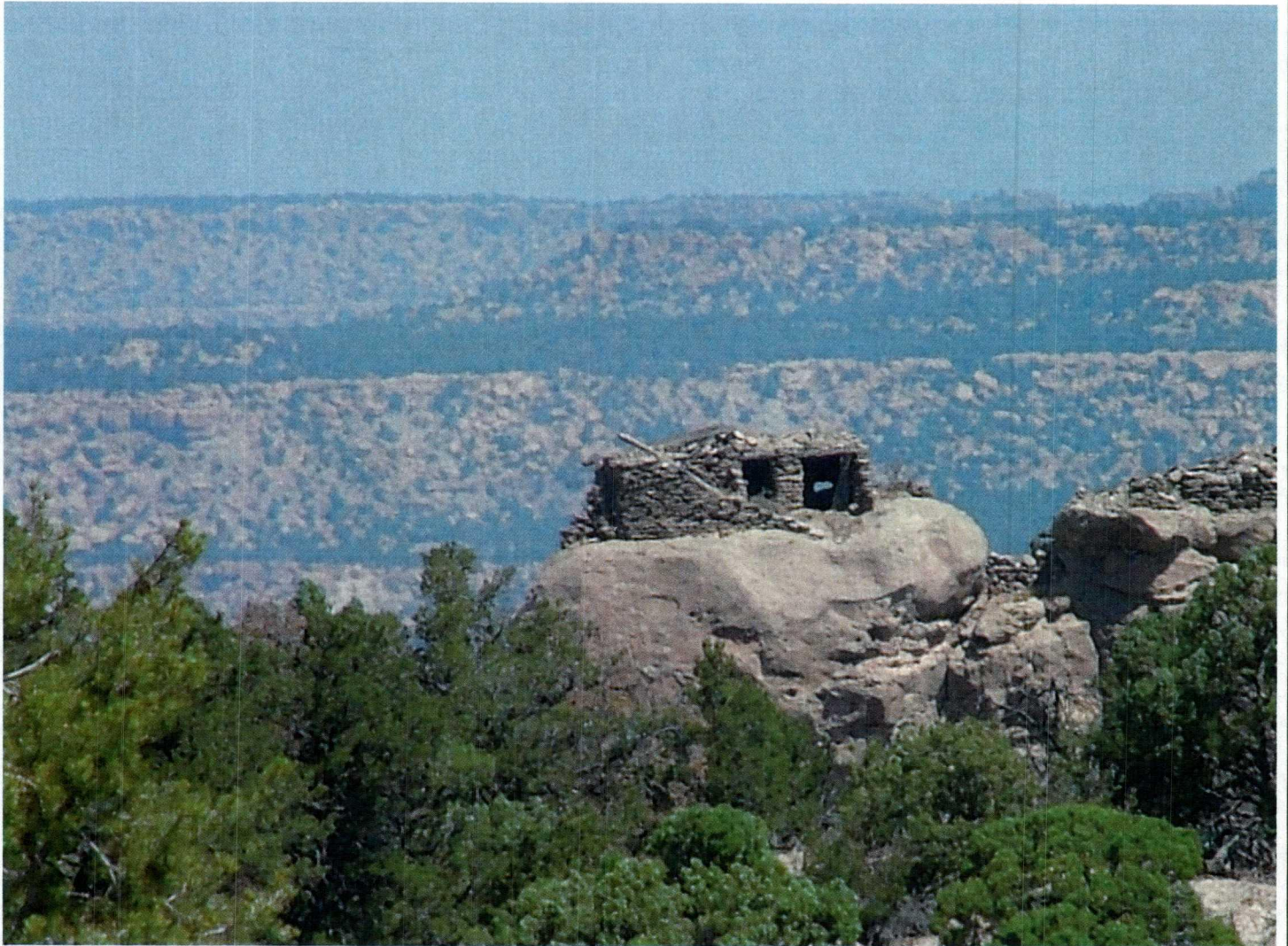


# Burlington Resources Oil and Gas Company LP



*New Mexico Oil Conservation Division*  
*Case # 13314*  
*August 8, 2004*

# Application

## KELLAHIN & KELLAHIN Attorney at Law

W. Thomas Kellahin  
Recognized Specialist in the Area of  
Natural Resources-oil and gas law-  
New Mexico Board of Legal Specialization

P.O. Box 2265  
Santa Fe, New Mexico 87504  
117 North Guadalupe  
Santa Fe, New Mexico 87501

Telephone 505-982-4285  
Facsimile 505-982-2047  
kellahin@earthlink.net

July 13, 2004

### CERTIFIED MAIL-RETURN RECEIPT REQUESTED

TO: NOTICE OF THE HEARING OF THE FOLLOWING  
NEW MEXICO OIL CONSERVATION DIVISION CASE:

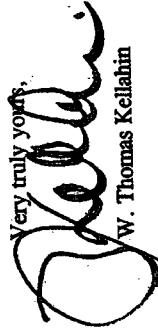
Re: *Application of Burlington Resources Oil & Gas  
Company LP for surface commingling,  
San Juan County, New Mexico*

On behalf of Burlington Resources Oil & Gas Company LP, please find enclosed a copy of our referenced application, which will be heard by the New Mexico Oil Conservation Division Examiner on August 5, 2004. The hearing will be held at the Division hearing room located in the Pinon Building, 1220 South St. Francis Drive, Santa Fe, New Mexico, 87502 (phone 505-472-3458).

As an interest owner who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. You are not required to attend this hearing, but failure to appear at the hearing and become a party of record will preclude you from challenging the matter at a later date.

Pursuant to Division Rule 1208.B, you are further notified that if you desire to appear in this case, then you are required to file a Pre-Hearing Statement with the Division not later than 4:00 PM on Friday, July 30, 2004, with a copy delivered to the undersigned. This statement must include: the names of the parties and attorneys; a concise statement of your position in this case; the names of all witnesses you will call to testify at the hearing; the approximate time you will need to present your case and identification of any procedural matters that are to be resolved prior to the hearing. If you have any question for Burlington, you may call Mr. Alan Alexander (505) 326-9757.

Very truly yours,

  
W. Thomas Kellahin



# Application Continued

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

APPLICATION OF BURLINGTON RESOURCES  
OIL & GAS COMPANY LP FOR SURFACE COMMINGLING,  
SAN JUAN COUNTY, NEW MEXICO.

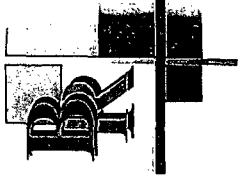
CASE NO. \_\_\_\_\_

## FIRST AMENDED APPLICATION

Comes now Burlington Resources Oil & Gas Company LP ("Burlington") by its attorneys, Kellahin & Kellahin, and applies to the New Mexico Oil Conservation Division for an order granting an exception to Rule 303.A and, in accordance with Rule 303.B (4), approving surface commingling of oil production as a "pre-approved" allocation and measurement method other than individual well/lease metering for the following described wells/leases:

- (a) San Juan 29-7 Unit #191 Well  
NWSE Section 22-T29N-R7W  
Basin Fruitland Coal and Blanco Pictured Cliffs Pools
- (b) San Juan 29-7 Unit #65A Well  
NWSE Section 22-T29N-R7W  
Basin Dakota and Blanco Mesaverde Pools
- (c) San Juan 29-7 Unit #193 Well  
SESE Section 36-T29N-R7W  
Blanco PC South Pool
- (d) San Juan 29-7 Unit #55A Well  
SESE Section 36-T29N-R7W  
Blanco Mesaverde Pool

which shall be stored and measured at its centralized facilities located on each of the production pads located on the sections listed above. If the Division approves this application, then the Applicant intends to utilize this approved method for other wells and areas.



# Application Continued

NMOC Application  
Burlington Resources Oil & Gas Company LP  
Page 2

In support states:

1. Burlington is the operator of the above described wells being produced from the Basin Fruitland Coal, Blanco PC South, Blanco Pictured Cliffs, Blanco Mesaverde and Basin Dakota Pools all within Township 29 North, Range 7 West.

2. Burlington proposes to operate a centralized facility in the NWSE (Unit J) of Section 22-T29N-R7W and the SENE (Unit P) of Section 36-T29N-R7W for the gathering of oil production from these wells.

3. Effective April 1, 2003, See Order R-11972, Division Rule 303.B (4) provided:

"Specific Requirements and Provisions for Commingling of leases, Pool or Leases and Pools with Diverse Ownership.

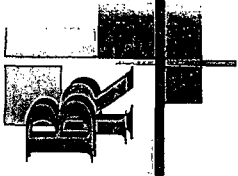
(a) Measurement and Allocation Methods. Where there is diversity of ownership between two or more leases, two or more pools, or between different pools and leases, the surface commingling of production there from shall be permitted only if production from each of such pools or leases is accurately metered, or determined by other methods specifically approved by the Division, prior to such commingling."

4. Burlington is the operator of the San Juan 29-7 Unit 65A gas well which is approved for downhole-commingled production from the Blanco Mesaverde Pool and the Basin Dakota Pool. See DHC-1875. The San Juan 29-7 Unit 191 well is approved for downhole-commingled production from the Blanco Pictured Cliffs Pool and the Basin Fruitland Coal Pool. See DHC-1403AZ. The San Juan 29-7 Unit 193 is a stand alone Basin Blanco PC South Pool well. The San Juan 28-6 Unit 55A is a stand alone Blanco Mesaverde Pool well.

5. In addition to gas production, these wells also produce oil at the daily rate of 10 barrels/day or less.

6. Burlington seeks approval to establish an allocation for oil production as follows:





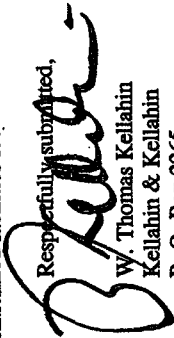
# Application Continued

NMOCD Application  
Burlington Resources Oil & Gas Company LP  
Page 3

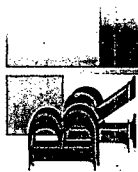
- (a) within 30-days after first delivery of oil from a well, Burlington will take a direct measurement of the oil volume from the tanks for each well and then will utilize that volume to allocate all prior and future production to each well;
  - (b) any well's allocated oil production that is excess of an average yearly production of 10 BOPD shall have a separate oil tank installed and measured under current methods.
7. This proposed allocation/measurement method will be for a 5-year period or until wells are added or plugged at which time the allocation will be recalculated.
8. Any gas production will continue to be separately and continually metered or measured in accordance with previously approved down-hole commingling orders.
9. As a result of different ownership, the ownership of the proposed commingled production is not identical in terms of parties or interest.
10. In accordance with Division Rule 1207.A and Rule 303.B(d) applicant has sent a copy of this application and notice for hearing to be held on August 5, 2004 to all the proper parties entitled to said notice. See Exhibit "A"

Accordingly, Burlington requests that this application be set for hearing before a Division Examiner and that after notice and hearing, the Division grant an exception to Division Rule 309-A and Rule 303-A to permit surface commingling, and storage of Blanco Mesaverde and Basin Dakota Pool production from its San Juan 29-7 Unit #68N and #65A wells and its San Juan 29-7 Unit #193 and #55A wells and associated leases all in Section 22-T29N-R7W and Section 36-T29N-R7W respectively, which shall be stored and measured at its centralized facilities located in Unit J and Unit H of the sections listed above.

Respectfully submitted,

  
W. Thomas Kellahin  
Kellahin & Kellahin  
P. O. Box 2265

Santa Fe, New Mexico 87504



# Notification

## INTEREST OWNERS


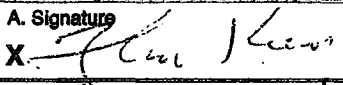
San Juan 29-7 Unit

A W RUTTER JR ALAN G ENGBERG  
A W RUTTER JR TRUSTEE  
ALICE RAINS  
ALVIN JERMAN FAMILY TRUST  
AMCORE BANK N A TRUSTEE  
AMCORE BANK N A TRUSTEE  
ANDREW J HOMBURGER  
ATKO PARTNERS LTD  
ATWASJ 1993-A  
ATWASJFC 1993-A  
BANK OF AMERICA NA AGENT  
BARBARA EVANS  
BARBARA N KOONS TRUSTEE  
BARBARA WALL JOHNSON  
BEN DANDSBY JR ESTATE  
BEN HOWELL LANGFORD  
BEN R HOWELL TRUST  
BETSY H BRYANT  
BETTY LOU LONG  
BETTY S PETTUS LIFE ESTATE  
BETTY T JOHNSTON LYLE E  
BHCH MINERAL LTD  
BILL AND JANICE LANE  
BLANCHE DANDSBY ESTATE  
BLACK MINERALS CO  
BOLIN PAT S  
BONANZA CREEK MINERALS LLC  
BOW PETROLEUM INC  
BP AMERICA PRODUCTION COMPANY  
BRIAN DOWNING GIBSON  
BRUCE H C HILL  
BRYAN E JENKS  
BUREAU OF LAND MANAGEMENT  
C W BOLIN PROPERTIES  
CAROLYN J ROSS DECLARATION  
CAROLYNN CLARK WIGGIN  
CARYN JEFFREY  
CATHY J WALL POUND  
CHARLES W GAY  
CL NORDSTROM FAMILY LLC  
CLAUDIA MARCIA LUNDELL GILMER  
CONOCOPHILLIPS COMPANY  
CROFF OIL CO  
D PHIL BOLIN  
DAN H BOLIN  
DAVID A PIERCE  
DAVID SCHMIDT  
DENNIS R STAAL

DIRK VANHORN REEMTSMA  
DOLORES BOLIN TRUSTS  
DONALD S IRONSIDE  
DORA PARKER  
DOUGLAS CAMERON MCLEOD  
DR JOHN F PETTUS  
DUGAN PRODUCTION CORPORATION  
EDGAR CLAY GRIFFIN JR  
EILEEN MEDINA GARRIDO  
ELIZABETH H LUND ROYALTY TRUST  
ELIZABETH WHITE FAMILY TRUST  
EMILIE M HARDIE ROYALTY TRUST  
EMILY D GRAMBLING  
EST GEORGE ANN BERGH  
ETHEL YNN Y CLARK  
EULA MAY JOHNSTON TRUST  
EVELYN BLANCHE SIMMONS TRSTEE  
FLORENCIA EXPLORATION INC  
FOUR STAR OIL & GAS COMPANY  
GARY A JERMAN & SUSAN J JERMAN  
GARY L SMITH  
GENEVA T JOHNSON  
GERALD G & ALTA JANE WILLIAMS  
GORDON L GOTTSSTEIN  
GREGORY WALL  
GURDON RANSON MILLER III  
HAROLD RICHARD COOPER  
HARRIET M BUCHENAU LIVING TRUST  
HORIZON ROYALTIES LLC  
HOWELL GRANDCHILDRENS TRUST  
IDA O HANCOCK  
INITIAL CO-TRUSTEES JAFFA D WAHLBERG  
INTERNAL REVENUE SERVICE  
J & M RAYMOND LTD  
JAMES BEATTY NOLAND AND R  
JAMES HOHENSTEIN  
JAMES J RUBOW & NICKOLA A RUBOW JT  
JAMES R PAYNE & JEAN PAYNE  
JANE BARBARA BAER TRUST  
JANE MANNING PITKIN ESTATE  
JANET PATRICIA BRANNEN  
JAY GOTTSSTEIN TRUSTEE  
JEAN F LOEPKEY  
JEAN WORTHINGTON BENNETT  
JERRY J ANDREW  
JILL SOENS  
JOANNE C LORENCE  
JOE E LOPEZ


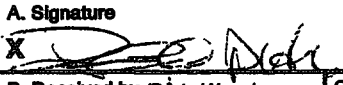
DENNIS R STAAL  
JOHN A GRAMBLING  
JOHN A WALL  
JOHN C DAWSON JR & ROBBIN R  
JOHN PATRICK WILLIAMS TRUSTEE  
JOHN S CATRON  
JOSEPH C JASTRZEMBSKI  
JUDITH DIANNE DUFF LEACH TRTEE  
K & W GAS PARTNERS LP  
KATHLYN NORA BLACK-TRUSTEE  
KENN SCHMIDT  
KENNETH ROBERT SCHMIDT  
KIM MCKIM DUNN  
L KEITH WAYT  
LANCE REEMTSMA  
LAURA DICHTER  
LESLIE HARDWICK OSHEA  
LINDA JANE WILLIAMS TRUSTEE  
LINDA JEANNE LUNDELL LINDSEY  
LINDA L WHITE  
LINDA MARIE MCCARTNEY  
LINDA STROBEL LIFE ESTATE  
LOLA I OENDAHN PRESIDENT  
LORIE GORDON  
LORRAYN GAY HACKER  
MABELLE H SOWERS ROYALTY TRUST  
MANSFIELD FAMILY 2001 REV TRUST  
MAP 1992-A PARTNERS LP  
MARGARET E HUISER-SILVA  
MARIE A SCHAEFER  
MARY ESTHER BROWN  
MARY J MILLER  
MAYDELL MILLER MAST  
MCCORMICK & CO INC  
MCKAY OIL & GAS LLC  
MEDICINE BOW LAND COMPANY LLC  
MELODIE GIGER TOOHEY  
MEREDITH INGRAM GARTNER TRUSTEE  
MERLAND EUGENE BUTTOLPH  
MICHAEL A WILLIAMS &  
MICHAEL D BROWN  
MICHAEL W HOUSTON  
MILDRED I BERTSCH  
MILO D SMITH  
MIRIAM WASHBURN TRUST  
MITZI ANN HENDERSON EASLEY  
MOORE LOYAL TRUST  
MRS MARGARITA ARCHULETA  
MURIEL ANDREWS BOSSERT LIFE  
NELLY JOHNSON LIFE ESTATE  
NELLIE JUANITA RUTHERFORD  
WILLIAM L MADSEN OR SARAH S  
WILLIAM W BRAMLETT

JOE E LOPEZ  
NFF LTD  
ODYSSEY ROYALTIES LLC  
ORVILLE C ROGERS  
PAMELA POLLOCK BRUNS  
PATRICIA G HARVEY  
PATTERSON GROUP  
PAUL SLAYTON  
PERRY H POLLOCK  
PETROGULF CORPORATION  
PHILIP G DEMEREE  
PHILIP L HOMBURGER & DEBRA L  
PHILLIPS-SAN JUAN PARTNERS  
PURE RESOURCES LP  
R H FEUILLE  
R L BOLIN PROPERTIES LTD  
RALPH W GILMORE  
RICHARD PARKER LANGFORD  
ROBERT G HANAGAN SUCC TRUSTEE  
ROBERT P SOENS  
ROBERT WALTER LUNDELL  
RODERICK A IRONSIDE  
ROGER J LOWE  
ROSEMARY WARNER HALL  
SAM G WALL III  
SAN JUAN 1990-A LP  
SHIRLEY M WALL GAULDIN  
SILVERADO OIL & GAS LLP  
STATE OF NEW MEXICO  
STOREY LINCOLN PARTNERSHIP  
SUSAN H RITTER  
SUVIAN RUTH DAVES  
SYLVIA F LITTLE  
T H MCELVAIN OIL & GAS LTD  
TED EDWARD DUFF SOLE TRUSTEE  
THE WRIGHT BROS TRUST  
THOMAS B CATRON III  
THOMAS B CATRON III & JUNE  
THOMAS D CITRANGOLA &  
THOMAS N & LOUISE D MANDRY TRUST  
THOMAS POLLOCK  
THORNTON HARDIE III TRUSTEE  
TOM K MARTELLA  
TROUT LIMITED PARTNERSHIP  
V A JOHNSTON FAMILY TRUST  
VIRGINIA G NEW  
VIRGINIA HUGGINS  
VIRGINIA M WALL GORET  
VIRGINIA R HATFIELD  
W E COOPER  
WENDY DALE JOHNSON  
WILLIAM B HARDIE SR ROYALTY TRUST

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
<div style="text-align: center;">   7110 6605 9590 0008 7282 </div>	<div> A. Signature  X  <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee </div> <div> B. Received by (Printed Name)  Tom Koons </div> <div> C. Date of Delivery  7-23-04 </div> <div> D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES enter delivery address below: <input type="checkbox"/> No </div>
1. Article Addressed to:  BARBARA N KOONS TRUSTEE BARBARA N KOONS TRUST 1514 LAS LOMAS NE  ALBUQUERQUE, ALBUQUERQUE 87106  7/22/2004 9:10 AM Code: San Juan 29-7 Unit 191	<div> 3. Service Type  <input checked="" type="checkbox"/> Certified </div> <div> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes </div>



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Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
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Domestic Return Receipt

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1. Article Addressed to:  DORA PARKER PO BOX 2141  BLOOMFIELD, BLOOMFIELD 87413  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<div> 3. Service Type  <input checked="" type="checkbox"/> Certified </div> <div> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes </div>

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Domestic Return Receipt

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<b>1. Article Addressed to:</b>  DUGAN PRODUCTION CORPORATION PO BOX 420  FARMINGTON, FARMINGTON 87499-0420  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

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<b>1. Article Addressed to:</b>  ELIZABETH H LUND ROYALTY TRUST ELIZABETH H LUND TRUSTEE 6128 SIERRA VALLE LN  EL PASO, EL PASO 79912  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

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<b>1. Article Addressed to:</b>  EMILIE M HARDIE ROYALTY TRUST EMILIE M HARDIE TRUSTEE 1065 LOS JARDINES  EL PASO, EL PASO 79912  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt



1. Article Number  
[Redacted]  
7110 6605 9550 0008 7763

1. Article Addressed to:

EMILY D GRAMBLING  
916 CHERRY HILL LN  
EL PASO, EL PASO 79912

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Agent  
☒ Addressee  
*Emily Grambling*

B. Received by (Printed Name)  
*Emily Grambling*

C. Date of Delivery  
7/24/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9550 0008 8128

1. Article Addressed to:

JOHN A GRAMBLING  
916 CHERRY HILL LN  
EL PASO, EL PASO 79912

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Agent  
☒ Addressee  
*John Grambling*

B. Received by (Printed Name)  
*John Grambling*

C. Date of Delivery  
7/24/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

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Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9550 0008 8241

1. Article Addressed to:

L KEITH WAYT  
5000 BOARDWALK DR #32  
FORT COLLINS, FORT COLLINS 80525

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Agent  
☒ Addressee  
*L. Keith Wayt*

B. Received by (Printed Name)  
*L. Keith Wayt*

C. Date of Delivery


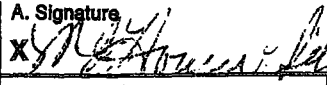

D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes



PS Form 3811

Domestic Return Receipt

2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
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1. Article Addressed to:		B. Received by (Printed Name) C. Date of Delivery  7-23	
MARGARET E HOUSER-SILVA 9729 CAMINO DEL SOL NE ALBUQUERQUE, ALBUQUERQUE 87111 1500 7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		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	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	



PS Form 3811

Domestic Return Receipt

2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 950 0008 8517		A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) C. Date of Delivery Michael Williams 7/26/04	
MICHAEL A WILLIAMS & GLORIA WILLIAMS TRUSTEES MICHAEL A AND GLORIA WILLIAMS LIVING TRUST 114 N 7TH ST BLOOMFIELD, BLOOMFIELD 87413 7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		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	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811

Domestic Return Receipt

2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 950 0008 8593		A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) C. Date of Delivery Rutilio Archuleta ?	
MRS MARGARITA ARCHULETA 636 CR 4599 BLANCO, BLANCO 87412 7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		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	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="background-color: black; width: 150px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; padding: 2px;">7110 6605 9540 0008 9019</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> Mandy <b>C. Date of Delivery</b> 7/21 <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  THOMAS N & LOUISE D MANDRY TRUST THOMAS N & LOUISE D MANDRY TRUSTEES 1011 LOS JARDINES CIR  EL PASO, EL PASO 79912  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="background-color: black; width: 150px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; padding: 2px;">7110 6605 9540 0008 8999</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> T.B. CATRON <b>C. Date of Delivery</b> JUL 23 2004 <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  THOMAS B CATRON III & JUNE ELLIS CATRON TRUST C/O CATRON CATRON & POTTOW PO BOX 788 SANTA FE, SANTA FE 87504  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="background-color: black; width: 150px; height: 20px; margin: 5px 0;"></div> <div style="border: 1px solid black; padding: 2px;">7110 6605 9540 0008 8722</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b>  <b>C. Date of Delivery</b> 7-24-04 <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  PHILIP G DEMEREE SEPARATE PROPERTY 7561 VIA CAMELLO DEL SUR  SCOTTSDALE, SCOTTSDALE 85258  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9132

1. Article Addressed to:

WILLIAM B HARDIE SR ROYALTY TRUST  
JANE HARDIE TRUSTEE  
1065 LOS JARDINES

EL PASO, EL PASO 79912

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *William B. Hardie* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

*Hardie 7/24*

C. Date of Delivery

*7/24*D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9095

1. Article Addressed to:

VIRGINIA M WALL GORET  
PO BOX 282

SOCORRO, SOCORRO 87801

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *E.A. Goret* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

*E.A. GORET*

C. Date of Delivery

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

3. Service Type



Certified



4. Restricted Delivery? (Extra Fee)



Yes



PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; margin-top: 20px;">   7110 6605 9590 0008 7206 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b>  <b>C. Date of Delivery</b> 26 JUL <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  ALVIN JERMAN FAMILY TRUST GARY A JERMAN SUCCESSOR TRUSTEE 1645 COURT PLACE STE 326  DENVER, DENVER 80202  7/22/2004 9:08 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes



PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; margin-top: 20px;">   7110 6605 9590 0008 7213 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> Mike Deane 16 <b>C. Date of Delivery</b> 7-26-04 <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  AMCORE BANK N A TRUSTEE & A C ANDERSON TRUST 2 PO BOX 4599  ROCKFORD, ROCKFORD 61110-4599  7/22/2004 9:08 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; margin-top: 20px;">   7110 6605 9590 0008 7220 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> Mike Deane 16 <b>C. Date of Delivery</b> 7-26-04 <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  AMCORE BANK NA TRUSTEE & A C ANDERSON TRUST 1 PO BOX 4599  ROCKFORD, ROCKFORD 61110-4599  7/22/2004 9:08 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7244

1. Article Addressed to:

ATKO PARTNERS LTD  
260 I-45 STE A  
HUNTSVILLE, HUNTSVILLE 77340

7/22/2004 9:08 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *J. Burnbaugh* ☐ 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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7268

1. Article Addressed to:

BANK OF AMERICA NA AGENT  
CHARLES W MCCARTY TRUST  
TRUST DIVISION  
PO BOX 840738  
DALLAS, DALLAS 75284-0738

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *A. Vasquez* ☐ 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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7299

1. Article Addressed to:

BARBARA WALL JOHNSON  
10240 BOYLES RD  
GENTRY, GENTRY 72734-9095

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Barbara Johnson* ☐ 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

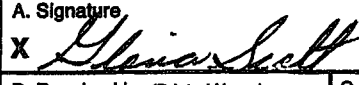
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt




2. Article Number
 7110 6605 9590 0008 7312
1. Article Addressed to:
<b>BEN HOWELL LANGFORD C/O EDI FINANCIAL INC 415 N MESA ST STE 207  EL PASO, EL PASO 79901-1244</b>
7/22/2004 9:10 AM Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY	
A. Signature <b>X</b> 	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <b>GLORIA SCOTT</b>	C. Date of Delivery <b>07/26/04</b>
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
3. Service Type	<input checked="" type="checkbox"/> <b>Certified</b>
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

PS Form 3811

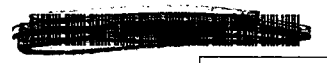
Domestic Return Receipt

2. Article Number
 7110 6605 9590 0008 7343
1. Article Addressed to:
<b>BETTY LOU LONG 1685 BERKLEY CT  DEERFIELD, DEERFIELD 60015-2030</b>
7/22/2004 9:10 AM Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY	
A. Signature <b>X</b> 	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) <b>Betty Lou Long</b>	C. Date of Delivery <b>7/27</b>
D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
3. Service Type	<input checked="" type="checkbox"/> <b>Certified</b>
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

PS Form 3811

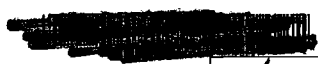
Domestic Return Receipt

2. Article Number
 7110 6605 9590 0008 7404
1. Article Addressed to:
<b>BOLACK MINERALS CO ATTN TOMMY BOLACK 3901 BLOOMFIELD HWY RT 3 BOX 47 FARMINGTON, FARMINGTON 87401</b>
7/22/2004 9:10 AM Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY	
A. Signature <b>X</b> 	<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"/> <b>Certified</b>
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
  
7110 6605 9590 0008 7459

1. Article Addressed to:

BRIAN DOWNING GIBSON  
66C ARROYO HONDO TRL  
  
SANTA FE, SANTA FE 87505

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Agent  
☒ Addressee  
*[Signature]*

B. Received by (Printed Name)  
NANCY MOORE

C. Date of Delivery  
7-23-04


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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
  
7110 6605 9590 0008 7473

1. Article Addressed to:

BRYAN E JENKS  
20940 W 124TH ST  
  
OLATHE, OLATHE 66061

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Agent  
☒ Addressee  
*[Signature]*

B. Received by (Printed Name)  
C. Date of Delivery  
7/26/04


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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
  
7110 6605 9590 0008 7480

1. Article Addressed to:

BUREAU OF LAND MANAGEMENT  
FARMINGTON DIST OFFICE  
1235 LA PLATA HWY  
  
FARMINGTON, FARMINGTON 87401

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Agent  
☒ Addressee  
*[Signature]*

B. Received by (Printed Name)  
VERA BEE

C. Date of Delivery  
7/26/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7503

1. Article Addressed to:

CAROLYN J ROSS DECLARATION  
OF TRUST DTD 10/24/91  
CAROLYN J ROSS TRUSTEE  
PO BOX 94  
MONMOUTH, MONMOUTH 61462

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Carolyn J. Ross*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Carolyn J. Ross*

C. Date of Delivery

7/26/04

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7534

1. Article Addressed to:

CATHY J WALL POUND  
PO BOX 9  
SOCORRO, SOCORRO 87801

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ashley Pound*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Ashley Pound*

C. Date of Delivery

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7541

1. Article Addressed to:

CHARLES W GAY  
C/O JAMES M RAYMOND-POA  
PO BOX 291445

KERRVILLE, KERRVILLE 78029-1445

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Bob Valderrama*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Bob Valderrama*

C. Date of Delivery

7-26-04

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7558

1. Article Addressed to:

CL NORDSTROM FAMILY LLC  
1645 COURT PL STE 326

DENVER, DENVER 80202

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

26 JUL

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7589

1. Article Addressed to:

CROFF OIL CO  
621 17TH ST STE 830

DENVER, DENVER 80293

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/26

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7619

1. Article Addressed to:

DAVID A PIERCE  
CITIZENS BANK AGENT FOR  
PO BOX 4140

FARMINGTON, FARMINGTON 87499

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/26/04

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7664

1. Article Addressed to:

DONALD S IRONSIDE  
3300 DARBY RD APT 1312

HAVERFORD, HAVERFORD 19041-1097

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-26-04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7688

1. Article Addressed to:

DOUGLAS CAMERON MCLEOD  
518 17TH ST STE 1455

DENVER, DENVER 80202

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-26-04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7695

1. Article Addressed to:

DR JOHN F PETTUS  
800 S CAMINO DEL RIO

DURANGO, DURANGO 81301

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7718

1. Article Addressed to:

EDGAR CLAY GRIFFIN JR  
5422 MAPLE ST

BELLAIRE, BELLAIRE 77401-4705

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

EDGAR C. GRIFFIN JR

C. Date of Delivery

7/22/04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7725

1. Article Addressed to:

EILEEN MEDINA GARRIDO  
14545 N FRANK LLOYD WRIGHT APT 122

SCOTTSDALE, SCOTTSDALE 85260

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Eileen Garrido

C. Date of Delivery

7-24-04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7787

1. Article Addressed to:

ETHELYNN Y CLARK  
(EDYTHE M CLARK)  
1187 COAST VILLAGE RD  
STE ONE-495  
MONTECITO, MONTECITO 93108-2004

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt



## 2. Article Number

7110 6605 9590 0008 7831

## 1. Article Addressed to:

GARY A JERMAN & SUSAN J JERMAN  
JT TENANTS  
4194 S VALENTIA ST  
  
DENVER, DENVER 80237

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Susan J Jerman* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

7-24-04

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7862

## 1. Article Addressed to:

GERALD G & ALTA JANE WILLIAMS  
TRUSTEES U/T/A DATED 9-12-91  
315 N CLARK DR  
  
AZTEC, AZTEC 87410

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Gerald G. Williams* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

7-27-04

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7879

## 1. Article Addressed to:

GORDON L GOTTSTEIN  
9433 NORTH EAST 14TH  
  
BELLEVUE, BELLEVUE 98004

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Mary-Lynn Gottstein* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

7-26

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

## 3. Service Type


☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes


PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9590 0008 7909 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <i>Harold Cooper</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Harold Cooper</i> C. Date of Delivery <i>7-26-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <b>HAROLD RICHARD COOPER</b> <b>9013 FOREST DR</b>  <b>FAIRVIEW HEIGHTS, FAIRVIEW HEIGHTS 62208-1010</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9590 0008 7923 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <i>RON HORNIG</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>RON HORNIG</i> C. Date of Delivery <i>7-26-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <b>HORIZON ROYALTIES LLC</b> <b>1490 W CANAL CT STE 3000</b>  <b>LITTLETON, LITTLETON 80120</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811


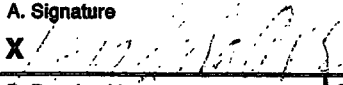
Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9590 0008 7978 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <i>Bob Valderron</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <i>Bob Valderron</i> C. Date of Delivery <i>7-26-04</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No
1. Article Addressed to:  <b>J &amp; M RAYMOND LTD</b> <b>RAYMOND &amp; SONS I LLC GEN PARTNER</b> <b>PO BOX 291445</b>  <b>KERRVILLE, KERRVILLE 78029-1445</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811



Domestic Return Receipt

538-4900

<b>2. Article Number</b>  7110 6605 9590 0008 8005		<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b>  <b>JAMES J RUBOW &amp; NICKOLA A RUBOW JT</b> <b>200 MAIN ST</b>  <b>AZTEC, AZTEC 87410</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191		<b>B. Received by (Printed Name)</b> Arch. La A Rubow	<b>C. Date of Delivery</b> 7-26-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes



PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8012		<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b>  <b>JAMES R PAYNE &amp; JEAN PAYNE</b> <b>614 PASEO DEL BOSQUE NW</b>  <b>ALBUQUERQUE, ALBUQUERQUE 87114-2277</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		<b>B. Received by (Printed Name)</b> Jean Payne	<b>C. Date of Delivery</b> JUL 23 2004
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8029		<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
<b>1. Article Addressed to:</b>  <b>JANE BARBARA BAER TRUST</b> <b>WELLS FARGO OGM C7300-07D</b> <b>PO BOX 5383</b>  <b>DENVER, DENVER 80217</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191		<b>B. Received by (Printed Name)</b> J Baer	<b>C. Date of Delivery</b> JUL 23 2004
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8043

1. Article Addressed to:

JANET PATRICIA BRANNEN  
1761 E SECOND  
  
DURANGO, DURANGO 81301

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Janet Brannen* ☒ Agent ☐ Addressee

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

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8078

1. Article Addressed to:

JILL SOENS  
728 E 4TH AVE  
  
DURANGO, DURANGO 81301

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Jill M. Soens* ☐ Agent ☒ Addressee

B. Received by (Printed Name) *Jill M Soens* C. Date of Delivery *7/27/04*

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8104

1. Article Addressed to:

JOANNE C LORENCE  
520 CHESTNUT  
  
ATLANTIC, ATLANTIC 50022

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Jenny Noeick* ☐ Agent ☒ Addressee

B. Received by (Printed Name) *Jenny Noeick* C. Date of Delivery *7-26-04*

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8135

1. Article Addressed to:

JOHN A WALL  
PO BOX 915

SOCORRO, SOCORRO 87801

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Michael Aguirre

C. Date of Delivery

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8159

1. Article Addressed to:

JOHN PATRICK WILLIAMS TRUSTEE  
JOHN PATRICK WILLIAMS LIVING TRUST  
321 CLARK DR

AZTEC, AZTEC 87410

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

John P. Williams

C. Date of Delivery

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8180

1. Article Addressed to:

JUDITH DIANNE DUFF LEACH TRTEE  
DUFF LEACH FAM TR DTD 4/20/84  
PO BOX 30396

ALBUQUERQUE, ALBUQUERQUE 87190

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Susan Smith

C. Date of Delivery

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number



7110 6605 9590 0008 8197

## 1. Article Addressed to:

K & W GAS PARTNERS LP  
C/O CHASE MANHATTAN BANK  
PO BOX 910864

DALLAS, DALLAS 75391-0864

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

RONNIE RICHARDSON

## C. Date of Delivery

JUL 27 2004

## D. Is delivery address different from item 1?

☐ Yes

If YES enter delivery address below:

☐ No

## 3. Service Type



Certified

## 4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number



7110 6605 9590 0008 8203

## 1. Article Addressed to:

KATHLYN NORA BLACK-TRUSTEE  
MABEL GLENN HAM REVOC TRUST  
921 GRECIAN NW

ALBUQUERQUE, ALBUQUERQUE 87107

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Tom BLACK

## C. Date of Delivery

## D. Is delivery address different from item 1?

☐ Yes

If YES enter delivery address below:

☐ No

## 3. Service Type



Certified

## 4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number



7110 6605 9590 0008 8210

## 1. Article Addressed to:

KENN SCHMIDT  
930 N PALM AVE APT #244

WEST HOLLYWOOD, WEST HOLLYWOOD 90069

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

KENN SCHMIDT

## C. Date of Delivery

## D. Is delivery address different from item 1?

☐ Yes

If YES enter delivery address below:

☐ No

## 3. Service Type



Certified

## 4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt



2. Article Number

7110 6605 9590 0008 8296

1. Article Addressed to:

LINDA JANE WILLIAMS TRUSTEE  
LINDA JANE WILLIAMS LIVING TRUST  
802 BAIRD CIR  
AZTEC, AZTEC 87410

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Linda J. Williams* ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery  
LINDA J. WILLIAMS 7/27/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number

7110 6605 9590 0008 8333

1. Article Addressed to:

LINDA STROBEL LIFE ESTATE  
12872 GLEN CIRCLE RD  
POWAY, POWAY 92064

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Linda Strobel* ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery  
Linda Strobel 7/26/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number

7110 6605 9590 0008 8357

1. Article Addressed to:

LORIE GORDON  
10858 E BERRY PL  
ENGLEWOOD, ENGLEWOOD 80111

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Lorie Gordon* ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery  
LORIE GORDON 7/24/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
7110 6605 9590 0008 8449  
1. Article Addressed to:  
MAYDELL MILLER MAST  
C/O JAMES M RAYMOND  
PO BOX 291445  
KERRVILLE, KERRVILLE 78029-1445  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Bob Walden* ☒ Agent ☐ Addressee  
B. Received by (Printed Name) *Bob Walden* C. Date of Delivery *7/26/04*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
7110 6605 9590 0008 8463  
1. Article Addressed to:  
MCKAY OIL & GAS LLC  
6012 ROYAL OAK ST NE  
PO BOX 14738  
ALBUQUERQUE, ALBUQUERQUE 87191-4738  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *W. J. McPherson* ☐ Agent ☐ Addressee  
B. Received by (Printed Name) *W. J. McPherson* C. Date of Delivery *7/26/04*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

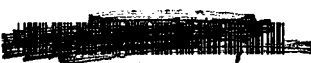
Domestic Return Receipt

2. Article Number  
7110 6605 9590 0008 8470  
1. Article Addressed to:  
MEDICINE BOW LAND COMPANY LLC  
PO BOX 888  
LITTLETON, LITTLETON 80160-0888  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Megan Bratslaw* ☒ Agent ☐ Addressee  
B. Received by (Printed Name) *Megan Bratslaw* C. Date of Delivery *7-26*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes


PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8487	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery 7/26/04 D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  MELODIE GIGER TOOHEY 3800 FLORA PL  ST LOUIS, ST LOUIS 63110  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8500	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) M.E. Buttolph C. Date of Delivery 7-26-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  MERLAND EUGENE BUTTOLPH 101 AUGUSTA DR APT # 1  LOWDEN, LOWDEN 52255-9597  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8524	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) Michael D Brown C. Date of Delivery 7-27-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  MICHAEL D BROWN 8089 PIERSON CT  ARVADA, ARVADA 80005  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8548  
1. Article Addressed to:  
  
MILDRED I BERTSCH  
260 CARISSA DR  
  
SATELLITE BEACH, SATELLITE BEACH 32937  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Mildred I. Bertsch* ☐ 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  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8555  
1. Article Addressed to:  
  
MILO D SMITH  
1536 W GARFIELD  
  
DAVENPORT, DAVENPORT 52804  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Milo Smith* ☐ Agent ☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
*Milo Smith* 7-27-04  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8562  
1. Article Addressed to:  
  
MIRIAM WASHBURN TRUST  
WELLS FARGO OGM C7300-07D  
PO BOX 5383  
  
DENVER, DENVER 80217  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Miriam Washburn* ☐ Agent ☒ Addressee  
B. Received by (Printed Name) C. Date of Delivery  
*Miriam Washburn*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8647

1. Article Addressed to:

ODYSSEY ROYALTIES LLC  
8261 S MONACO CT

CENTENNIAL, CENTENNIAL 80112

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-24-04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8654

1. Article Addressed to:

ORVILLE C ROGERS  
3840 W BAY CIR

DALLAS, DALLAS 75214-2925

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7/26/04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8692

1. Article Addressed to:

PAUL SLAYTON  
PO BOX 2035

ROSWELL, ROSWELL 88202-2035

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

7-26-04

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8715

1. Article Addressed to:

PETROGULF CORPORATION  
518 17TH ST STE 1455

DENVER, DENVER 80202

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8746

1. Article Addressed to:

PHILLIPS-SAN JUAN PARTNERS  
C/O CONOCOPHILLIPS  
ATTN CHIEF LANDMAN SAN JUAN/ROCKIES  
PO BOX 2197  
HOUSTON, HOUSTON 77252-2197

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8760

1. Article Addressed to:

R H FEUILLE  
C/O SCOTT & HULSE  
11TH FLOOR  
CHASE BANK BLDG  
EL PASO, EL PASO 79901

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt



2. Article Number

7110 6605 9590 0008 8791

1. Article Addressed to:

RICHARD PARKER LANGFORD  
6513 TARASCAS

EL PASO, EL PASO 79912-2513

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Alvin Y Langford* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Alvin Y Langford* C. Date of Delivery *7/22/04*

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number

7110 6605 9590 0008 8876

1. Article Addressed to:

SAN JUAN 1990-A LP  
C/O CHASE BANK OF TEXAS  
PO BOX 910864

DALLAS, DALLAS 75391-0864

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Ronnie Richardson* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *RONNIE RICHARDSON* C. Date of Delivery *7/22/04*

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number

7110 6605 9590 0008 8913

1. Article Addressed to:

STOREY-LINCOLN PARTNERSHIP  
21205 5TH AVE S

DESMOINES, DESMOINES 50319

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Tracy Lincoln* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Tracy Lincoln* C. Date of Delivery *7-22-04*

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8944

1. Article Addressed to:

SYLVIA F LITTLE  
SYLVIA F LITTLE TRSTE U/T/A 5-25-96  
PO BOX 1258  
  
FARMINGTON, FARMINGTON 87499  
  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Cheri Whitney* ☐ Agent ☐ Addressee

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

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8951

1. Article Addressed to:

T H MCELVAIN OIL & GAS LTD  
PARTNERSHIP  
1050 17TH ST STE 1800  
  
DENVER, DENVER 80265  
  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *M. Johnson* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *JUL 26 2004* C. Date of Delivery

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 8968

1. Article Addressed to:

TED EDWARD DUFF SOLE TRUSTEE  
OF T E DUFF TRUST  
PO BOX 398  
  
RUIDOSO, RUIDOSO 88345  
  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X *Ed Duff* ☐ Agent ☐ Addressee

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

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9002

## 1. Article Addressed to:

THOMAS D CITRANGOLA &  
EILEEN CITRANGOLA - JTWROS  
4492 LAKE IN THE WOODS DR  
BOX 25  
SPRING HILL, SPRING HILL 34607

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Jesse Torres

## C. Date of Delivery

7-26-04

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

## 3. Service Type



Certified

## 4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9040

## 1. Article Addressed to:

TOM K MARTELLA  
16754 W 75 PL  
ARVADA, ARVADA 80007

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Tom K Martella

## C. Date of Delivery

7-26-04

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

## 3. Service Type



Certified

## 4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9088

## 1. Article Addressed to:

VIRGINIA HUGGINS  
HCR 78 BOX 246A  
INGRAM, INGRAM 78025

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Michael Pyne

## C. Date of Delivery

7-26-04

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

## 3. Service Type



Certified

## 4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 9187

1. Article Addressed to:  
  
YELLOW QUEEN URANIUM CO  
1645 COURT PL STE 326  
  
DENVER, DENVER 80202  
  
7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee  
*[Signature]*

B. Received by (Printed Name) C. Date of Delivery  
9 6 JUL

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811 Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 9217

1. Article Addressed to:  
  
Kendall Associates  
4015 Skyline Drive  
Farmington, NM 87401  
  
7/26/2004 9:52 AM

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee  
*David L Kendall*

B. Received by (Printed Name) C. Date of Delivery  
*David L Kendall* 7/26/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811 Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 9231

1. Article Addressed to:  
  
Louis E. Randle, Jr.  
PO Box 947  
Bayfield, CO 81122  
  
7/26/2004 10:49 AM

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee  
*[Signature]*

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811 Domestic Return Receipt

2. Article Number  
7110 6605 9590 0008 7183  
1. Article Addressed to:  
A W RUTTER JR TRUSTEE  
DOROTHY T RUTTER TRUST  
PO BOX 3186  
MIDLAND, MIDLAND 79702  
7/22/2004 9:08 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *A. W. Rutter Jr* ☐ Agent ☐ Addressee  
B. Received by (Printed Name) *A. W. Rutter Jr* C. Date of Delivery *7/30/04*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
7110 6605 9590 0008 7190  
1. Article Addressed to:  
ALICE RAINS  
2125 E MULBERRY ST TRLR 55  
ANGLETON, ANGLETON 77515  
7/22/2004 9:08 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Alice Rains* ☐ Agent ☐ Addressee  
B. Received by (Printed Name) *ALICE RAINS* C. Date of Delivery *8/3/04*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
7110 6605 9590 0008 7237  
1. Article Addressed to:  
ANDREW J HOMBURGER  
6550 E COLORADO DR  
DENVER, DENVER 80224  
7/22/2004 9:08 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY  
A. Signature  
X *Andrew J Hamburger* ☐ Agent ☐ Addressee  
B. Received by (Printed Name) *Andrew J Hamburger* C. Date of Delivery *7/22/04*  
D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No  
3. Service Type ☒ Certified  
4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7251

## 1. Article Addressed to:

ATNA/SJFC 1993-A  
PO BOX 268946

OKLAHOMA CITY, OKLAHOMA CITY 73125

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Mike Martz

☐ 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

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7275

## 1. Article Addressed to:

BARBARA EVANS  
PO BOX 582

PALACIOS, PALACIOS 77465-0582

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Barbara Evans

☐ 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

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7329

## 1. Article Addressed to:

BEN R HOWELL TRUST  
JPMORGAN CHASE BANK TRUSTEE  
PO BOX 200486

HOUSTON, HOUSTON 77216-0486

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

R. Green

☐ 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


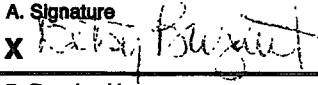
4. Restricted Delivery? (Extra Fee)



Yes


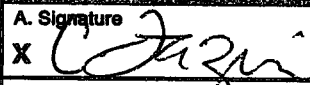
PS Form 3811

Domestic Return Receipt

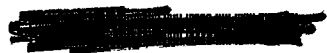

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9550 0008 7336 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) Betsy Bryant C. Date of Delivery 7-28-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <p style="text-align: center;"><b>BETSY H BRYANT 2201 BROOKHOLLOW DR ABILENE, ABILENE 79605-5507</b></p> <p style="text-align: center;">7/22/2004 9:10 AM Code: San Juan 29-7 Unit 65A</p>	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9550 0008 7367 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) C. Tazim C. Date of Delivery 7/27/04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <p style="text-align: center;"><b>BETTY T JOHNSTON/LYLE E CARBAUGH/PAUL M HARDWICK CO-TRUSTEES BETTY T JOHNSTON MARITAL TRUST 245 COMMERCE GREEN BLVD STE 280 SUGAR LAND, SUGAR LAND 77478</b></p> <p style="text-align: center;">7/22/2004 9:10 AM</p>	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9550 0008 7374 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) BHCH C. Date of Delivery 7-28-04 D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <p style="text-align: center;"><b>BHCH MINERAL LTD PO BOX 1817 SAN ANTONIO, SAN ANTONIO 78296-1817</b></p> <p style="text-align: center;">7/22/2004 9:10 AM Code: San Juan 29-7 Unit 191</p>	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7411

## 1. Article Addressed to:

BOLIN PAT S  
1 PARKER SQ  
STE 510  
2525 KELL BLVD  
WICHITA FALLS, WICHITA FALLS 76308

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Lacey Newman* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*Lacey Newman*

## C. Date of Delivery

*07/28/04*

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7435

## 1. Article Addressed to:

BOW PETROLEUM INC  
5911 S MIDDLEFIELD RD STE 100  
LITTLETON, LITTLETON 80123-2877

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Ida Christian* ☒ Agent  
☐ Addressee

## B. Received by (Printed Name)

*IDA CHRISTIAN*

## C. Date of Delivery

*7-28-04*

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7442

## 1. Article Addressed to:

EP AMERICA PRODUCTION COMPANY  
ATTN BRYAN ANDERSON OSO ENGINEER  
SAN JUAN BU  
WEST LAKE 1 ROOM 19-114  
501 WESTLAKE PARK BLVD  
HOUSTON, HOUSTON 77079

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *[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

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt



## 2. Article Number

7110 6605 9540 0008 7466

1. Article Addressed to:

BRUCE H C HILL  
PO BOX 1817

SAN ANTONIO, SAN ANTONIO 78296-1817

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9540 0008 7497

1. Article Addressed to:

C W BOLIN PROPERTIES  
813 8TH ST STE 1120

WICHITA FALLS, WICHITA FALLS 76301-3354

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 65A

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9540 0008 7510

1. Article Addressed to:

CAROLYNN CLARK WIGGIN  
5013 RIDGE RD

EDINA, EDINA 55436-1013

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## 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

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7527

1. Article Addressed to:

CARYN JEFFREY  
4694 DUVAL DR  
FRISCO, FRISCO 75034

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery  
[Redacted] 7-28

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7527

1. Article Addressed to:

CONOCOPHILLIPS COMPANY  
ATTN CHIEF LANDMAN SAN JUAN/ROCKIES  
PO BOX 2197  
HOUSTON, HOUSTON 77252-2197

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery  
Keith Davis Jul 28 2004

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7596

1. Article Addressed to:

D PHIL BOLIN  
2525 KELL BLVD S - 510  
WICHITA FALLS, WICHITA FALLS 76308

7/22/2004 9:10 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery  
Lacey Newman 07/28/04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7602

## 1. Article Addressed to:

DAN H BOLIN  
1 PARKER SQ STE 510  
2525 KELL BLVD

WICHITA FALLS, WICHITA FALLS 76308-1061

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Lacey Newman* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*Lacey Newman*

## C. Date of Delivery

*7-28-04*

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7633

## 1. Article Addressed to:

DENNIS R STAAL  
PO BOX 1110

CHADRON, CHADRON 69337

7/22/2004 9:10 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Dennis Staal* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*DENNIS STAAL*

## C. Date of Delivery

*7-26-04*

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7640

## 1. Article Addressed to:

DIRK VANHORN REEMTSMA  
556 CRESTWOOD DR

OCEANSIDE, OCEANSIDE 92054

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Dirk Reemtsma* ☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*Dirk Reemtsma*

## C. Date of Delivery

*7-27-04*

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

## 3. Service Type


☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes


PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
 7110 6605 9590 0008 7657	A. Signature <input checked="" type="checkbox"/> <i>Dolores Bolin</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  <b>DOLORES BOLIN TRUSTS</b> <b>813 8TH ST S - 1120</b>  <b>WICHITA FALLS, WICHITA FALLS 76301-3321</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	B. Received by (Printed Name) C. Date of Delivery 7/28/04
	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"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

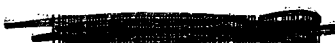
PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
 7110 6605 9590 0008 7770	A. Signature <input checked="" type="checkbox"/> <i>Arlene Darling</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  <b>EST GEORGE ANN BERGH</b> <b>C/O L J BERGH EXEC</b> <b>3206 AIRPORT RD</b>  <b>FAIRBANKS, FAIRBANKS 99709</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	B. Received by (Printed Name) C. Date of Delivery Arlene Darling 7-27-04
	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"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
 7110 6605 9590 0008 7794	A. Signature <input checked="" type="checkbox"/> <i>Karin Mundy</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  <b>EULA MAY JOHNSTON TRUST</b> <b>BANK OF AMERICA NA TRUSTEE</b> <b>PO BOX 2546</b>  <b>FT WORTH, FT WORTH 76113-2546</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	B. Received by (Printed Name) C. Date of Delivery JUL 28 2004
	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"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px auto; width: 150px;">7110 6605 9590 0008 7800</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>Evelyn Simmons</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <i>Evelyn Simmons</i> <b>C. Date of Delivery</b> <i>7-27-04</i> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES enter delivery address below:
<b>1. Article Addressed to:</b>  EVELYN BLANCHE SIMMONS TRSTEE EVELYN BLANCHE SIMMONS TRUST U/T/A 7/28/87 PO BOX 1819 BETHANY, BETHANY 73008-1819  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px auto; width: 150px;">7110 6605 9590 0008 7817</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <i>[Name]</i> <b>C. Date of Delivery</b> <i>7/27/04</i> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES enter delivery address below:
<b>1. Article Addressed to:</b>  FLORENCIA EXPLORATION INC PO BOX 1817  SAN ANTONIO, SAN ANTONIO 78296-1817  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px auto; width: 150px;">7110 6605 9590 0008 7824</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <i>[Name]</i> <b>C. Date of Delivery</b> <i>[Date]</i> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES enter delivery address below:
<b>1. Article Addressed to:</b>  FOUR STAR OIL & GAS COMPANY ATTN BARBARA NELMS PO BOX 36366  HOUSTON, HOUSTON 77236  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7848

1. Article Addressed to:

GARY L SMITH  
829 HOLMES ST  
BETTENDORF, BETTENDORF 52722

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature]  
☐ Agent  
☒ Addressee

B. Received by (Printed Name)  
GARY L. SMITH

C. Date of Delivery  
7-28-04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7893

1. Article Addressed to:

GURDON RANSON MILLER III  
704 CANYON CREST  
SIERRA MADRE, SIERRA MADRE 91024

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 65A

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature]  
☐ Agent  
☒ Addressee

B. Received by (Printed Name)  
CARLONA SHAFER

C. Date of Delivery  
7-28-04

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number  
[Redacted]  
7110 6605 9590 0008 7947

1. Article Addressed to:

IDA O HANCOCK  
PO BOX 3272  
EAGLE, EAGLE 81631-3272

7/22/2004 9:11 AM  
Code: San Juan 29-7 Unit 191

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X [Signature]  
☐ Agent  
☒ Addressee

B. Received by (Printed Name)  
IDA HANCOCK

C. Date of Delivery  
JUL 28 2004

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

3. Service Type ☒ Certified

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7961

1. Article Addressed to:

INTERNAL REVENUE SERVICE  
F/A/O STEPHANIE ANN CANDELARIA  
ACCT #585823434  
PO BOX 145566  
CINCINNATI, CINCINNATI 45250-5566

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## 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? ☐ YesIf YES enter delivery address below: ☐ No

JUL 26 2004

COVINGTON, KY

3. Service Type MAIL UNIT # 44

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 7962

1. Article Addressed to:

JAMES HOHENSTEIN  
7773 ARLINGTON DR

BOULDER, BOULDER 80303-3207

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## 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? ☐ YesIf YES enter delivery address below: ☐ No

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8036

1. Article Addressed to:

JANE MANNING PITKIN ESTATE  
GURDON MILLER EXECUTOR  
704 CANYON CREST DR

SIERRA MADRE, SIERRA MADRE 91024-1312

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## 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? ☐ YesIf YES enter delivery address below: ☐ No

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
<div style="background-color: black; width: 150px; height: 1.2em; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px;">7110 6605 9590 0008 8050</div>	<div> <b>A. Signature</b>  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee         </div> <div> <b>B. Received by (Printed Name)</b>          JAY S. GOTTSTEIN       </div> <div> <b>C. Date of Delivery</b>          7/27/04       </div> <div> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes          If YES enter delivery address below: <input type="checkbox"/> No       </div>
<b>1. Article Addressed to:</b>  JAY GOTTSTEIN TRUSTEE JAY GOTTSTEIN TRUST 12230 SAGAMORE RD  LEAWOOD, LEAWOOD 66209-1269  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<div> <b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> </div> <div> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes       </div>

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Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
<div style="background-color: black; width: 150px; height: 1.2em; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px;">7110 6605 9590 0008 8067</div>	<div> <b>A. Signature</b>  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee         </div> <div> <b>B. Received by (Printed Name)</b>          JEAN F LOEPKEY       </div> <div> <b>C. Date of Delivery</b>          7/27/04       </div> <div> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes          If YES enter delivery address below: <input type="checkbox"/> No       </div>
<b>1. Article Addressed to:</b>  JEAN F LOEPKEY 21 CHARLESTON SQUARE  ORMOND BEACH, ORMOND BEACH 32174  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	<div> <b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> </div> <div> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes       </div>

PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY
<div style="background-color: black; width: 150px; height: 1.2em; margin-bottom: 5px;"></div> <div style="border: 1px solid black; padding: 2px;">7110 6605 9590 0008 8081</div>	<div> <b>A. Signature</b>  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee         </div> <div> <b>B. Received by (Printed Name)</b>          JERRY J ANDREW       </div> <div> <b>C. Date of Delivery</b>          JUL 27 2004       </div> <div> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes          If YES enter delivery address below: <input type="checkbox"/> No       </div>
<b>1. Article Addressed to:</b>  JERRY J ANDREW 408 LONGWOODS LN  HOUSTON, HOUSTON 77024  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	<div> <b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> </div> <div> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes       </div>

PS Form 3811

Domestic Return Receipt



## 2. Article Number

7110 6605 9590 0008 8142

## 1. Article Addressed to:

JOHN C DAWSON JR & ROBBIN R  
DAWSON CO-TRUSTEES OF THE  
DAWSON FAMILY TRUST  
PO BOX 1507  
PANHANDLE, PANHANDLE 79068-1507

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

*Alice Dawson* ☒ Agent ☐ Addressee

## B. Received by (Printed Name)

*Alice Dawson*

## C. Date of Delivery

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

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8173

## 1. Article Addressed to:

JOSEPH C JASTRZEMBSKI  
911 1ST ST NE  
MINOT, MINOT 58703

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

*A. Jastrzewski* ☐ Agent ☐ Addressee

## B. Received by (Printed Name)

*A. Jastrzewski*

## C. Date of Delivery

*7-28*D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8227

## 1. Article Addressed to:

KENNETH ROBERT SCHMIDT  
7466 FIREWEED CIR

CITRUS HEIGHTS, CITRUS HEIGHTS 95610-3284

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

*B. Caserta* ☒ Agent ☐ Addressee

## B. Received by (Printed Name)

*CASERTA*

## C. Date of Delivery

*7-27-04*D. Is delivery address different from item 1? ☐ Yes  
If YES enter delivery address below: ☐ No

## 3. Service Type

☒ Certified

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8234

1. Article Addressed to:

KIM MCKIM DUNN  
302 HUMPHRIES

EDGEWOOD, EDGEWOOD 75117

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Arnon Dunn*☐ Agent☒ Addressee

B. Received by (Printed Name)

Arnon Dunn

C. Date of Delivery

7/24

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8258

1. Article Addressed to:

LANCE REEMTSMA  
2601 GRANT ST

BERKELEY, BERKELEY 94703-1915

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Lance Reemtsma*☐ Agent☒ Addressee

B. Received by (Printed Name)

Lance Reemtsma

C. Date of Delivery

27 July 2004

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 8265

1. Article Addressed to:

LAURA DICHTER  
203 JACKSON ST

DENVER, DENVER 80206-5524

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *L. Dichter*☐ Agent☒ Addressee

B. Received by (Printed Name)

L. Dichter

C. Date of Delivery

7-24-04

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

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

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<b>2. Article Number</b>  [REDACTED] 7110 6605 9590 0008 8272		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  LELAND STANFORD JR UNIVERSITY THE BOARD OF TRUSTEE C/O BANK OF AMERICA PO BOX 840738 DALLAS, DALLAS 75284  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		<b>A. Signature</b> X <i>R. Aleman</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> 7-11-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  [REDACTED] 7110 6605 9590 0008 8289		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  LESLIE HARDWICK OSHEA 120 E 79TH ST APT 11E  NEW YORK, NEW YORK 10021  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191		<b>A. Signature</b> X <i>Melvin Rosario</i>	<input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b> Melvin Rosario	<b>C. Date of Delivery</b> 7-27-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  [REDACTED] 7110 6605 9590 0008 8302		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  LINDA JEANNE LUNDELL LINDSEY PO BOX 631565  NACOGDOCHES, NACOGDOCHES 75963 1565  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		<b>A. Signature</b> X <i>Betty</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b> Betty	<b>C. Date of Delivery</b> 7-27-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 20px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">7110 6605 9590 0008 8319</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b></span> Stephen White <span style="float: right;">7-29-04</span> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  LINDA L WHITE 24197 IVES AVE  GLENWOOD, GLENWOOD 51534  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 20px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">7110 6605 9590 0008 8340</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b></span> LOLA I. ODENDAHL <span style="float: right;">7/26/04</span> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No
<b>1. Article Addressed to:</b>  LOLA I ODENDAHL PRESIDENT F J ODENDAHL INVESTMENTS INC 110 E SEVENTH AVE  COLONA, COLONA 61241-9128  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

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Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 20px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">7110 6605 9590 0008 8364</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b></span> Bob Valdez <span style="float: right;">7-27-04</span> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No
<b>1. Article Addressed to:</b>  LORRAYN GAY HACKER C/O JAMES M RAYMOND-POA PO BOX 291445  KERRVILLE, KERRVILLE 78029-1445  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

PS Form 3811

**2. Article Number**

[Redacted]

7110 6605 9590 0008 8371

**1. Article Addressed to:**

MABELLE H SOWERS ROYALTY TRUST  
MABELLE S BRAMHALL TRUSTEE  
5026 AUGUSTA CIR

COLLEGE STATION, COLLEGE STATION 77445

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**  
X *Hailu Chang* ☒ Agent ☐ Addressee

**B. Received by (Printed Name)**  
Hailu Chang

**C. Date of Delivery**  
7-22-04

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

**3. Service Type** ☒ **Certified**

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

Form 3811

Domestic Return Receipt

**2. Article Number**

[Redacted]

7110 6605 9590 0008 8388

**1. Article Addressed to:**

MANSFIELD FAMILY 2001 REV TRUST  
DTD OCT 12 2001 BENJAMIN J  
MANSFIELD & NANCY CAROL CUTLER  
MANSFIELD TRUSTEES  
2615 EVERETT DR  
RENO, RENO 89503

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**  
X *Benjamin J Mansfield* ☐ Agent ☐ Addressee

**B. Received by (Printed Name)**  
Benjamin J Mansfield

**C. Date of Delivery**  
7-26-04

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

**3. Service Type** ☒ **Certified**

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

PS Form 3811

Domestic Return Receipt

**2. Article Number**

[Redacted]

7110 6605 9590 0008 8395

**1. Article Addressed to:**

MAP 1992-A PARTNERS LP  
C/O TX COMMERCE CO NA  
PO BOX 910864

DALLAS, DALLAS 75391-0864

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**  
X *M. Butler* ☐ Agent ☐ Addressee

**B. Received by (Printed Name)**  
M. Butler

**C. Date of Delivery**  
Jul 26 2004

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

**3. Service Type** ☒ **Certified**

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

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8418		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  MARIE A SCHAEFER 4134 NORTHWEST BLVD APT 303 DAVENPORT, DAVENPORT 52806  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		<b>A. Signature</b> X <i>Marie A. Schaefer</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> 7/22/04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8425		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  MARY ESTHER BROWN 1857 55TH AVE ALEDO, ALEDO 61231  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		<b>A. Signature</b> X <i>Mary E. Brown</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b> MARY E. BROWN	<b>C. Date of Delivery</b> 7-26-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  7110 6605 9590 0008 8432		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  MARY J MILLER 23680 W 289TH TER PAOLA, PAOLA 66071  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A		<b>A. Signature</b> X <i>Mary J. Miller</i>	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b> Mary J. Miller	<b>C. Date of Delivery</b> 7-27-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px 0;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">7110 6605 9590 0008 8456</div>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>MCCORMICK &amp; CO INC</b>  <b>C/O CHASE BANK OF TEXAS NA</b>  <b>PO BOX 910864</b>   <b>DALLAS, DALLAS 75391-0864</b></p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 191</p>		<b>A. Signature</b> X <i>M. Butte</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b> <i>M. Butte</i>	<b>C. Date of Delivery</b> 7/22/2004
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px 0;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">7110 6605 9590 0008 8531</div>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>MICHAEL W. HOUSTON</b>  <b>PO BOX 940</b>   <b>BUFFALO, BUFFALO 65622</b></p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 65A</p>		<b>A. Signature</b> X <i>M. Houston</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> 7-29-04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="background-color: black; width: 150px; height: 1.2em; margin: 5px 0;"></div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">7110 6605 9590 0008 8579</div>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>MITZI ANN HENDERSON EASLEY</b>  <b>1203 ARRONIMINK CIR</b>   <b>AUSTIN, AUSTIN 78746-6301</b></p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 65A</p>		<b>A. Signature</b> X <i>Mitzi</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		<b>B. Received by (Printed Name)</b>	<b>C. Date of Delivery</b> 7/22/04
		<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		<b>3. Service Type</b>	<input checked="" type="checkbox"/> <b>Certified</b>
		<b>4. Restricted Delivery? (Extra Fee)</b>	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9590 0008 8586 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <hr/> B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> Name Moore <span style="float: right;">7-29-04 JR</span> <hr/> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  MOORE LOYAL TRUST LEE WAYNE MOORE TRUSTEE 403 N MARIENFELD  MIDLAND, MIDLAND 79701  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> <hr/> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9590 0008 8609 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <hr/> B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <span style="float: right;">7-24-04</span> <hr/> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  MURIEL ANDREWS BOSSERT LIFE ESTATE 10606 VISTA LAGO PLACE  SAN DIEGO, SAN DIEGO 92131  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> <hr/> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811


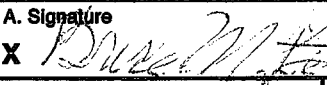
Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px;">   7110 6605 9590 0008 8630 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <hr/> B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <span style="float: right;">7-24-04</span> <hr/> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  NFF LTD 1738 W CHOKECHERRY DR  LOUISVILLE, LOUISVILLE 80027  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> <hr/> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811


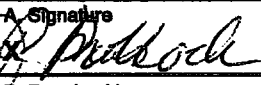
Domestic Return Receipt



2. Article Number	COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9590 0008 8685	A. Signature X 	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to:  PATTERSON GROUP 6237 S DOVER ST  LITTLETON, LITTLETON 80123  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	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
	4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes


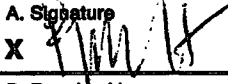
PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9590 0008 8708	A. Signature X 	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to:  PERRY H POLLOCK PO BOX 950  ASPEN, ASPEN 81612-0950  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	B. Received by (Printed Name) SA	C. Date of Delivery 7/27/04
	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
	4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

2. Article Number	COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9590 0008 8739	A. Signature X 	<input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to:  PHILIP L HOMBURGER & DEBRA L HOMBURGER JTWROS 2160 S JACKSON  DENVER, DENVER 80210-4931  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	B. Received by (Printed Name)	C. Date of Delivery JUL 24 2004
	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
	4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px 0;">   7110 6605 9590 0008 8753 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <hr/> B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <span style="float: right;">7-29-04</span> <hr/> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <p style="text-align: center;">PURE RESOURCES LP ATTN OBO ACCOUNTING 500 W ILLINOIS AVE  MIDLAND, MIDLAND 79701</p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 191</p>	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> <hr/> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px 0;">   7110 6605 9590 0008 8777 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <hr/> B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <span style="float: right;"></span> <hr/> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <p style="text-align: center;">R L BOLIN PROPERTIES LTD 4245 KEMP BLVD STE 316  WICHITA FALLS, WICHITA FALLS 76308</p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 65A</p>	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> <hr/> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; border: 1px solid black; padding: 5px; margin: 10px 0;">   7110 6605 9590 0008 8807 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <hr/> B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <span style="float: right;"></span> <hr/> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  <p style="text-align: center;">ROBERT G HANAGAN SUCC TRUST MMH TRUST U/TA DTD 10/2/89 PO BOX 1887  SANTA FE, SANTA FE 87504-1887</p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 191</p>	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> <hr/> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 20px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px auto; width: 150px;">7110 6605 9590 0008 8821</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>Walt Lundell</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b> 7/28</span> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  <b>ROBERT WALTER LUNDELL</b> <b>2450 FONDREN #304</b>  <b>HOUSTON, HOUSTON 77063</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 20px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px auto; width: 150px;">7110 6605 9590 0008 8838</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>SC 16009</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b> 7-29</span> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  <b>RODERICK A IRONSIDE</b> <b>349 WESLEY DR</b>  <b>CHAPEL HILL, CHAPEL HILL 27516</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes


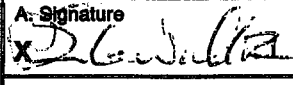
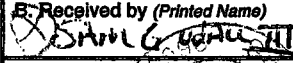
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 20px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px auto; width: 150px;">7110 6605 9590 0008 8845</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X <i>Roger J Lowe</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <span style="float: right;"><b>C. Date of Delivery</b> 7/24/04</span> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  <b>ROGER J LOWE</b> <b>762 CORONA ST</b>  <b>DENVER, DENVER 80218</b>  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

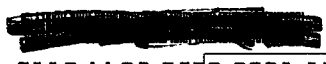

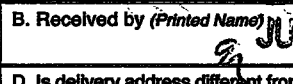
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center;">   7110 6605 9590 0008 8869 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <div style="text-align: right;"> <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee </div>
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>SAM G WALL III</b>  <b>PO BOX 182418</b>   <b>ARLINGTON, ARLINGTON 76096-2418</b></p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 191</p>	<b>B. Received by (Printed Name)</b> 
	<b>C. Date of Delivery</b> <p style="text-align: center;">JUL 23 2004</p>
	<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b>	
<b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes	

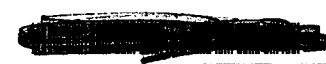

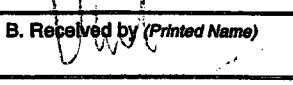
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center;">   7110 6605 9590 0008 8883 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <div style="text-align: right;"> <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee </div>
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>SHIRLEY M WALL GAULDIN</b>  <b>PO BOX 825</b>   <b>BURNET, BURNET 78611-0825</b></p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 191</p>	<b>B. Received by (Printed Name)</b> 
	<b>C. Date of Delivery</b> <p style="text-align: center;">JUL 23 2004</p>
	<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b>	
<b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes	

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center;">   7110 6605 9590 0008 8906 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> X  <div style="text-align: right;"> <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee </div>
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>STATE OF NEW MEXICO</b>  <b>PO BOX 1148</b>   <b>SANTA FE, SANTA FE 87504-1148</b></p> <p style="text-align: center;">7/22/2004 9:11 AM</p> <p style="text-align: center;">Code: San Juan 29-7 Unit 191</p>	<b>B. Received by (Printed Name)</b> 
	<b>C. Date of Delivery</b> 
	<b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b>	
<b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes	

PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 15px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">7110 6605 9590 0008 8937</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> <input checked="" type="checkbox"/> <i>Suvian Daves</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <i>Suvian Daves</i> <b>C. Date of Delivery</b> <i>7-28-04</i> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>SUVIAN RUTH DAVES</b>  <b>21239 COUNTY RD W</b>   <b>LEWIS, LEWIS 81327</b></p> <p style="text-align: center;">7/22/2004 9:11 AM          Code: San Juan 29-7 Unit 65A</p>	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

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Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 15px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">7110 6605 9590 0008 8975</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> <input checked="" type="checkbox"/> <i>Stanley M. Wright</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <i>Stanley M. Wright</i> <b>C. Date of Delivery</b> <i>7-29-04</i> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>THE WRIGHT BROS TRUST</b>  <b>C/O STANLEY M WRIGHT</b>  <b>2157 HWY 130</b>   <b>BENNETT, BENNETT 52721-9801</b></p> <p style="text-align: center;">7/22/2004 9:11 AM          Code: San Juan 29-7 Unit 65A</p>	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes


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Domestic Return Receipt

<b>2. Article Number</b>  <div style="background-color: black; width: 150px; height: 15px; margin: 5px auto;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center;">7110 6605 9590 0008 8982</div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> <b>A. Signature</b> <input checked="" type="checkbox"/> <i>T. B. Catron</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <b>B. Received by (Printed Name)</b> <i>T. B. CATRON</i> <b>C. Date of Delivery</b> <div style="text-align: center;">JUL 28 2004 1501</div> <b>D. Is delivery address different from item 1?</b> <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
<b>1. Article Addressed to:</b>  <p style="text-align: center;"><b>THOMAS B CATRON III</b>  <b>TRUSTEE U/W/O SUE C BERGERE</b>  <b>PO BOX 788</b>   <b>SANTA FE, SANTA FE 87501</b></p> <p style="text-align: center;">7/22/2004 9:11 AM          Code: San Juan 29-7 Unit 65A</p>	<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>Certified</b> <b>4. Restricted Delivery? (Extra Fee)</b> <input type="checkbox"/> Yes

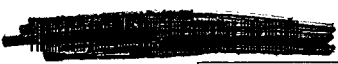
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Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; margin-top: 20px;">   7110 6605 9590 0008 9026 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <i>Thomas Pollock</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <i>Thomas Pollock</i> <span style="float: right;">7-28-04</span> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  THOMAS POLLOCK 1614 TORRANCE ST  SAN DIEGO, SAN DIEGO 92103-3719  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

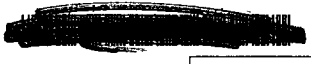
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; margin-top: 20px;">   7110 6605 9590 0008 9033 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <span style="float: right;">7/26</span> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  THORNTON HARDIE III TRUSTEE MARY ELIZABETH HARDIE ROY TRST 1700 PACIFIC AVE STE 3300  DALLAS, DALLAS 75201  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


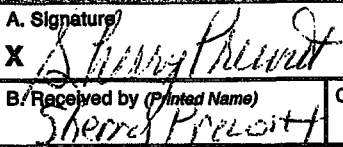
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b> <div style="text-align: center; margin-top: 20px;">   7110 6605 9590 0008 9057 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X <i>Melba Trout</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> <i>Melba Trout</i> <span style="float: right;">7/26/04</span> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  TROUT LIMITED PARTNERSHIP 7500 S HWY 83  SCOTT CITY, SCOTT CITY 67871  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


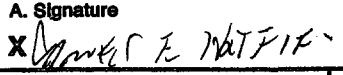
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="text-align: center;">   7110 6605 9590 0008 9064 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> Sherred Prewitt <span style="float: right;">7-29-04</span> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No
1. Article Addressed to:  V A JOHNSTON FAMILY TRUST C/O DAVID A PREWITT & M A CHESSER CO-TRUSTEES PO BOX 825 RALLS, RALLS 79357  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 65A	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes


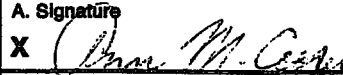
PS Form 3811

Domestic Return Receipt

<b>2. Article Number</b>  <div style="text-align: center;">   7110 6605 9590 0008 9101 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> Virginia R Hatfield <span style="float: right;"></span> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  VIRGINIA R HATFIELD 3616 GARDEN BROOK DR APT 131  DALLAS, DALLAS 75234-2407  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

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Domestic Return Receipt

<b>2. Article Number</b>  <div style="text-align: center;">   7110 6605 9590 0008 9118 </div>	<b>COMPLETE THIS SECTION ON DELIVERY</b> A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span> W E Cooper <span style="float: right;">7/27/04</span> D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to:  W E COOPER 1301 CR 406  TAYLOR, TAYLOR 76574-5445  7/22/2004 9:11 AM Code: San Juan 29-7 Unit 191	3. Service Type <input checked="" type="checkbox"/> <b>Certified</b> 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

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Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9156

1. Article Addressed to:

WILLIAM W BRAMLETT  
PO BOX 3273  
MIDLAND, MIDLAND 79702

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

Charles House

C. Date of Delivery

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

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Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9163

1. Article Addressed to:

WILLIAMS PRODUCTION COMPANY  
ONE WILLIAMS CENTER  
PO BOX 3102 MS25-3  
TULSA, TULSA 74101

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 191

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

A MAIL CALL

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

STANLEY ELEN

C. Date of Delivery

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

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Domestic Return Receipt

## 2. Article Number

7110 6605 9590 0008 9170

1. Article Addressed to:

XTO ENERGY INC  
810 HOUSTON ST STE 2000  
FORT WORTH, FORT WORTH 76102-6298

7/22/2004 9:11 AM

Code: San Juan 29-7 Unit 65A

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Steve Williams

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

Steve Williams

C. Date of Delivery

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

3. Service Type

☒ Certified

4. Restricted Delivery? (Extra Fee)

☐ Yes

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