

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

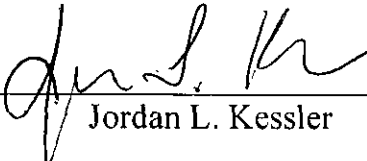
**APPLICATIONS OF COG OPERATING LLC FOR COMPULSORY POOLING AND
NON-STANDARD SPACING AND PRORATION UNITS, LEA COUNTY, NEW
MEXICO.**

CASE NOS. 15311, 15312, 15313

AFFIDAVIT

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

Jordan L. Kessler, attorney in fact and authorized representative of COG Operating LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Applications were provided under the notice letters attached hereto.

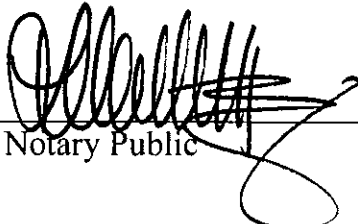


Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 27th day of May 2015 by Jordan L.
Kessler.



OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/19



Notary Public

**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 8
Submitted by: COG Operating LLC
Hearing Date: May 27, 2015**

**COG OPERATING LLC
GUNNER 8 FED COM NO. 6H WELL**

POOLED PARTIES:

Occidental Oil & Gas Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Devon Energy Production Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Yates Brothers
105 S. 4th St.
Artesia, NM 88210

Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

OFFSETS:

ABO Perto Corp
105 S 4th St
Artesia, NM 88210

Occidental Oil & Gas
Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Chesapeake Exploration, LLC
P. O. Box 18496
Oklahoma City, OK 73154

Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

Yates Brothers
105 S. 4th St.
Artesia, NM 88210

Ross Duncan Properties, LLC
P.O. Box 647
Artesia, NM 88211

YATES Petroleum Corp.
105 S 4th St
Artesia, NM 88210

MYCO Industries Inc
105 S 4th St
Artesia, NM 88210

OXY Y-1
PO BOX 27570
Artesia, NM 88210

Devon Energy Oper Co LP
20 N Broadway #1500
Oklahoma City, OK 72102-
8260

EOG Resources, Inc.
P. O. Box 2267
Midland, Texas 79705

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Chevron U.S.A. Inc.
P. O. Box 3200
Houston, TX 77252

Chevron USA Inc
1400 Smith St
Houston, TX 77002-7327

Devon Energy Prod. Co. LP
20 N. Broadway #1500
Oklahoma City, OK 73102

Devon Energy Production
Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

ConocoPhillips Company -
P. O. Box 7500
Bartlesville, OK 74005

HOLLAND & HART ^{LLP}



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
Gunner 8 Fed Com No 6H Well.**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC, has filed the enclosed amended application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on May 28, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Mike Wallace, at (432) 221-0465 or mwallace@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**RE: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
Gunner 8 Fed Com No 6H Well.**

This letter is to advise you that COG Operating LLC has filed the enclosed amended application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 28, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Mike Wallace, at (432) 221-0465 or mwallace@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

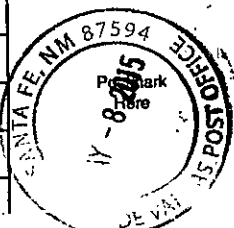
Holland & Hart^{LLP}

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

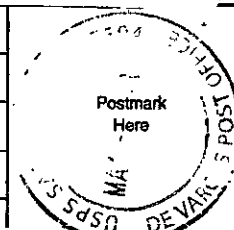
110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

7006 2760 0001 6377 6813

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For delivery information visit OFFICE	
MHF/COG GUNNER 6H	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$
	
Sent To: Occidental Oil & Gas Corporation Street or PO Box: 5 Greenway Plaza, Suite 110 City: Houston, TX 77046	
PS Form	Instructions

7006 2760 0001 6377 6820

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit OFFICE	
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Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$
	
Sent To: Devon Energy Production Company LP Street, or PO Box: Devon Energy Center Tower, City, State: 333 W. Sheridan Avenue Oklahoma City, OK 73102-5015	
PS Form	Instructions

SENDER: COMPLETE THIS SECTION		THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature: <i>[Signature]</i> ☐ Agent ☐ Addressee	
1. Article Addressed to:		B. Received by (Printed Name): <i>Guire 6029</i>	
Occidental Oil & Gas Corporation 5 Greenway Plaza, Suite 110 Houston, TX 77046		C. Date of Delivery: <i>5-18-13</i>	
2. Article Number: <i>7006 2760 0001 6377 6813</i>		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
(Transfer from service label)		3. Service Type: ☒ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☒ Return Receipt for Merchandise ☐ C.O.D.	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature: <i>David Carroll</i> ☐ Agent ☐ Addressee	
1. Article Addressed to:		B. Received by (Printed Name): <i>18 MAY 2015</i>	
Devon Energy Production Company LP Devon Energy Center Tower, 333 W. Sheridan Avenue Oklahoma City, OK 73102-5015		C. Date of Delivery: <i>18 MAY 2015</i>	
2. Article Number: <i>7006 2760 0001 6377 6820</i>		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
(Transfer from service label)		3. Service Type: ☒ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☒ Return Receipt for Merchandise ☐ C.O.D.	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7006 2760 0001 6377 6837

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GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 1369

Sent ☐ First Class ☐ Priority Mail ☐ Registered Mail ☐ Certified Mail ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Signature Required ☐ Signature Confirmation ☐ Restricted Delivery ☐ Signature Restricted Delivery ☐ Signature Restricted Delivery with Insurance ☐ Signature Restricted Delivery with Insurance and Return Receipt for Merchandise

Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

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

7006 2760 0001 6377 6844

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GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 1369

Sent ☐ First Class ☐ Priority Mail ☐ Registered Mail ☐ Certified Mail ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Signature Required ☐ Signature Confirmation ☐ Restricted Delivery ☐ Signature Restricted Delivery ☐ Signature Restricted Delivery with Insurance ☐ Signature Restricted Delivery with Insurance and Return Receipt for Merchandise

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

2. Article Number (Transfer from service label) **7006 2760 0001 6377 6837**

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) **[Signature]** C. Date of Delivery **5-15-07**

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

2. Article Number (Transfer from service label) **7006 2760 0001 6377 6844**

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) **[Signature]** C. Date of Delivery **5-15-07**

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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Tracking Number: 70062760000163776837

Updated Delivery Day: Tuesday, May 19, 2015

Product & Tracking Information

Postal Product:

Features:
Certified Mail™

DATE & TIME	STATUS OF ITEM	LOCATION
May 19, 2015, 5:13 am	Delivered	HOUSTON, TX 77210

Your item was delivered at 5:13 am on May 19, 2015 in HOUSTON, TX 77210

May 19, 2015, 5:11 am	Arrived at Unit	HOUSTON, TX 77201
May 15, 2015, 9:47 am	Departed USPS Facility	NORTH HOUSTON, TX 77315
May 13, 2015, 7:44 am	Arrived at USPS Facility	NORTH HOUSTON, TX 77315

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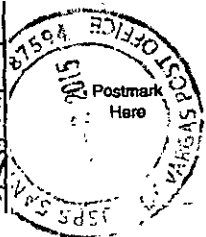
For delivery information visit:
OFFIC

MHF/COG
GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees 669

Sent To: Yates Brothers
 Street, Apt. or PO Box: 105 S. 4th St.
 City, State: Artesia, NM 88210

PS Form 3811, February 2004



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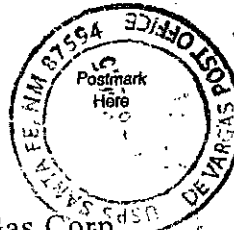
For delivery information visit:
OFFIC

MHF/COG
GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees 669

Sent To: Sugarberry Oil & Gas Corp.
 Street, Apt. or PO Box: 5950 Cedar Springs Rd.
 City, State: Suite 230, Dallas, TX 75235-6803

PS Form 3811, February 2004



7006 2760 0001 6377 6868

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 ■ Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:
 Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

2. Article Number: 7006 2760 0001 6377 6851
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: [Signature]
☒ Agent
☐ Addressee

B. Received by (Printed Name): Sernam
 C. Date of Delivery: 5/14/15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Sugarberry Oil & Gas Corp.
 5950 Cedar Springs Rd.
 Suite 230
 Dallas, TX 75235-6803

2. Article Number: 7006 2760 0001 6377 6868
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: [Signature]
☒ Agent
☐ Addressee

B. Received by (Printed Name): [Signature]
 C. Date of Delivery: MAY 15 2015

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6377 6875

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MHF/COG
GUNNER 6H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total	669

Sent To: **ABO Perto Corp**
 Street, or PO Box: **105 S 4th St**
 City, State, ZIP+4: **Artesia, NM 88210**

PS Form 3811, February 2004



7006 2760 0001 6377 6882

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OFFICIAL USE

MHF/COG
GUNNER 6H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total	669

Sent To: **Occidental Oil & Gas Corporation**
 Street, or PO Box: **5 Greenway Plaza, Suite 110**
 City, State, ZIP+4: **Houston, TX 77046**

PS Form 380C, August 2006



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
ABO Perto Corp
105 S 4th St
Artesia, NM 88210

2. Article Number (Transfer from service label): **7006 2760 0001 6377 6875**

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]*
 C. Date of Delivery: *5/4/05*

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

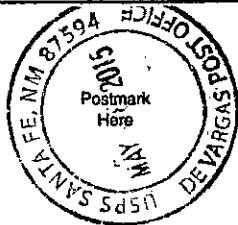
3. Service Type:
☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☒ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

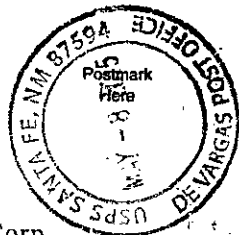
7006 2760 0001 6377 6899

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MHF/COG GUNNER 6H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total	
Sent To: Chesapeake Exploration, LLC	
P. O. Box 18496	
Oklahoma City, OK 73154	
PS Form 3811, February 2004	



7006 2760 0001 6377 6905

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
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For delivery information, visit OFFICIAL	
MHF/COG GUNNER 6H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Pr	
Sent To: Sugarberry Oil & Gas Corp.	
5950 Cedar Springs Rd.	
Suite 230	
Dallas, TX 75235-6803	
PS Form 3811, February 2004	



SL: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		COMPLETE THIS SECTION ON DELIVERY A. Signature ☒ Agent ☐ Addressee X B. Received by (Printed Name) C. Date of Delivery MAY 15 2015 D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below: MAILROOM 18	
1. Article Addressed to: Chesapeake Exploration, LLC P. O. Box 18496 Oklahoma City, OK 73154		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number: (Transfer from service label) 7006 2760 0001 6377 6899		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

7006 2760 0001 6377 6912

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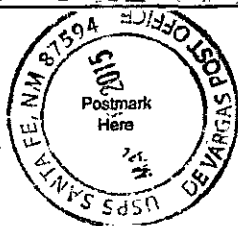
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MHF/COG
GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent To
 Street, Apt. # or PO Box No.
 City, State, ZIP+4®
 Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

PS Form 3800, February 2004



7006 2760 0001 6377 6929

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

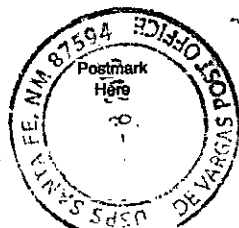
OFFICIAL

MHF/COG
GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent To
 Street, Apt. # or PO Box No.
 City, State, ZIP+4®
 Ross Duncan Properties, LLC
 P.O. Box 647
 Artesia, NM 88211

PS Form 3800, February 2004



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

2. Article Number: 7006 2760 0001 6377 6912
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name): [Signature]
 C. Date of Delivery: 5-15-15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Ross Duncan Properties, LLC
 P.O. Box 647
 Artesia, NM 88211

2. Article Number: 7006 2760 0001 6377 6929
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

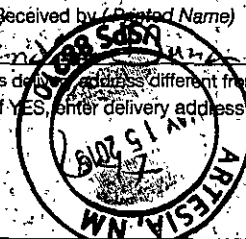
A. Signature: [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name): [Signature]
 C. Date of Delivery: 5-15-15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes



7006 2760 0001 6377 6936

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

For delivery information visit
OFFIC

MHF/COG
 GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 609
 Total Postage

Sent To
 Street, Apt. No. or PO Box No
 City, State, Zi

YATES Petroleum Corp.
 105 S 4th St
 Artesia, NM 88210

PS Form 3800, August 2000 See Reverse for Instructions

7006 2760 0001 6377 6943

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

For delivery information visit
OFFIC

MHF/COG
 GUNNER 6H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 609
 Total Postage

Sent To
 Street, Apt. No. or PO Box No
 City, State, Zi

MYCO Industries Inc
 105 S 4th St
 Artesia, NM 88210

PS Form 3800, August 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

2. Article Addressed to:
 YATES Petroleum Corp.
 105 S 4th St
 Artesia, NM 88210

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7006 2760 0001 6377 6936
 (Transfer from service label)

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

SENDER: COMPLETE THIS SECTION

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

2. Article Addressed to:
 MYCO Industries Inc
 105 S 4th St
 Artesia, NM 88210

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7006 2760 0001 6377 6943
 (Transfer from service label)

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

7006 2760 0001 6377 6950

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No International)	
For delivery information visit	MHF/COG
OFFICE	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$
Sent To	OXY Y-1
Street, Ap or PO Box	PO BOX 27570
City, State	Artesia, NM 88210
PS Form	



7006 2760 0001 6377 6967

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No International)	
For delivery information visit	MHF/COG
OFFICE	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	220
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$
Sent To	Devon Energy Oper Co LP
Street, Ap or PO Box	20 N Broadway #1500
City, State	Oklahoma City, OK 72102-8260
PS Form	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Devon Energy Oper Co LP 20 N Broadway #1500 Oklahoma City, OK 72102-8260		A. Signature: <i>David Carr</i> ☒ Agent ☐ Addressee B. Received by (Printed Name): <i>David Carr</i> C. Date of Delivery: <i>MAY 18 2015</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
2. Article Number: <i>7006 2760 0001 6377 6967</i> (Transfer from service label)		3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No		PS Form 3811, July 2013 Domestic Return Receipt	

7006 2760 0001 6377 6974

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only) MHF/COG
 For delivery information visit **OFFICIAL**
GUNNER 6H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	1069
Total	

Postmark Here
 USPS SANTA FE, NM 87504
 MAY 15 2015
 DE VARGAS POST OFFICE

Sent To: **EOG Resources, Inc.**
 P. O. Box 2267
 Midland, Texas 79705

PS Form 3800, August 2006

7006 2760 0001 6377 6981

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only) MHF/COG
 For delivery information visit **OFFICIAL**
GUNNER 6H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	1069
Total	

Postmark Here
 USPS SANTA FE, NM 87504
 MAY 15 2015
 DE VARGAS POST OFFICE

Sent To: **EOG Resources, Inc.**
 5509 Champions Dr.
 Midland, TX 79706

PS Form 3800, August 2006

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
EOG Resources, Inc.
P. O. Box 2267
Midland, Texas 79705

2. Article Number: 7006 2760 0001 6377 6974

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]*

C. Date of Delivery: 5-15-15

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

3. Service Type:
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

2. Article Number: 7006 2760 0001 6377 6981

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]*

C. Date of Delivery: 5-15-15

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

3. Service Type:
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6377 6998

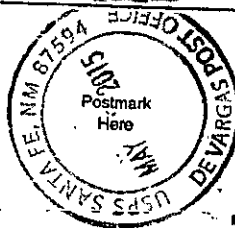
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **OFFIC**
MHF/COG
GUNNER 6H

Postage	\$	
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage		

Sent To: **Chevron U.S.A. Inc.**
P. O. Box 3200
Houston, TX 77252

Street, Apt. No. or PO Box No.
 City, State, Zip

PS Form 3800, August 2006 See Reverse for Instructions



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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Chevron U.S. Inc.
P. O. Box 3200
Houston, TX 77252

2. Article Number: **7006 2760 0001 6377 6998**
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☒ Addressee

B. Received by (Printed Name): *[Name]* C. Date of Delivery: *[Date]*

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

3. Service Type:
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered® ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6377 7001

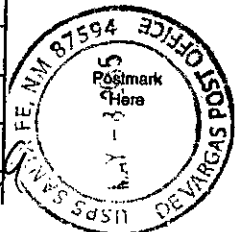
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **OFFIC**
MHF/COG
GUNNER 6H

Postage	\$	69
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		669
Total		

Sent To: **Chevron USA Inc**
1400 Smith St
Houston, TX 77002-7327

Street, Apt. No. or PO Box No.
 City, State, Zip

PS Form 3800, August 2006 See Reverse for Instructions



7006 2760 0001 6381 8407

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

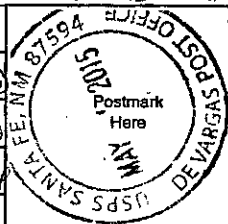
For delivery information, visit **OFFIC**

MHF/COG
GUNNER 6H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$

Sent To: Devon Energy Prod. Co. LP
 Street, Apt. or PO Box: 20 N. Broadway #1500
 City, State: Oklahoma City, OK 73102

PS Form 3811, July 2013



7006 2760 0001 6381 8414

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

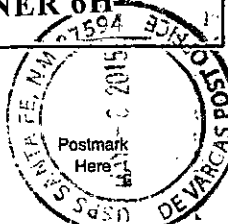
For delivery information, visit **OFFIC**

MHF/COG
GUNNER 6H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$

Sent To: Devon Energy Production Company LP
 Street, Apt. or PO Box: Devon Energy Center Tower, 333 W. Sheridan Avenue
 City, State: Oklahoma City, OK 73102-5015

PS Form 3811, February 2004

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Devon Energy Prod. Co. LP
 20 N. Broadway #1500
 Oklahoma City, OK 73102

2. Article Number: 7006 2760 0001 6381 8407

(Transfer from service label)

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *David Carr* Agent: ☒ Addressee: ☐

B. Received by (Printed Name): *David Carr* C. Date of Delivery: *MAY 18 2015*

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

3. Service Type: ☒ Certified Mail™ ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail™ ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Devon Energy Production
 Company LP
 Devon Energy Center Tower,
 333 W. Sheridan Avenue
 Oklahoma City, OK 73102-5015

2. Article Number: 7006 2760 0001 6381 8414

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *David Carr* Agent: ☒ Addressee: ☐

B. Received by (Printed Name): *David Carr* C. Date of Delivery: *MAY 18 2015*

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

102595-02-M-1540

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

For delivery information visit usps.com

OFFICE

Postage \$ 69

Certified Fee 330

Return Receipt Fee (Endorsement Required) 220

Restricted Delivery Fee (Endorsement Required) 1069

Total Postage & Fees \$ 1669

Postmark Here
 MAY 2015
 SANTA FE, NM 87504
 DE VARGAS POST OFFICE

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

ConocoPhillips Company -
 P. O. Box 7500
 Bartlesville, OK 74005

PS Form 3811, February 2004

CERTIFIED MAIL

SE

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

THIS SECTION ON DELIVERY

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

1. Article Addressed to:

ConocoPhillips Company -
 P. O. Box 7500
 Bartlesville, OK 74005

2. Article Number (Transfer from service label)

7006 2760 0001 6381 8421

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature
x ConocoPhillips
☐ Agent
☐ Addressee

B. Received by (Printed Name)
MAY 14 2015

C. Date of Delivery

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

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

**COG OPERATING LLC
GUNNER 8 FED COM NO. 7H WELL**

POOLED PARTIES:

Occidental Oil & Gas Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Devon Energy Production Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Yates Brothers
105 S. 4th St.
Artesia, NM 88210

Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

OFFSETS:

ABO Perto Corp
105 S 4th St
Artesia, NM 88210

Occidental Oil & Gas
Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Chesapeake Exploration, LLC
P. O. Box 18496
Oklahoma City, OK 73154

Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

Yates Brothers
105 S. 4th St.
Artesia, NM 88210

Ross Duncan Properties, LLC
P.O. Box 647
Artesia, NM 88211

YATES Petroleum Corp.
105 S 4th St
Artesia, NM 88210

MYCO Industries Inc
105 S 4th St
Artesia, NM 88210

OXY Y-1
PO BOX 27570
Artesia, NM 88210

Devon Energy Oper Co LP
20 N Broadway #1500
Oklahoma City, OK 72102-
8260

EOG Resources, Inc.
P. O. Box 2267
Midland, Texas 79705

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Chevron U.S.A. Inc.
P. O. Box 3200
Houston, TX 77252

Chevron USA Inc
1400 Smith St
Houston, TX 77002-7327

Devon Energy Prod. Co. LP
20 N. Broadway #1500
Oklahoma City, OK 73102

Devon Energy Production
Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

ConocoPhillips Company -
P. O. Box 7500
Bartlesville, OK 74005

HOLLAND & HART^{LLP}



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
Gunner 8 Fed Com No 7H Well.**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC, has filed the enclosed amended application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on May 28, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Mike Wallace, at (432) 221-0465 or mwallace@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

HOLLAND & HART^{LLP}



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**RE: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.
Gunner 8 Fed Com No 7H Well.**

This letter is to advise you that COG Operating LLC has filed the enclosed amended application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 28, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Mike Wallace, at (432) 221-0465 or mwallace@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

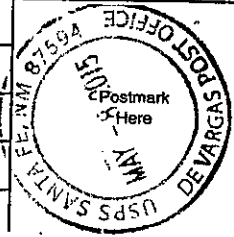
Holland & Hart^{LLP}

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

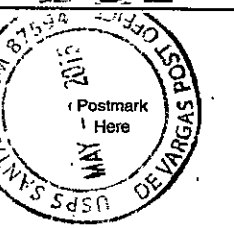
110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☏

7006 2760 0001 6377 7995

U.S. Postal Service™		CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only, No Insurance)		MHF/COG GUNNER 7H	
For delivery information visit OFFICIAL			
Postage	\$	69	
Certified Fee		330	
Return Receipt Fee (Endorsement Required)		270	
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$	669	
Sent to:	Occidental Oil & Gas Corporation		
Street or P.O.:	5 Greenway Plaza, Suite 110		
City:	Houston, TX 77046		
PS Form	Instructions		

7006 2760 0001 6377 8008

U.S. Postal Service™		CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only, No Insurance)		MHF/COG GUNNER 7H	
For delivery information visit OFFICIAL			
Postage	\$	69	
Certified Fee		330	
Return Receipt Fee (Endorsement Required)		270	
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$	669	
Sent to:	Devon Energy Production Company LP		
Street or P.O.:	Devon Energy Center Tower,		
City:	333 W. Sheridan Avenue		
PS Form	Instructions		

SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		COMPLETE THIS SECTION ON DELIVERY A. Signature: <i>Paul Bruce</i> ☐ Agent ☐ Addressee B. Received by (Printed Name): <i>Paul Bruce</i> C. Date of Delivery: <i>5/14</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Occidental Oil & Gas Corporation 5 Greenway Plaza, Suite 110 Houston, TX 77046		3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
2. Article Number: <i>7006 2760 0001 6377 7995</i> (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, July 2013 Domestic Return Receipt			

7006 2760 0001 6377 8015

U.S. Postal Service CERTIFIED MAIL™ RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
*For delivery information visit OFFICIAL	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	669
Sent Chevron U.S.A. Inc.	
Attn: NOJV Group	
P. O. Box 3200	
Houston, TX 77252	

Postmark Here
MAY 8 2015
USPS SANTA FE, NM 87594
DEVARGAS POST OFFICE

PS Form 3811, July 2013

7006 2760 0001 6377 8022

U.S. Postal Service CERTIFIED MAIL™ RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
*For delivery information visit OFFICIAL	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	669
Sent EOG Resources, Inc.	
5509 Champions Dr.	
Midland, TX 79706	

Postmark Here
MAY 8 2015
USPS SANTA FE, NM 87594
DEVARGAS POST OFFICE

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

2. Article Number

(Transfer from service label)

7006 2760 0001 6377 8015

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Priority Mail Express
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

2. Article Number

(Transfer from service label)

7006 2760 0001 6377 8022

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below:

☐ No

3. Service Type

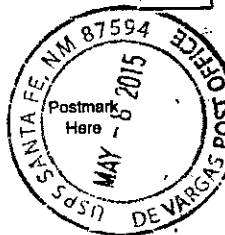
- ☒ Certified Mail ☐ Priority Mail Express
☒ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

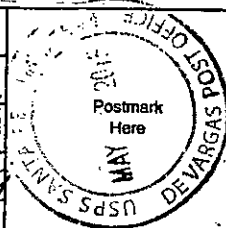
7006 2760 0001 6377 8039

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit OFFICIAL	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees \$	
Sent To Yates Brothers 105 S. 4th St. Artesia, NM 88210	
Street, Apt. or PO Box City, State	
PS Form 3811, July 2013	



7006 2760 0001 6377 8046

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit OFFICIAL	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees \$	
Sent To Sugarberry Oil & Gas Corp. 5950 Cedar Springs Rd. Suite 230 Dallas, TX 75235-6803	
Street, Apt. or PO Box City, State	
PS Form 3811, February 2004	

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

2. Article Number:

(Transfer from service label)

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Sugarberry Oil & Gas Corp.
 5950 Cedar Springs Rd.
 Suite 230
 Dallas, TX 75235-6803

2. Article Number:

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 2760 0001 6377 8053

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

For delivery information, visit **MHF/COG**
OFFIC GUNNER-7H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$

Postmark Here
 USPS SANTA FE, NM 87501

Sent To: ABO Perto Corp
 Street, or PO: 105 S 4th St
 City, St: Artesia, NM 88210

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

2. Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:
 ABO Perto Corp
 105 S 4th St
 Artesia, NM 88210

2. Article Number (Transfer from service label) 7006 2760 0001 6377 8053

COMPLETE THIS SECTION ON DELIVERY

A. Signature X [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name) [Signature]
 C. Date of Delivery 5/3/04

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6377 8060

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

For delivery information, visit **MHF/COG**
OFFIC GUNNER-7H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$

Postmark Here
 USPS SANTA FE, NM 87501

Sent To: Occidental Oil & Gas Corporation
 Street, or PO: 5 Greenway Plaza, Suite 110
 City, St: Houston, TX 77046

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

2. Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:
 Occidental Oil & Gas Corporation
 5 Greenway Plaza, Suite 110
 Houston, TX 77046

2. Article Number (Transfer from service label) 7006 2760 0001 6377 8060

COMPLETE THIS SECTION ON DELIVERY

A. Signature X [Signature]
☐ Agent
☐ Addressee

B. Received by (Printed Name) PAUL PRICE
 C. Date of Delivery 5/14

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6377 8077

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Signature Required)
 For delivery information visit **MHF/COG**
OFFICE GUNNER 7H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 669

Sent To
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 Chesapeake Exploration, LLC
 P. O. Box 18496
 Oklahoma City, OK 73154

PS Form 3800, April 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Chesapeake Exploration, LLC
 P. O. Box 18496
 Oklahoma City, OK 73154

2. Article Number (Transfer from service label) 7006 2760 0001 6377 8077 1111

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X **RECEIVED** ☐ Agent ☐ Addressee
 B. Received by (Printed Name) MAY 15 2015
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below: **MAIL ROOM 18**

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6377 8084

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Signature Required)
 For delivery information visit **MHF/COG**
OFFICE GUNNER 7H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 669

Sent To
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4
 Sugarberry Oil & Gas Corp.
 5950 Cedar Springs Rd.
 Suite 230
 Dallas, TX 75235-6803

PS Form 3800, April 2004

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Sugarberry Oil & Gas Corp.
 5950 Cedar Springs Rd.
 Suite 230
 Dallas, TX 75235-6803

2. Article Number (Transfer from service label) 7006 2760 0001 6377 8084

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ X **RECEIVED** ☐ Agent ☐ Addressee
 B. Received by (Printed Name) MAY 15 2015
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

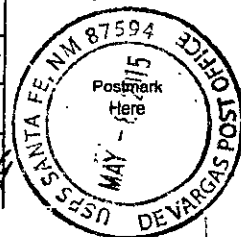
7006 2760 0001 6377 7896

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit OFFIC	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669
Sent To Yates Brothers 105 S. 4th St. Artesia, NM 88210	
PS Form 38	



7006 2760 0001 6377 7902

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit OFFIC	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669
Sent To Ross Duncan Properties, LLC P.O. Box 647 Artesia, NM 88211	
PS Form 38	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	
1. Article Addressed to:		B. Received by (Printed Name) Yates Brothers	
Yates Brothers 105 S. 4th St. Artesia, NM 88210		C. Date of Delivery 5-14-05	
2. Article Number		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
(Transfer from service label) 7006 2760 0001 6377 7896		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X	
1. Article Addressed to:		B. Received by (Printed Name) Ross Duncan Properties, LLC	
Ross Duncan Properties, LLC P.O. Box 647 Artesia, NM 88211		C. Date of Delivery 5-15-05	
2. Article Number		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
(Transfer from service label) 7006 2760 0001 6377 7902		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7006 2760 0001 6377 7919

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

For delivery information visit **OFFIC** **MHF/COG GUNNER 7H**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Sent To **YATES Petroleum Corp.**
 105 S 4th St
 Artesia, NM 88210

PS Form 3811, February 2004



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
YATES Petroleum Corp.
 105 S 4th St
 Artesia, NM 88210

2. Article Number: 7006 2760 0001 6377 7919
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: 5/18/15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

7006 2760 0001 6377 7926

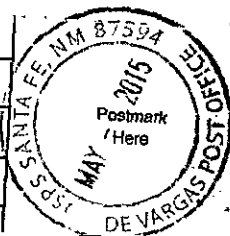
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFIC** **MHF/COG GUNNER 7H**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Sent To **MYCO Industries Inc**
 105 S 4th St
 Artesia, NM 88210

PS Form 3811, February 2004



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
MYCO Industries Inc
 105 S 4th St
 Artesia, NM 88210

2. Article Number: 7006 2760 0001 6377 7926
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: 5/14/15

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

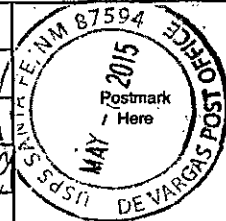
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

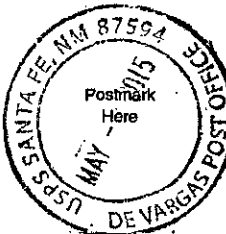
7006 2760 0001 6377 7933

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage)	
For delivery information visit OFFICIAL	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	660
Total Postage & Fees \$	
Sent to Street or P.O. Box City, State, ZIP+4® PS Instructions	
OXY Y-1 PO BOX 27570 Artesia, NM 88210	



7006 2760 0001 6377 7940

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage)	
For delivery information visit OFFICIAL	
MHF/COG GUNNER 7H	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	660
Total Postage & Fees \$	
Sent to Street or P.O. Box City, State, ZIP+4® PS Instructions	
Devon Energy Oper Co LP 20 N Broadway #1500 Oklahoma City, OK 72102-8260	



SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		COMPLETE THIS SECTION ON DELIVERY A. Signature: <i>David Carr</i> ☐ Agent ☒ Addressee B. Received by (Printed Name): <i>David Carr</i> C. Date of Delivery: <i>MAY 18 2015</i> D. Is delivery address different from item 1? ☐ Yes ☒ No (If YES, enter delivery address below)	
1. Article Addressed to: Devon Energy Oper Co LP 20 N Broadway #1500 Oklahoma City, OK 72102-8260		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☒ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

7006 2760 0001 6377 7957

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

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

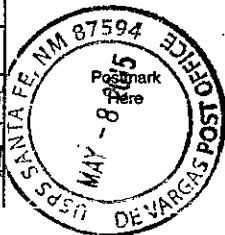
OFFICIAL USE

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total	

Sent To: EOG Resources, Inc.
 P. O. Box 2267
 Midland, Texas 79705

Street, Apt. or PO Box
 City, State

PS Form 3811, February 2004



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
 P. O. Box 2267
 Midland, Texas 79705

2. Article Number
 (Transfer from service label)

7006 2760 0001 6377 7957

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: 5-15-05

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6377 7964

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

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

OFFICIAL USE

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Sent To: EOG Resources, Inc.
 5509 Champions Dr.
 Midland, TX 79706

Street, Apt. or PO Box
 City, State

PS Form 3811, February 2004



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
 5509 Champions Dr.
 Midland, TX 79706

2. Article Number
 (Transfer from service label)

7006 2760 0001 6377 7964

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: 5-15-05

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6377 7971

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

For delivery information, visit **OFFICIAL**

MHF/COG
GUNNER 7H

Postage \$ 69

Certified Fee 330

Return Receipt Fee (Endorsement Required) 270

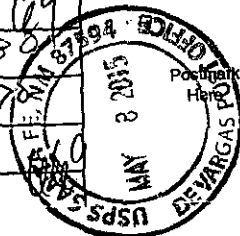
Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To **Chevron U.S.A. Inc.**
P. O. Box 3200
Houston, TX 77252

Street, or PO Box
 City, Sta

PS Form



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

For delivery information, visit **OFFICIAL**

MHF/COG
GUNNER 7H

Postage \$ 69

Certified Fee 330

Return Receipt Fee (Endorsement Required) 270

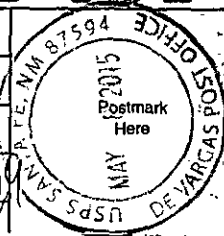
Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To **Chevron USA Inc**
1400 Smith St
Houston, TX 77002-7327

Street, or PO Box
 City, Sta

PS Form



7006 2760 0001 6377 7988

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:

Chevron U.S.A. Inc.
P. O. Box 3200
Houston, TX 77252

2. Article Number 7006 2760 0001 6377 7971
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** *[Signature]*

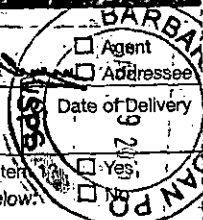
B. Received by (Printed Name)

C. Date of Delivery 9 20 15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes



SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:

Chevron USA Inc
1400 Smith St
Houston, TX 77002-7327

2. Article Number 7006 2760 0001 6377 7988
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X**

B. Received by (Printed Name)

C. Date of Delivery

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6381 8353

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFIC**
MHF/COG
GUNNER 7H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 66
 Total Postage & Fees \$ 669

Sent To **Devon Energy Prod. Co. LP**
 20 N. Broadway #1500
 Oklahoma City, OK 73102

PS Form 3811, February 2004

SENDER - COMPLETE THIS SECTION

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

1. Article Addressed to:
Devon Energy Prod. Co. LP
20 N. Broadway #1500
Oklahoma City, OK 73102

2. Article Number: **7006 2760 0001 6381 8353**
 (Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature: **David Carrillo**
☒ Agent
☐ Addressee

B. Received by (Printed Name): **DAVID CARRILLO**
 Date of Delivery: **MAY 18 2015**

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004

7006 2760 0001 6381 8360

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Mail)
 For delivery information visit **OFFIC**
MHF/COG
GUNNER 7H

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 66
 Total Postage & Fees \$ 669

Sent To **Devon Energy Production Company LP**
 Devon Energy Center Tower,
 333 W. Sheridan Avenue
 Oklahoma City, OK 73102-5015

PS Form 3811, February 2004

SENDER - COMPLETE THIS SECTION

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

1. Article Addressed to:
Devon Energy Production Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

2. Article Number: **7006 2760 0001 6381 8360**
 (Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature: **David Carrillo**
☒ Agent
☐ Addressee

B. Received by (Printed Name): **DAVID CARRILLO**
 Date of Delivery: **MAY 18 2015**

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004

7006 2760 0001 6381 8377

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Post	
	
Sent To Street, Apt. or PO Box City, State, ZIP+4®	
ConocoPhillips Company - P. O. Box 7500 Bartlesville, OK 74005	
PS Form 3811, February 2004	

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ConocoPhillips Company -
 P. O. Box 7500
 Bartlesville, OK 74005

2. Article Number
(Transfer from service label)

7006 2760 0001 6381 8377

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY
 A. Signature **X** ☐ Agent
☐ Addressee

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

ConocoPhillipsD. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No**MAY 18 2015**
 Mail Services
 Bartlesville, OK

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

102595-02-M-1540

COG OPERATING LLC
GUNNER 8 FED COM NO. 9H WELL

POOLED PARTIES:

Occidental Oil & Gas Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Devon Energy Production Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Yates Brothers
105 S. 4th St.
Artesia, NM 88210

Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

OFFSETS:

ABO Perto Corp
105 S 4th St
Artesia, NM 88210

Occidental Oil & Gas
Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Chesapeake Exploration, LLC
P. O. Box 18496
Oklahoma City, OK 73154

Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

Yates Brothers
105 S. 4th St.
Artesia, NM 88210

Ross Duncan Properties, LLC
P.O. Box 647
Artesia, NM 88211

YATES Petroleum Corp.
105 S 4th St
Artesia, NM 88210

MYCO Industries Inc
105 S 4th St
Artesia, NM 88210

OXY Y-1
PO BOX 27570
Artesia, NM 88210

Devon Energy Oper Co LP
20 N Broadway #1500
Oklahoma City, OK 72102-
8260

EOG Resources, Inc.
P. O. Box 2267
Midland, Texas 79705

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Chevron U.S.A. Inc.
P. O. Box 3200
Houston, TX 77252

Chevron USA Inc
1400 Smith St
Houston, TX 77002-7327

Devon Energy Prod. Co. LP
20 N. Broadway #1500
Oklahoma City, OK 73102

Devon Energy Production
Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

ConocoPhillips Company -
P. O. Box 7500
Bartlesville, OK 74005

HOLLAND & HART LLP



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
Gunner 8 Fed Com No 9H Well.**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC, has filed the enclosed amended application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on May 28, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Mike Wallace, at (432) 221-0465 or mwallace@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

HOLLAND & HART^{LLP}



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**RE: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.
Gunner 8 Fed Com No 9H Well.**

This letter is to advise you that COG Operating LLC has filed the enclosed amended application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 28, 2015. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter please contact Mike Wallace, at (432) 221-0465 or mwallace@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart^{LLP}

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

110 North Guadalupe Suite 1 Santa Fe, New Mexico 87501 **Mailing Address** P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

7006 2760 0001 6377 8091

U.S. Postal Service [™]	
CERTIFIED MAIL[™] RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit OFFIC	
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To: Occidental Oil & Gas Corporation
5 Greenway Plaza, Suite 110
Houston, TX 77046

Postmark Here: MAY 2015
USPS SANTA FE, NM 87594
DEVARGAS POST OFFICE

PS Form 3811

7006 2760 0001 6377 8107

U.S. Postal Service [™]	
CERTIFIED MAIL[™] RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit OFFIC	
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Sent To: Devon Energy Production Company LP
Devon Energy Center Tower,
333 W. Sheridan Avenue
Oklahoma City, OK 73102-5015

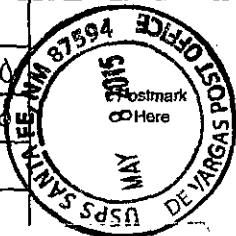
Postmark Here: MAY 2015
USPS SANTA FE, NM 87594
DEVARGAS POST OFFICE

PS Form 3811

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Occidental Oil & Gas Corporation 5 Greenway Plaza, Suite 110 Houston, TX 77046		A. Signature: <i>Paul Baker</i> ☐ Agent ☐ Addressee B. Received by (Printed Name): <i>PAUL BAKER</i> C. Date of Delivery: <i>5/14</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
2. Article Number: 7006 2760 0001 6377 8091 (Transfer from service label)		3. Service Type: ☒ Certified Mail[®] ☐ Priority Mail Express[®] ☐ Registered[®] ☐ Return Receipt for Merchandise[®] ☐ Insured Mail[®] ☐ Collect on Delivery[®] 4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, July 2013 Domestic Return Receipt			

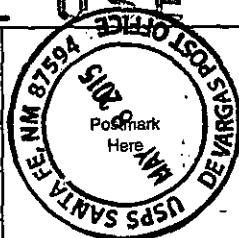
7006 2760 0001 6377 8114

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit www.usps.com	
OFFICIAL USE	
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To	Chevron U.S.A. Inc.
Street, Apt. or PO Box	Attn: NOJV Group
City, State	P. O. Box 3200
	Houston, TX 77252
PS Form 3811	July 2013



7006 2760 0001 6377 8268

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To	EOG Resources, Inc.
Street, Apt. or PO Box	5509 Champions Dr.
City, State	Midland, TX 79706
PS Form 3811	July 2013

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Chevron U.S.A. Inc.
Attn: NOJV Group
P. O. Box 3200
Houston, TX 77252

2. Article Number

(Transfer from service label)

7006 2760 0001 6377 8114

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

2. Article Number

(Transfer from service label)

7006 2760 0001 6377 8268

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

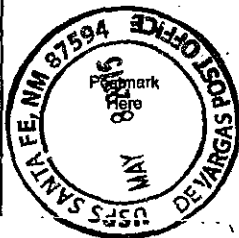
7006 2760 0001 6377 8138

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
OFFICE GUNNER 9H

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To Yates Brothers
105 S. 4th St.
Artesia, NM 88210

PS Form 380



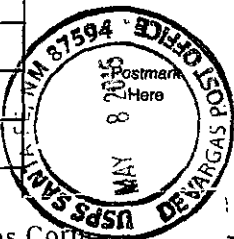
7006 2760 0001 6377 8183

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
OFFICE GUNNER 9H

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

PS Form 380



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Yates Brothers
105 S. 4th St.
Artesia, NM 88210

2. Article Number 7006 2760 0001 6377 8138
 (Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 5/15/15

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

3. Service Type ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Sugarberry Oil & Gas Corp.
5950 Cedar Springs Rd.
Suite 230
Dallas, TX 75235-6803

2. Article Number 7006 2760 0001 6377 8183
 (Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery MAY 15 2015

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

3. Service Type ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

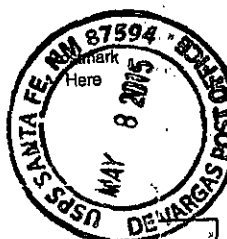
7006 2760 0001 6377 8152

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No International Coverage Provided)	
For delivery information visit OFFIC	
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To ABO Perto Corp 105 S 4th St Artesia, NM 88210	
Street, A or PO Box City, State	
PS Form 3811, July 2013	



7006 2760 0001 6377 8169

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No International Coverage Provided)	
For delivery information visit OFFIC	
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To Occidental Oil & Gas Corporation 5 Greenway Plaza, Suite 110 Houston, TX 77046	
Street, A or PO Box City, State	
PS Form 3811, July 2013	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.		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	
1. Article Addressed to: ABO Perto Corp 105 S 4th St Artesia, NM 88210		3. Service Type ☒ Certified Mail® ☐ Priority Mail Express ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		7006 2760 0001 6377 8152	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.		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	
1. Article Addressed to: Occidental Oil & Gas Corporation 5 Greenway Plaza, Suite 110 Houston, TX 77046		3. Service Type ☒ Certified Mail® ☐ Priority Mail Express ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		7006 2760 0001 6377 8169	
PS Form 3811, July 2013		Domestic Return Receipt	

7006 2760 0001 6377 8176

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

For delivery information visit **OFFICIAL** **MHF/COG**
GUNNER 9H

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. or PO Box
 City, State

Chesapeake Exploration, LLC
 P. O. Box 18496
 Oklahoma City, OK 73154

PS Form 3811, July 2013 SEE REVERSE FOR INSTRUCTIONS

7006 2760 0001 6377 8145

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

For delivery information visit **OFFICIAL** **MHF/COG**
GUNNER 9H

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. or PO Box
 City, State

Sugarberry Oil & Gas Corp.
 5950 Cedar Springs Rd.
 Suite 230
 Dallas, TX 75235-6803

PS Form 3811, July 2013 SEE REVERSE FOR INSTRUCTIONS

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Chesapeake Exploration, LLC
 R. O. Box 18496
 Oklahoma City, OK 73154

2. Article Number (Transfer from service label) 7006 2760 0001 6377 8176

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Agent Addresssee

B. Received by (Printed Name) RECEIVED
 C. Date of Delivery MAY 10 2015

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below: MAILROOM 18

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Sugarberry Oil & Gas Corp.
 5950 Cedar Springs Rd.
 Suite 230
 Dallas, TX 75235-6803

2. Article Number (Transfer from service label) 7006 2760 0001 6377 8145

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Agent Addresssee

B. Received by (Printed Name) RECEIVED
 C. Date of Delivery MAY 15 2015

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

7006 2760 0001 6377 8190

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

For delivery information visit **MHF/COG**
OFFIC GUNNER 9H

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

Sent To
 Street, Apt. or PO Box
 City, State
 PS Form

Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

Postmark Here
 MAY 8 2015
 USPS SANTA FE NM 87504
 DE VANGAS POST OFFICE

7006 2760 0001 6377 8206

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

For delivery information visit **MHF/COG**
OFFIC GUNNER 9H

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

Sent To
 Street, Apt. or PO Box
 City, State
 PS Form

Ross Duncan Properties, LLC
 P.O. Box 647
 Artesia, NM 88211

Postmark Here
 MAY 8 2015
 USPS SANTA FE NM 87504
 DE VANGAS POST OFFICE

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

For delivery information visit **MHF/COG**
OFFIC GUNNER 9H

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

Sent To
 Street, Apt. or PO Box
 City, State
 PS Form

Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

Postmark Here
 MAY 8 2015
 USPS SANTA FE NM 87504
 DE VANGAS POST OFFICE

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Yates Brothers
 105 S. 4th St.
 Artesia, NM 88210

2. Article Number (Transfer from service label)
 7006 2760 0001 6377 8190

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes No

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

For delivery information visit **MHF/COG**
OFFIC GUNNER 9H

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

Sent To
 Street, Apt. or PO Box
 City, State
 PS Form

Ross Duncan Properties, LLC
 P.O. Box 647
 Artesia, NM 88211

Postmark Here
 MAY 8 2015
 USPS SANTA FE NM 87504
 DE VANGAS POST OFFICE

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Ross Duncan Properties, LLC
 P.O. Box 647
 Artesia, NM 88211

2. Article Number (Transfer from service label)
 7006 2760 0001 6377 8206

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes No

7006 2760 0001 6377 8213

U.S. Postal Service™	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit OFFIC	
MHF/COG GUNNER 9H	
Postage \$	338
Certified Fee	270
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	
Sent To	
YATES Petroleum Corp.	
105 S 4th St	
Artesia, NM 88210	
PS Form 3811, July 2013 See Reverse for Instructions	

7006 2760 0001 6377 8220

U.S. Postal Service™	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information, visit OFFIC	
MHF/COG GUNNER 9H	
Postage \$	330
Certified Fee	270
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	
Sent To	
MYCO Industries Inc	
105 S 4th St	
Artesia, NM 88210	
PS Form 3811, July 2013	

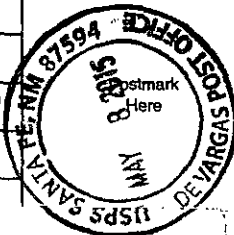
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
☒ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) ☒ Date of Delivery C. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No	
YATES Petroleum Corp. 105 S 4th St Artesia, NM 88210		7006 2760 0001 6377 8213	
PS Form 3811, July 2013		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
☒ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) ☒ Date of Delivery C. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
1. Article Addressed to:		3. Service Type: ☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No	
MYCO Industries Inc 105 S 4th St Artesia, NM 88210		7006 2760 0001 6377 8220	
PS Form 3811, July 2013		Domestic Return Receipt	

7006 2760 0001 6377 8237

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No International)	
For delivery information visit usps.com	
OFFICIAL MAIL	
Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To Street, Apt. or PO Box City, State	
OXY Y-1 PO BOX 27570 Artesia, NM 88210	

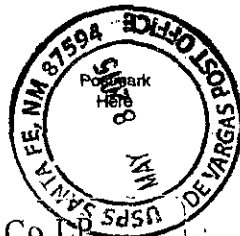
PS Form 3800, August 2009



7006 2760 0001 6377 8244

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No International)	
For delivery information visit usps.com	
OFFICIAL MAIL	
Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	
Sent To Street, Apt. or PO Box City, State	
Devon Energy Oper Co LP 20 N Broadway #1500 Oklahoma City, OK 72102-8260	

PS Form 3800, August 2009



7006 2760 0001 6377 8251

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only)
 For delivery information only

OFFICE

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Postmark Here
 MAY 8 2015
 USPS SAN ANTONIO 781594
 DE VARGAS POST OFFICE

Sent To
 Street, Apt or PO Box
 City, State

EOG Resources, Inc.
 P. O. Box 2267
 Midland, Texas 79705

PS Form 3811, July 2013

7006 2760 0001 6377 8121

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only)
 For delivery information only

OFFICE

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Postmark Here
 MAY 8 2015
 USPS SAN ANTONIO 781594
 DE VARGAS POST OFFICE

Sent To
 Street, Apt or PO Box
 City, State

EOG Resources, Inc.
 5509 Champions Dr.
 Midland, TX 79706

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
 P. O. Box 2267
 Midland, Texas 79705

2. Article Number

(Transfer from service label)

7006 2760 0001 6377 8251

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

B. Agent

C. Addressee

B. Received by (Printed Name)

J. Perry

C. Date of Delivery

5-15-15

D. Is delivery address different from item 1?

Yes

If YES, enter delivery address below

No

3. Service Type

X Certified Mail

Priority Mail Express

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EOG Resources, Inc.
 5509 Champions Dr.
 Midland, TX 79706

2. Article Number

(Transfer from service label)

7006 2760 0001 6377 8121

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

B. Agent

C. Addressee

B. Received by (Printed Name)

J. Perry

Date of Delivery

5-15-15

D. Is delivery address different from item 1?

Yes

If YES, enter delivery address below

No

3. Service Type

X Certified Mail

Priority Mail Express

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

7006 2760 0001 6377 8275

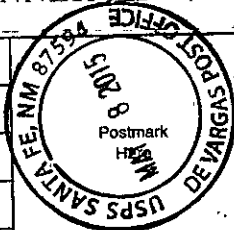
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Postage Needed)
 For delivery information visit usps.com

OFFICE

Postage \$ _____
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) _____
 Total Postage & Fees \$ _____

Sent To **Chevron U.S.A. Inc.**
 Street, Apt. No. or PO Box No **P. O. Box 3200**
 City, State, ZIP+4® **Houston, TX 77252**

PS Form 3811, July 2013



7006 2760 0001 6377 8282

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Postage Needed)
 For delivery information visit usps.com

OFFICE

Postage \$ _____
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) _____
 Total Postage & Fees \$ _____

Sent To **Chevron USA Inc**
 Street, Apt. No. or P.O. Box No **1400 Smith St**
 City, State, ZIP+4® **Houston, TX 77002-7327**

PS Form 3811, July 2013



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Chevron U.S.A. Inc.
P. O. Box 3200
Houston, TX 77252

2. Article Number (Transfer from service label) **7006 2760 0001 6377 8275**

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) **[Name]** C. Date of Delivery **10/19/13**

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
Chevron USA Inc
1400 Smith St
Houston, TX 77002-7327

2. Article Number (Transfer from service label) **7006 2760 0001 6377 8282**

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name) **[Name]** C. Date of Delivery **10/19/13**

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6377 8299

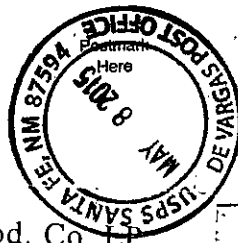
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **OFFICIAL**
MHF/COG
GUNNER 9H

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. 1
 or PO Box #
 City, State, ZIP

Devon Energy Prod. Co. LP
 20 N. Broadway #1500
 Oklahoma City, OK 73102

PS Form 3811, July 2013



7006 2760 0001 6377 8305

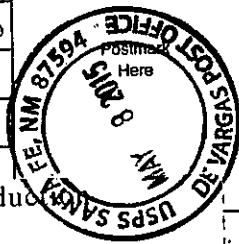
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **OFFICIAL**
MHF/COG
GUNNER 9H

Postage \$
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. 1
 or PO Box #
 City, State, ZIP

Devon Energy Production Company LP
 Devon Energy Center Tower,
 333 W. Sheridan Avenue
 Oklahoma City, OK 73102-5015

PS Form 3811, July 2013



SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:
 Devon Energy Prod. Co. LP
 20 N. Broadway #1500
 Oklahoma City, OK 73102

2. Article Number (Transfer from service label)
 7006 2760 0001 6377 8299

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X David Campbell
 B. Received by (Printed Name)
 C. Date of Delivery
 MAY 18 2015
 D. Is delivery address different from item 1? If YES, enter delivery address below.
 Yes No

3. Service Type
 X Certified Mail®
 Registered
 Insured Mail
 Priority Mail Express®
 Return Receipt for Merchandise
 Collect on Delivery

4. Restricted Delivery? (Extra Fee)
 Yes No

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

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

1. Article Addressed to:
 Devon Energy Production Company LP
 Devon Energy Center Tower,
 333 W. Sheridan Avenue
 Oklahoma City, OK 73102-5015

2. Article Number (Transfer from service label)
 7006 2760 0001 6377 8305

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

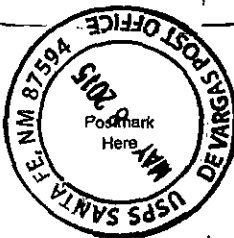
A. Signature
 X David Campbell
 B. Received by (Printed Name)
 C. Date of Delivery
 MAY 18 2015
 D. Is delivery address different from item 1? If YES, enter delivery address below.
 Yes No

3. Service Type
 X Certified Mail®
 Registered
 Insured Mail
 Priority Mail Express®
 Return Receipt for Merchandise
 Collect on Delivery

4. Restricted Delivery? (Extra Fee)
 Yes No

7006 2760 0001 6377 8312

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery information visit usps.com	
OFFICE	MHF/COG GUNNER 9H
Postage \$	
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To	ConocoPhillips Company -
Street, Ap or PO Box	P. O. Box 7500
City, State	Bartlesville, OK 74005
PS Form 3811, July 2013	PSN 7500-010-0000

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

ConocoPhillips Company -
P.O. Box 7500
Bartlesville, OK 74005

2. Article Number
(Transfer from service label)

111 7006 2760 0001 6377 8312

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Recipient's Name

ConocoPhillips

☐ Agent☐ Addressee

Date of Delivery

D. Is delivery address different from item 1?
If YES, enter delivery address below☐ Yes☐ NoMail Services
Bartlesville, OK

3. Service Type

☒ Certified Mail®☐ Priority Mail Express☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt