,	Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office	
September 28, 2009	
(Endo Mayte Reyes-Production	
Restricted Delivery Fee	
(Endorsement Required)	
Tot	
Sent	City
or P	Street
P.O. Box #10911	
Southport, NC 28461-0911	
PS Form 3800, August 2006	
See Reverse for Instructions	

7008 1A30 0001 4119 5857
7008 1A30 0001 4119 5857

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS TO OLD IT DOTTED LINE

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:

Lundblade, Mary Lou
511 W. Ness St.
Valley Center, KS 67147-4029

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number

Domestic Return Receipt

7008 1830 0001 4119 5864

Domestic Return Receipt

102595-02-M-1540

U.S. MAIL

2008 SOUTH FOURTH ST.
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REQUESTED

Lundb
511 W
Valley

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 (End. Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)	7008 1830 0001 4119 5864
Total P	7008 1830 0001 4119 5864
Sent To Lundblade, Mary Lou 511 W. Ness St. Valley Center, KS 67147-4029	7008 1830 0001 4119 5864
City, State or PO Box	7008 1830 0001 4119 5864
PS Form 3800, August 2006	
See Reverse for Instructions	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS FOLD AT TOP

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Lopez, Sonja 912 Fairview Ave Canon City, CO 81212		B. Received by (Printed Name)	C. Date of Delivery
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from ser 7006 1830 0001 4119 5871)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	
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1210-2118

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Lopez
912 Fairview Ave
Canon

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided.)
For delivery information visit www.usps.com
Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
(End Mayte Reyes-Production
Restricted Delivery Fee
Endorsement Required)
Total Postage:
Sent To: Lopez, Sonja
912 Fairview Ave
Canon City, CO 81212
City, State, or PO Box
PS Form 3800, August 2006 See Reverse for Instructions

7008 1830 0001 4119 5871
7008 1830 0001 4119 5871

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Lawson, Peggy Sue
C/O Brian W. Copple
Bassett & Copple, LLP
6156 Jays Way
Milton, FL 32570

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
X ☐ Addressee
- 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

2. Article Number 7008 1830 0001 4119 5888
(Transfer from serv...)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SOLEUM CORPORATION

2008 SOUTH FOURTH ST.
NO 88210-2118

REQUESTED

Lawson, Peggy
C/O Brian W.
Bassett & Co
6156 Jays Way
Milton. FL 32570

U.S. Postal Service		7008 1830 0001 4119 5888	
CERTIFIED MAIL RECEIPT		7008 1830 0001 4119 5888	
(Domestic Mail Only, No Insurance Coverage Provided)			
For delivery to addressee only			
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009			
Rel Mayte Reyes-Production (Endorsement Required)			
Total Lawson, Peggy Sue			
Sent To C/O Brian W. Copple			
Street Bassett & Copple, LLP			
City, State or PO Box 6156 Jays Way			
City, State or PO Box Milton, FL 32570			
PS Form 3800, August 2006			
See Reverse for Instructions			

CERTIFIED MAIL

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:

Hopkins, Flora Jane
C/O Loma Hopkins Weber
24476 Chamalea Drive
Mission Viejo, CA 92691-4821

COMPLETE THIS SECTION ON DELIVERY

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

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

2. Article Number

(Transfer from serv)

7008 1830 0001 4119 5895

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES

UATH ST.
2118

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PS Form 3800, August 2006
See Reverse for Instructions

City, State, ZIP+4
Street
or PO
Mission Viejo, CA 92691-4821

Sent 1
24476 Chamailea Drive
C/O Loma Hopkins Weber
Hopkins, Flora Jane
Total
Endorsement
Restricted Mailmark Fee
Mayte Reyes-Production
September 28, 2009
Oil Conservation Division/Santa Fe Office
Dayton FO #2, Surface Commingle
Dayton FN #1 & #2, Dayton FG #1,
For delivery information visit our website at www.usps.com

U.S. Postal Service
CERTIFIED MAIL - RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

7008 1830 0001 4119 5895
7008 1830 0001 4119 5895



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:

Marcotte, Helen C & Stephen
209 E. 15th Street
Concordia, KS 66901

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service tag)

7008 1830 0001 4119 5833

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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TION

IRTH ST.

2118

STED

Marcotte,
209 E. 15
Concordia

PS Form 3800, August 2009
See Reverse for Instructions

Sent To	Marcotte, Helen C & Stephen
Street, or PO B	209 E. 15 th Street
City, Sta	Concordia, KS 66901

Total F

Restricted Delivery Fee
(Endorsement Required)

Mayte Reyes-Production

September 28, 2009

Oil Conservation Division/Santa Fe Office

Dayton FO #2, Surface Commingle

Dayton FN #1 & #2, Dayton FG #1,

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

7008 1830 0001 4119 5833
7008 1830 0001 4119 5833

POSTNET
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Swearingen, Grant
209 S. Ashley Park
Wichita, KS 67209

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7008 1830 0001 4119 5673

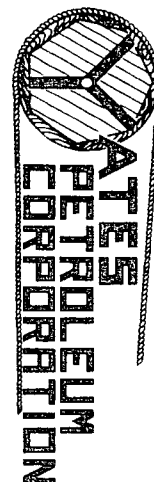
(Transfer from s)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
■ A mailing receipt
■ A unique identifier
■ A record of delivery
Important Reminder
■ Certified Mail
■ Certified Mail
■ NO INSURANCE
■ For an additional fee, Endorsement (PS Form 3800, A) is required.
■ For an addressee's endorsement, a duplicate receipt is not required.
IMPORTANT:
■ If a postmaster's receipt is not required, PS Form 3800, A



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008 1830 0001 4119 5673
7008 1830 0001 4119 5673

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

Dayton FN #1 & #2, Dayton FG #1,
Dayton FO #2, Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
Mayte Reyes-Production
(End Restricted Delivery Fee Endorsement Required)

Swearingen, Grant
209 S. Ashley Park
Wichita, KS 67209

PS Form 3800, August 2006
Swearingen, Grant
209 S. Ashley Park
Wichita, KS 67209

CERTIFIED MAIL

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:

3. ~~Service~~ Type

4. Restricted Delivery? (Extra Fee) ☐ Yes

(Transfer from service)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Return

- Certified Mail
- Certified Mail
- NO INSURANCE VALUES, PLEASE

For an additional delivery, (PS Receipt, Endorsement, duplicate required.

- For an address and endorsement
- If a postage receipt is included at the time

IMPORTANT! PS Form 3800



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service CERTIFIED MAIL RECEIPT <small>(Domestic Mail Only. No Insurance Coverage Pro- ord delivery information visit our website at usps.com)</small>		Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 (Encl) Mayte Reves-Production Restricted Delivery Fee (Endorsement Required)		Total Postage 7008 1830 0001 4119 5680 7008 1830 0001 4119 5680	
Sent To Swearingen, Evalyn 1250 N. 50 th Rd. Jamestown, KS 66948-9547		Street, Apt. 1 or PO Box # City, State,		PS Form 3800, August 2006 See Reverse for Instructions	

POSTAGE WILL BE PAID BY ADDRESSEE

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</p> <p>Stanico Energy Corporation P.O. Box #32467 Oklahoma City, OK 73123-2467</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from se) 7008 1830 0001 4119 5697</p> <p>PS Form 3811, February 2004</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

102595-02-M-1540

Certified Mail

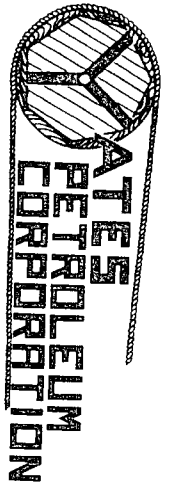
- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminder

- Certified Mail
- Certified Mail
- NO INSURANCE
- For an additional fee, Endorsement for an additional delivery (PS Form 3800, A)

IMPORTANT:

- If a postmaster receives a duplicate receipt, the postmaster will not be responsible for the loss or damage to the contents of the mailpiece.



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Stanico Ener
P.O. Box #3
Oklahoma C

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Endc Mayte Reyes-Production (Restricted Delivery Fee Enfranchisement Required)
Stanico Energy Corporation P.O. Box #32467 Oklahoma City, OK 73123-2467	7008 1830 0001 4119 5697 7008 1830 0001 4119 5697
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Singleterry, Judy Gushwa
P.O. Box #5071
Hobbs, NM 88241

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

Article Number

(Transfer from service label)

7008 1830 0001 4119 5703

Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
■ A mailing receipt
■ A unique identifier
■ A record of delivery
Important Reminder
■ Certified Mail
■ Certified Mail
■ NO INSURANCE
■ Valuable, please
For an additional
delivery. To obtain
Receipt (PS Form
fee. Endorsement
a duplicate return
required.
For an additional
addressee's address
endorsement.
If a postmark is
cle at the post
receipt is not
IMPORTANT:
PS Form 3800, April



YATES BUILDING - 106 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

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

Dayton FN #1 & #2, Dayton F	4119	5703
Dayton FO #2, Surface Contr	4119	5703
Oil Conservation Division/Santa Fe	0001	5703
September 28, 2009	0001	5703
Rel: Mayte Reyes-Production	0001	5703
(Endorsement)	0001	5703
Restriction/Endorsement Fee	0001	5703
Total P:	0001	5703
Sent To: Singleberry, Judy Gushwa	0001	5703
P.O. Box #5071	0001	5703
Street Address: Hobbs, NM 88241	0001	5703
City, State, or PO Box	0001	5703

PS Form 3800, August 2006

CERTIFIED MAIL

COMPLETE THIS SECTION

ns 1, 2, and 3. Also complete
ricted Delivery is desired.
me and address on the reverse
an return the card to you.
ard to the back of the mailpiece,
it space permits.

ssed to:

Ice Ann
Walnut Grove Lane
rt, MO 65279

3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail	Return Receipt for Merchandise	
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt		
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.		<input type="checkbox"/> Yes
			<input type="checkbox"/> Extra Fee

4. Restricted Delivery: (Excluded)

OT25 6119 5710

102595-02-M-1540

7008 4050

from services.

3811, February 1

Certified Mail

- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail
- Certified Mail
- NO INSURANCE

■ For an additional delivery, To Receipt (PS Form 3849, PSN 7530-01-000-9000) is required.

- For an address change, Endorsement (PS Form 3840, PSN 7530-01-000-9000) is required.
- If a postage meter is used at the time of mailing, a duplicate fee. Endorsement (PS Form 3840, PSN 7530-01-000-9000) is required.

IMPORTANCE

PS Form 3840, PSN 7530-01-000-9000

U.S. Postal Service
CERTIFIED MAIL, RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
DAYTON FN #1 & #2, DAYTON FG #1,
DAYTON FO #2. Surface Commingle
Oil Conservation Division/Santa Fe Office
September 28, 2009
(End) Mayte Reyes-Production
Restricted Delivery Fee
(Endorsement Required)
Sasse, Joyce Ann
10801 W. Walnut Grove Lane
Rocheport, MO 65279

COMPLETE THIS SECTION

items 1, 2, and 3. Also complete Restricted Delivery is desired. name and address on the reverse can return the card to you. card to the back of the mailpiece, front if space permits.

Addressed to:

Ronald Melvin
Indian Summer LN
Brent, CO 80132

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

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

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

Number 7008 1830 0001 4119 5727

11, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
■ A mailing receipt
■ A unique identification
■ A record of delivery
Important Reminders
■ Certified Mail
■ Certified Mail
■ Certified Mail
■ NO INSURANCE
For an additional fee, Endorsement (PS Form 3800, April 2004) is required.
■ For an additional fee, Endorsement (PS Form 3800, April 2004) is required.
■ If a postmark is not received at the post office, the postmark receipt is not valid.



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Rogers,
19955 I
Monum

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<small>(Domestic Mail Only. No Insurance Coverage Provided)</small>	
<small>For delivery information visit our website at www.usps.com</small>	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	
End: Mayte Reyes-Production	(Restricted Delivery Fee Endorsement Required)
Total	
Sent to: Rogers, Ronald Melvin	Street, or PO Box
19955 Indian Summer LN	City, State
Monument, CO 80132	
<small>PS Form 3800, August 2006 See Reverse for Instructions</small>	

7008 1830 0001 4119 5727
7008 1830 0001 4119 5727

CERTIFIED MAIL™

PS Form 3800, Aug 1995

1, 2, and 3. Also complete
 cited Delivery is desired.
 e and address on the reverse
 i return the card to you.
 d to the back of the mailpiece,
 if space permits.

d to:

1, Harry
 S. Richardson
 Asbury Dr. #104
 O 80014

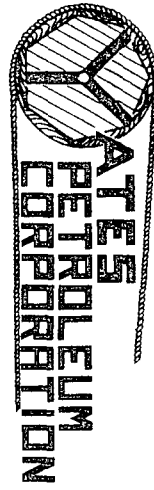
A. Signature		<input type="checkbox"/> Agent
X		<input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		

3. Service Type	<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
	<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes	

7006 1630 0001 4119 5734

February 2004 Domestic Return Receipt 102595-02-M-1540

Certified Mail
 A mailing receipt
 A unique identifier
 A record of delivery
Important Reminders
 Certified Mail is
 NO INSURANCE
 For an additional
 fee, Endorsement
 Receipt (PS Form
 delivery, To obtain
 a duplicate return
 required.
 For an additional
 addresser's au
 endorsement
 If a postmark
 cle at the pos
 receipt is not
IMPORTANT: S
 PS Form 3800, Aug



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Richards
C/O Lim
13363 E
Aurora,

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only. No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Endor: Mayte Reyes-Production (Endorsement Required)	
Total P	7008 1830 0001 4119 5734
Sent To	7008 1830 0001 4119 5734
Street, Apt or PO Box	13363 E. Asbury Dr. #104
City, State	Aurora, CO 80014
PS Form 3800, August 2006	
See Reverse for Instructions	

CERTIFIED MAIL

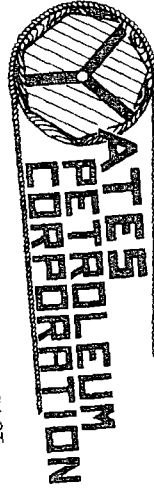
Print your name and address on the reverse
that we can return the card to you.
Attach this card to the back of the mailpiece,
on the front if space permits.

Be Addressed to:

Cardson, George E.
A Miami Rd.
Meridale, GA 31750

X	
B. Received by (Printed Name)	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
C. Date of Delivery	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Number from serv	7008 1830 0001 4119 5741
Domestic Return Receipt	
3811, February 2004	
102595-02-M-1540	

Certified Mail
☐ A mailing receipt
☐ A unique identifier
☐ A record of delivery
Important Return Receipt
☐ Certified Mail
☐ Certified Mail
☐ NO INSURANCE
☐ For an additional fee, Endorsement (PS Form 3800)
☐ For an address change, Endorsement (PS Form 3800)
☐ If a postmark is required, Endorsement (PS Form 3800)
IMPORTANT
 PS Form 3800



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Richardson
118A Miami
Fitzgerald

PS Form 3800, August 2006 See Reverse for Instructions

Sent To		Richardson, George E.	
Street, Apt. or PO Box		118A Miami Rd.	
City, State, Zip		Fitzgerald, GA 31750	
Total Postage			
Postage and Fees Paid (Endorsement Required)			
Mayte Reyes-Production			
September 28, 2009			
Oil Conservation Division/Santa Fe Office			
Dayton FO #2, Surface Commingle			
Dayton FN #1 & #2, Dayton FG #1.			

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

U.S. Postal Service
CERTIFIED MAIL[®] RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

7008 1A30 0001 4119 5741
7008 1A30 0001 4119 5741

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery is desired. Time and address on the reverse an return the card to you. Card to the back of the mailpiece, if space permits.

Addressed to:

Mr. Dale M.
14 Highway 82
Hills, TX 76240

A. Signature ☐ Agent
X ☐ Addressee

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

7008 1830 0001 4119 5758

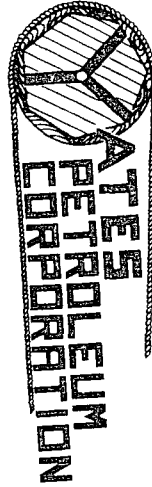
102595-02-M-1540

iber

Domestic Return Receipt

11, February 2004

Certified Mail
A mailing receipt
A unique identifier
A record of delivery
Important Reminder
Certified Mail
NO INSURANCE
For an additional fee, please place a duplicate receipt in the mailpiece.
For an additional fee, Endorsement is required.
If a postmark is not at the post office at the time of delivery, the addressee's endorsement is required.
IMPORTANT: receipt is not PS Form 3800, April 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Richard
5093 E.
Gainesv

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Sen Richardson, Dale M. 5093 East Highway 82 Gainesville, TX 76240
(For Mayte Reyes-Production Resorted Delivery Fee Endorsement Required)	City
PS Form 3800, August 2006 See Reverse for Instructions	

PS Form 3800, August 2006 See Reverse for Instructions

PLEASE PRINT THIS SECTION

is 1, 2, and 3. Also complete
 icted Delivery is desired.
 ie and address on the reverse
 1 return the card to you.
 'd to the back of the mailpiece,
 if space permits.

d to:

na Darlene
 ont St
 7601-1823

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes
 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

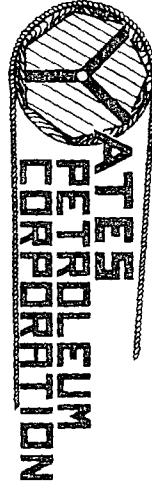
7008 1830 0001 4119 5772

February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
☐ A mailing receipt
☐ A unique identifier
☐ A record of delivery
Important Reminders
☐ Certified Mail
☐ Certified Mail
☐ NO INSURANCE
☐ For an additional fee, please
 delivery. To obtain a duplicate receipt, please
 fee. Endorsement required.
☐ For an addressee's endorsement
☐ If a postmark is not required
IMPORTANT:
 PS Form 3800, April 2003



YATES BUILDING - 106 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Pearson
1107 O
Hays.

U.S. Postal Service™		PS Form 3800, August 2006	
CERTIFIED MAIL™ RECEIPT		(Domestic Mail Only; No Insurance Coverage Provided)	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009		(e) Mayte Reyes-Production	
Restricted Delivery Fee		Endorsement	
Total		Sent to	
Pearson, Liana Darlene		Street	
1107 Oakmont St		City, St.	
Hays, KS 67601-1823		or PO	
7006 1830 0001 4119 5772		7006 1830 0001 4119 5772	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS (DO NOT COVER LINE)

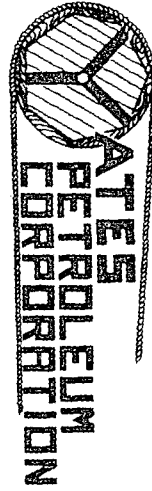
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to: Peden, Ralph W. 2704 Meadow Green Bedford, TX 76021		B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label) 7008 1830 0001 4119 5789		D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

102595-02-M-1540

Domestic Return Receipt

PS Form 3811, February 2004

Certified Mail
A mailing receipt
A unique identifier
A record of delivery
Important Reminders
Certified Mail is
NO INSURANCE
For an additional
value, please
Receipt (PS Form
fee. Endorse mail
a duplicate return
required.
For an additional
addresser's authentication
If a postmark on
receipt is not needed
at the post office
PS Form 3800, August



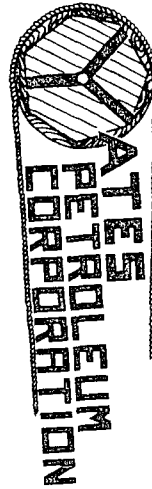
YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

CERTIFIED MAIL

U.S. Postal Service		CERTIFIED MAIL RECEIPT		(Domestic Mail Only - No Insurance Coverage)	
Dayton FN #1 & #2, Dayton FG #	Dayton FO #2, Surface Comming	Oil Conservation Division/Santa Fe Off	September 28, 2009	(E. Mayte Reyes-Production)	Restricted Delivery Fee (Endorsement Required)
Total			7008 1830 0001 4119 5789	7008 1830 0001 4119 5789	7008 1830 0001 4119 5789
Sent			Peden, Ralph W.		
Street or PO			2704 Meadow Green		
City & State			Bedford, TX 76021		
PS Form 3800, August 2006			S		

Peden,
2704 N
Bedford



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

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

Dayton FN #1 & #2, Dayton FG
Dayton FO #2, Surface Comm
Oil Conservation Division/Santa Fe Off
September 28, 2009
Encl
Mavte Reyes-Production
(Endorsement Required)
Total P
Sent To
Peden-Family Trust
4681 Diane Avenue
San Diego, CA 92117-2903
City, Sta
or PO B
Street A
PS Form 3800 August 2006 See Rev

Return the card to you.
to the back of the mailpiece,
space permits.

to:

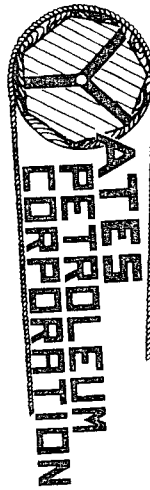
Arch Dr. NE
16, NM 87123

B. Received by (Printed Name)		C. Date of Delivery
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
7008 1830 0001 4119 5802		
PS Form 3800, August 2004		

Domestic Return Receipt

102595-02-M-1540

Important Reminders:
A mailing receipt
A unique identifier
A record of delivery
Certified Mail is
Certified Mail is
NO INSURANCE
For an additional
For an additional
Receipt (PS Form
fee. Endorsement
a duplicate return
required.
For an additional
addresser's endorsement
If a postmark is
receipt is not required.
PS Form 3800, August 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

Peace, Diana
12512 Monarch Dr. NE
Albuquerque, NM 87123

PS Form 3800, August 2006

City, State or PO Box	
Albuquerque, NM 87123	
Street, Apt. or P.O. Box	
12512 Monarch Dr. NE	
Sent To	
Peace, Diana	
Total	
7008 1830 0001 4119 5802	
7008 1830 0001 4119 5802	
Rel. (Endorsement Required)	
MAYTE REYES-PRODUCTION	
September 28, 2009	
Oil Conservation Division/Santa	
Dayton FO #2, Surface Co	
Dayton FN #1 & #2, Dayton	
For delivery information, visit our website at www.usps.com	
Domestic Mail Only, No Insurance Coverage	
CERTIFIED MAIL, RECEIPT REQUIRED	
U.S. Postal Service	

CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. DO NOT ADJUST LINE

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:

Mehl, Margaret L.
702 NE Cambridge
Lees Summit, MO 64086

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

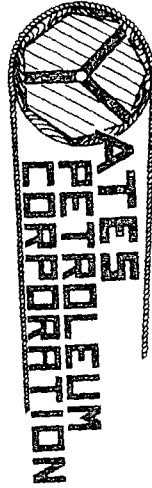
2. Article Number 7008 1830 0001 4119 5819
(Transfer from service)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
■ A mailing receipt
■ A unique identifier
■ A record of delivery
Important Reminders
■ Certified Mail must be paid for at the time of mailing
■ Certified Mail is not insurable for more than \$500
■ For an additional fee, Endorsement for Restricted Delivery (PS Form 3800, August 2003) may be obtained. For an additional fee, Endorsement for Restricted Delivery (PS Form 3800, August 2003) may be obtained. For an additional fee, Endorsement for Restricted Delivery (PS Form 3800, August 2003) may be obtained. If a postmark or receipt is not required.



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

REGISTERED MAIL

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For more information on jobs at www.usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009	Endorsement Required
Mayre, Reyes-Production	Restricted Delivery Fee
Total: Mehl, Margaret L.	
Sent: 702 NE Cambridge	
Street or PO: Lees Summit, MO 64086	
City:	
PS Form 3800, August 2008	
See Reverse for Instructions	

7008 1830 0001 4119 5819
7008 1830 0001 4119 5819

Items 1, 2, and 3. Also complete Restricted Delivery is desired. Name and address on the reverse are return the card to you. Card to the back of the mailpiece, if space permits.

Sent to:

A. Signature ☒ Agent
☒ Addressee
 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

7008 1630 0001 4119 5604
 February 2004 Domestic Return Receipt 102595-02-M-1540

Certified Mail

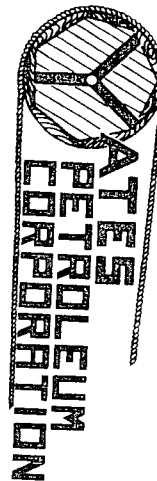
- A mailing receipt
- A unique identifier
- A record of delivery

Important Return Receipt

- Certified Mail
- Certified Mail
- NO INSURANCE
- For an additional fee, Endorsement (PS) Receipt (PS) required.
- For an addressee's endorsement
- If a postmaster at the post office is not required.

IMPORTANT:

PS Form 3800, April 2004



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service		7008 1830 0001 4119 5604	
CERTIFIED MAIL™ RECEIPT		7008 1830 0001 4119 5604	
(Domestic Mail Only. No Insurance Coverage Provided)			
For delivery information visit our website at www.usps.com			
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle			
Oil Conservation Division/Santa Fe Office			
September 28, 2009			
Endor Mayte Reyes-Production			
Restricted Delivery Fee (Endorsement Required)			
Total			
Wells Charlotte E.			
10546 Recreational Rd. 255E			
Burkeville, TX 75932			
City, St. or PO			
PS Form 3800, August 2006			

CHARTERED MAIL

1. Article Addressed to: Watt, Edna Mae 400 Holland Drive West Sacramento, CA 95605-2009		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number <i>(Transfer from service)</i> 7008 1830 0001 4119 5611		D. Is delivery address different from item 1? If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

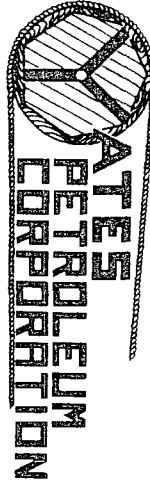
3. Service Type ☒ Certified Mail ☐ Express Mail

1 4119 5611

Turn Receipt
102595-02-M-1540

102595-02-M-1540!

[illegible]



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service		CERTIFIED MAIL RECEIPT	
(Domestic Mail Only: No Insurance Coverage Provided)			
For delivery information visit our website at www.usps.com			
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009		(End Mayte Reyes-Production Restricted Delivery Fee (Endorsement Required)	
Watt, Edna Mae 400 Holland Drive West Sacramento, CA 95605-2009		Total 7008 1830 0001 4119 5611 7008 1830 0001 4119 5611	
Sent to Street or PO City & State		PS Form 3800, August 2006	



COMPLETION INSTRUCTIONS

Items 1, 2, and 3. Also complete restricted Delivery is desired. name and address on the reverse side can return the card to you. is card to the back of the mailpiece, front if space permits.

Addressed to:

Mr. M. D. & L
384th Terr
W. FL 34420-5466

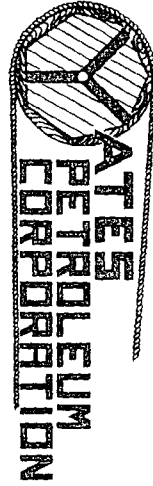
A. Signature X		<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)		C. Date of Delivery
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		

3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

Number from service 7008 1830 0001 4119 5628

1811, February 2004 Domestic Return Receipt 102595-02-M-1540

Certified Mail
☐ A mailing receipt
☐ A unique identifier
☐ A record of delivery
☐ Important Remittance
☐ Certified Mail
☐ NO INSURANCE
☐ For an additional delivery To of Receipt (PS) fee. Endorsement a duplicate required.
☐ For an addressee's endorsement
☐ If a postmark is required.
☐ receipt is not
IMPORTANT
 PS Form 3800



YATES BUILDING -- 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

7008	1830	0001	4119	5628
7008	1830	0001	4119	5628
Total				
U.S. Postal Service				
CERTIFIED MAIL, RE				
(Domestic Mail Only, No Insurance)				
For delivery information visit our website				
Dayton FN #1 & #2, Dayton				
Dayton FO #2, Surface Co				
Oil Conservation Division/Santa				
September 28, 2009				
Mayte Reyes-Production				
(Endorsement Required)				
Sent To				
Vandaveer, M. D. & L				
Street: 12104 SE 84 th Terr				
City, St: Belleview, FL 34420-5460				
PS Form 3800, August 2006				

Vandaveer, M. D. & L
12104 SE 84th Terr
Belleview, FL 34420-5460

PLACE STICKER AT TOP OF ENVELOPE - NOT IN FRONT

1. COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Your name and address on the reverse of this card will be returned to you. This card to the back of the mailpiece, the front if space permits.

Addressed to:

Gen, Richard
3. Happy Hollow Road
KS 66617

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee
B. Received by (Printed Name) C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
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

Number 7008 1830 0001 4119 5635

Domestic Return Receipt

11, February 2004

102595-02-M-1540

Certified Mail
A mailing receipt
A unique identifier
A record of delivery
Important Reminder
Certified Mail
Certified Mail
NO INSURANCE
For an additional fee, Endorsement (PS) delivery, to a duplicate required.
For an addressee's address, if a postmaster at the time of receipt is not required.
IMPORTANT:
PS Form 3800, 1-01



VATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage)	
For delivery information, visit our website at www.usps.com	
Dayton FN #1 & #2, Dayton FG	4119 5635
Dayton FO #2, Surface Commn,	4119 5635
Oil Conservation Division/Santa Fe Offi	
September 28, 2009	
(En) Mayte Keyes-Production	
Restricted Delivery Fee	
(Endorsement Required)	
Total Po	
Sent To	
3444 NE, Happy Hollow Road	
Topeka, KS 66617	
City, State	
or PO Box	
PS Form 3800, August 2006	

537

12201/AL



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:

Swearingen, Addie
P.O. Box #298
Roswell, NM 88202-0298

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7008 1830 0001 4719 5642

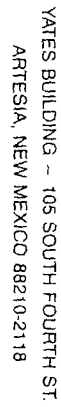
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Certified Mail
■ A mailing receipt
■ A unique identifier
■ A record of delivery
Important Reminder
■ Certified Mail
■ Certified Mail
■ NO INSURANCE
■ For an additional fee, insurable items may be added.
■ For an additional fee, a duplicate receipt may be requested.
■ For an additional fee, a return receipt may be requested.
IMPORTANT:
■ If a postmark is required, the receipt is not valid.

PS Form 3800, April 2003



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

CELEBRATED WHISKY

POSTNET CERTIFIED MAIL

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. Time and address on the reverse an return the card to you. Card to the back of the mailpiece, not if space permits.		A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No		B. Received by (Printed Name)	C. Date of Delivery
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.			
4. Restricted Delivery? (Extra Fee)		<input type="checkbox"/> Yes	
7008 1830 0001 4119 5659			
February 2004		Domestic Return Receipt	

102595-02-M-1540

Certified Mail
A mailing receipt
A unique identifier
A record of delivery
Important Return
Certified Mail
NO INSURANCE
For an additional fee, Endorsement (PS) Receipt (PS) required.
For an addressee's endorsement, if a postmaster receipt is required.
IMPORTANT:
PS Form 3800



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED

U.S. Postal Service	
CERTIFIED MAIL - RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information, visit our website at usps.com	
Dayton FN #1 & #2, Dayton FG #1, Dayton FO #2, Surface Commingle Oil Conservation Division/Santa Fe Office September 28, 2009 Mayte Reyes-Production (Endorsement Required)	Total \$
Sent To Sweatingen, Ana Pauline, 205 W. 21 st Str Concordia, KS 66901-5205	
City, St. or POE	
PS Form 3800, August 2006 See Reverse for Instructions	

7008 1830 0001 4119 5659
7008 1830 0001 4119 5659

SW
20
CO

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:

Swearingen, Barbara J.
2535 Stonepost Lane
Salina, KS 67401

COMPLETE THIS SECTION

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

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

2. Article Number 7008 2830 0001 4119 5666
(Transfer from S)

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

Certified Mail

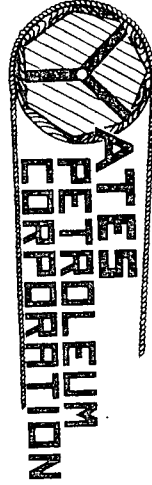
- A mailing receipt
- A unique identifier
- A record of delivery

Important Reminders

- Certified Mail is not insurable for valuable contents, please use additional insurance.
- For an additional delivery, To obtain Receipt (PS Form 3800), Endorsement required.
- For an additional addressee's authentication, Endorsement required.
- If a postmark on the post office at the post office is not needed, receipt is not needed.

IMPORTANT: Save

PS Form 3800, August 2003



YATES BUILDING - 105 SOUTH FOURTH ST.
ARTESIA, NEW MEXICO 88210-2118

ADDRESS SERVICE REQUESTED



US Postal Service	
CERTIFIED MAIL RECEIPT	
<small>(Domestic Mail Only; No Insurance Coverage)</small>	
<small>For delivery information visit our website at www.usps.com</small>	
Dayton FN #1 & #2, Dayton FG	4119 5666
Dayton FO #2, Surface Commit	4119 5666
Oil Conservation Division/Santa Fe Of	
September 28, 2009	
(E) Maive Reves-Production	
Restricted Delivery Fee	
(Endorsement Required)	
Total	
Sent To	
Swearingen, Barbara J.	
Street, 2535 Stonepost Lane	
City, State, or PO Box	
Salina, KS 67401	
<small>PS Form 3800, August 2006 See Reverse</small>	

Swea
2535
Salin