

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

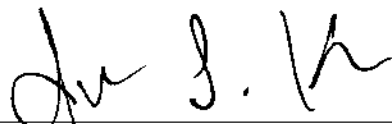
**APPLICATION OF COG OPERATING LLC  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT AND COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.**

**CASE NOS. 15350, 15351, 15352, and 15353**

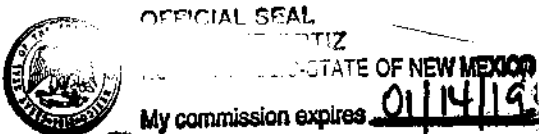
**AFFIDAVIT**

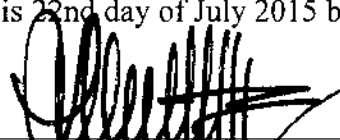
STATE OF NEW MEXICO    )  
  ) ss.  
COUNTY OF SANTA FE        )

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 22nd day of July 2015 by Jordan L. Kessler.



  
\_\_\_\_\_  
Notary Public

HOLLAND & HART



**Jordan L. Kessler**  
**Associate**

**Phone** (505) 988-4421

**Fax** (505) 983-6043

**JLKessler@hollandhart.com**

July 2, 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.  
West Pearl 36 State Com No 3H Well.**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed 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 July 23, 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 Jeff Lierly, at (432) 221-0485 or [jlrierly@concho.com](mailto:jlrierly@concho.com).

Sincerely,

Jordan L. Kessler

**ATTORNEY FOR COG OPERATING LLC**

HOLLAND & HART<sup>LLP</sup>



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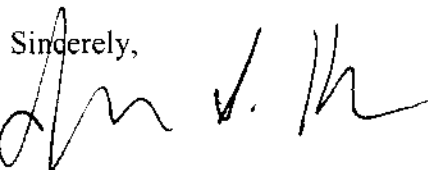
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West Pearl 36 State Com No 5H Well.**

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West Pearl 36 State Com No 6H Well.**

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**ATTORNEY FOR COG OPERATING LLC**

**COG OPERATING LLC**  
**WEST PEARL 36 STATE COM 3H, 4H, 5H & 6H**

**POOLED PARTIES**

Magnum Hunter Production, Inc.  
600 N. Marienfeld Street, Suite 600  
Midland, TX 79701

**POOLED PARTIES (6H ONLY)**

Western Equipment Co.  
PO BOX 5457  
Midland, TX 79704

**OFFSETS**

EOG RESOURCES INC  
PO BOX 4362  
HOUSTON TX 77210-  
4362

EXXONMOBIL CORP  
810 HOUSTON ST  
FT WORTH TX 76102-6203

EXXONMOBIL OIL  
CORP  
810 HOUSTON ST  
FORT WORTH TX 76102

LINN ENERGY HOLDINGS  
LLC  
600 TRAVIS ST STE 5100  
HOUSTON TX 77002-3092

MAGNUM HUNTER PRODUCTION INC  
202 S CHEYENNE AVE  
STE 1000  
TULSA OK 74103-3001

MOBIL E&P US  
DEVELOPMENT  
CORPORATION  
810 HOUSTON ST  
FT WORTH TX 76102-6203

PENROC OIL CORP  
PO BOX 5970  
HOBBS NM 88241-5970

XTO ENERGY INC  
810 HOUSTON ST  
FORT WORTH TX 76102

ATLANTIC RICHFIELD  
CO  
PO BOX 2819  
DALLAS TX 75221

BLACK HILLS GAS  
RESOURCES INC  
1515 WYNKOOP ST STE  
500  
DENVER CO 80202-2062

CIMAREX ENERGY CO OF COLORADO  
1700 LINCOLN ST STE 1800  
DENVER CO 80203-4518

CLARENCE HYDE  
ESTATE  
PETROLEUM BLDG  
210 W. 6th Street  
FORT WORTH TX 76102

DEVON ENERGY PROD CO  
LP  
333 W SHERIDAN AVE  
OKLAHOMA CITY OK 73102-  
5010

DEVON ENERGY PROD CO LP  
333 W SHERIDAN AVE  
OKLAHOMA CITY OK 73102-5010

ENCANA OIL & GAS (USA)  
INC  
370 17TH ST #1700  
DENVER CO 80202

HYDE FRANCES W INC  
PETROLEUM BLDG  
210 W. 6th Street  
FORT WORTH TX 76102

HYDE OIL & GAS CORP  
6300 RIDGLEA PL 1018  
FORT WORTH TX 76116

KENT ROBERT W  
PO BOX 630741  
HOUSTON TX 77263-  
0741

LINN ENERGY HOLDINGS  
LLC  
600 TRAVIS ST STE 5100  
HOUSTON TX 77002-3092

MAGNUM HUNTER PRODUCTION INC  
202 S CHEYENNE AVE  
STE 1000  
TULSA OK 74103-3001

MERIT ENE MGT  
PARTNERS I LP  
13727 NOEL RD #500  
DALLAS TX 75240

**COG OPERATING LLC**  
**WEST PEARL 36 STATE COM 3H, 4H, 5H & 6H**

MERIT ENERGY PTRS D-III  
LP  
13727 NOEL RD #500  
DALLAS TX 75240

MERIT ENERGY PTNRS III LP  
13727 NOEL RD #500  
DALLAS TX 75240

MONCRIEF MICHAEL J  
777 TAYLOR #1030  
FORT WORTH TX 76102

MONCRIEF R B  
109 E 9TH ST  
FORT WORTH TX 76102

PEAR RESOURCES  
PO BOX 11044  
MIDLAND TX 79702

PENROC OIL CORP  
PO BOX 5970  
HOBBS NM 88241-5970

W A MONCRIEF JR TRST  
109 E 9TH ST  
FORT WORTH TX 76102

BURLINGTON RES OIL & GAS CO  
LP  
PO BOX 51810  
MIDLAND TX 79710-1810

7015 0640 0007 1135 5706

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

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

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

Postmark  
Here

Magnum Hunter Production, Inc.  
600 N. Marienfeld Street, Suite 600  
Midland, TX 79701

See Reverse for Instructions

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

For delivery information, vi

MHF/COG  
WEST PEARL

Certified Mail Fee

\$

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Postage

\$

Postmark  
Here

Western Equipment Co.  
PO BOX 5457  
Midland, TX 79704

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:

Magnum Hunter Production, Inc.  
600 N. Marienfeld Street, Suite 600  
Midland, TX 79701

2. Article Number

(Transfer from service label)

7015 0640 0007 1135 5706

PS Form 3811, July 2013

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Blussee*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Brenne Ruse*

C. Date of Delivery

*7/6/15*

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

7015 0640 0007 1135 5676

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

**MHF/COG**  
**WEST PEARL**

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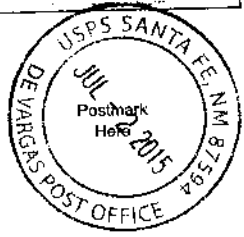
☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$



EOG RESOURCES INC  
 PO BOX 4362  
 HOUSTON TX 77210-4362

for Instructions

7015 0640 0007 1135 5676

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**CERTIFIED MAIL® RECEIPT**  
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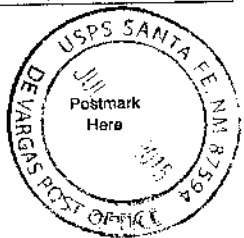
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EXXONMOBIL CORP  
 810 HOUSTON ST  
 FT WORTH TX 76102-6203

for Instructions

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- 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.

EOG RESOURCES INC  
 PO BOX 4362  
 HOUSTON TX 77210-4362

9590 9401 0033 5071 8262 42

7015 0640 0007 1135 5676

PS Form 3811, April 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) \_\_\_\_\_

C. Date of Delivery \_\_\_\_\_

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☒ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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 FT WORTH TX 76102-6203

9590 9401 0033 5071 8262 35

7015 0640 0007 1135 5676

PS Form 3811, April 2015 PSN 7530-02-000-9053

**SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) \_\_\_\_\_

C. Date of Delivery JUL 10 2015

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☒ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

2595 1135 5890 7015 0640 0007 1135 5890

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☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

**EXXONMOBIL OIL CORP**  
**810 HOUSTON ST**  
**FORT WORTH TX 76102**

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions



**CERTIFIED MAIL**

**SENDER: C**

Complete items 1, 2, and 3.

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

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

**EXXONMOBIL OIL CORP**  
**810 HOUSTON ST**  
**FORT WORTH TX 76102**

**9590 9401 0033 5071 8262 28**

**7015 0640 0007 1135 5652**

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**ION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery **JUL 06 2015**

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☒ Signature Confirmation™

☐ Delivery Restricted Delivery all ☐ Signature Confirmation Restricted Delivery

☐ Mail Restricted Delivery (over \$500)

2595 1135 5890 7015 0640 0007 1135 5890

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

For delivery information, visit [usps.com](http://usps.com)

**MHF/COG  
WEST PEARL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ \_\_\_\_\_

☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_

☐ Adult Signature Required \$ \_\_\_\_\_

☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

**LINN ENERGY HOLDINGS LLC**  
**600 TRAVIS ST STE 5100**  
**HOUSTON TX 77002-3092**

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions



**CERTIFIED MAIL**

**SENDER: C**

Complete items 1, 2, and 3.

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

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

**1 Article Addressed to:**

**LINN ENERGY HOLDINGS LLC**  
**600 TRAVIS ST STE 5100**  
**HOUSTON TX 77002-3092**

**9590 9401 0033 5071 8257 95**

**7015 0640 0007 1135 5898**

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**ION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery **JUL 06 2015**

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☒ Signature Confirmation™

☐ Delivery Restricted Delivery all ☐ Signature Confirmation Restricted Delivery

☐ Mail Restricted Delivery (over \$500)

7015 0640 0007 1135 5861

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

**MHF/COG**  
**WEST PEARL**

For delivery information:

Certified Mail Fee

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

Postage

MAGNUM HUNTER  
 PRODUCTION INC  
 202 S CHEYENNE AVE  
 STE 1000  
 TULSA OK 74103-3001

for instructions



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

**MHF/COG**  
**WEST PEARL**

For delivery information:

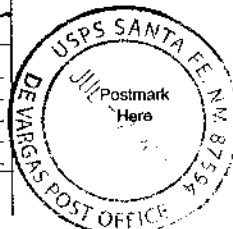
Certified Mail Fee

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

Postage

MOBIL E&P US DEVELOPMENT  
 CORPORATION  
 810 HOUSTON ST  
 FT WORTH TX 76102-6203

for instructions



SENDER

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

MAGNUM HUNTER  
 PRODUCTION INC  
 202 S CHEYENNE AVE  
 STE 1000  
 TULSA OK 74103-3001

9590 9401 0033 5071 8257 88

2 Article Number (Transfer from envelope label)

7015 0640 0007 1135 5861

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

JUSTIN WALLACE

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

SENDER

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

MOBIL E&P US DEVELOPMENT  
 CORPORATION  
 810 HOUSTON ST  
 FT WORTH TX 76102-6203

9590 9401 0033 5071 8242 93

2 Article Number (Transfer from envelope label)

7015 0640 0007 1135 5621

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Jerami Coy

C. Date of Delivery

JUL 8 2015

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

7015 0640 0007 1135 5614

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

**MHF/COG  
WEST PEARL**

For delivery information, **WEST PEARL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

**USPS SANTA FE NM 87504**  
Postmark Here

**PENROC OIL CORP  
PO BOX 5970  
HOBBS NM 88241-5970**

See reverse for instructions

7015 0640 0007 1135 5605

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

**MHF/COG  
WEST PEARL**

For delivery information, **WEST PEARL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

**USPS SANTA FE NM 87504**  
Postmark Here

**XTO ENERGY INC  
810 HOUSTON ST  
FORT WORTH TX 76102**

for instructions

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

**SENDER:**

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

1 Article Addressed to:

**PENROC OIL CORP  
PO BOX 5970  
HOBBS NM 88241-5970**

4590 9401 0033 5071 8243 09

2 Article Number (Transfer from sending label)

**7015 0640 0007 1135 5614**

(over \$500)

**CTION ON DELIVERY**

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

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

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**CERTIFIED MAIL**  
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.
- 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:

**XTO ENERGY INC  
810 HOUSTON ST  
FORT WORTH TX 76102**

4590 9401 0033 5071 8261 81

2 Article Number (Transfer from sending label)

**7015 0640 0007 1135 5605**

**COMPLETE THIS SECTION ON DELIVERY**

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

B. Received by (Printed Name) *[Signature]* C. Date of Delivery **JUL 6 2015**

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt



7015 0640 0007 1135 5799

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

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)
**MHF/COG  
WEST PEARL**

Certified Mail Fee

\$

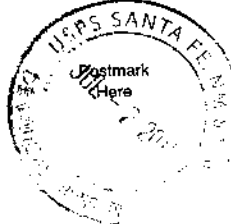
Extra Services &amp; Fees (check box, add fee as appropriate)

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

ATLANTIC RICHFIELD CO  
PO BOX 2819  
DALLAS TX 75221



7015 0640 0007 1135 5782

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

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)
**MHF/COG  
WEST PEARL**

Certified Mail Fee

\$

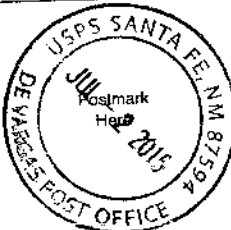
Extra Services &amp; Fees (check box, add fee as appropriate)

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

BLACK HILLS GAS  
RESOURCES INC  
1515 WYNKOOP ST STE 500  
DENVER CO 80202-2062



## SENDER: COMPLETE THIS SECTION

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

1 Article Addressed to:

BLACK HILLS GAS  
RESOURCES INC  
1515 WYNKOOP ST STE 500  
DENVER CO 80202-2062

2 Article Number (Transfer from service label)

7015 0640 0007 1135 5782

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ *Laura Beach*  
B. Received by (Printed Name)

- ☐ Agent  
☐ Addressee

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Restricted Delivery
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

7015 0640 0007 1135 5775

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

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)
**MHF/COG  
WEST PEARL**

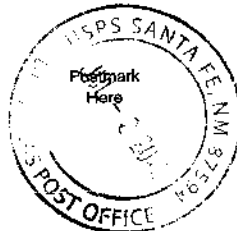
Certified Mail Fee

\$ 3.45  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 2.80  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage

\$ \_\_\_\_\_

CIMAREX ENERGY CO OF  
COLORADO  
1700 LINCOLN ST STE 1800  
DENVER CO 80203-4518



See reverse for instructions

7015 0640 0007 1135 5751

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

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)
**MHF/COG  
WEST PEARL**

Certified Mail Fee

\$ 3.45  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 2.80  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage

\$ \_\_\_\_\_

CLARENCE HYDE ESTATE  
PETROLEUM BLDG  
210 W. 6th Street  
FORT WORTH TX 76102



See reverse for instructions

SENDER: COM

**CERTIFIED MAIL**  
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
 OF THE RETURN ADDRESS (DO NOT ATTACH TO THE MAIL)

ON DELIVERY

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

1. Article Addressed to:

CIMAREX ENERGY CO OF  
COLORADO  
1700 LINCOLN ST STE 1800  
DENVER CO 80203-4518

9590 9401 0033 5071 8261 50

7015 0640 0007 1135 5775

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery
☒ Certified Mail®☐ Certified Mail Restricted Delivery

in Delivery

in Delivery Restricted Delivery

☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 0640 0007 1135 5766

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

**MHF/COG**  
**WEST PEARL**

For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage  
 \$

DEVON ENERGY PROD CO LP  
 333 W SHERIDAN AVE  
 OKLAHOMA CITY OK 73102-5010

PS Form 3811, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



7015 0640 0007 1135 5744

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

**MHF/COG**  
**WEST PEARL**

For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)

<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.45
<input type="checkbox"/> Return Receipt (electronic)	\$ 2.10
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage  
 \$

DEVON ENERGY PROD CO LP  
 333 W SHERIDAN AVE  
 OKLAHOMA CITY OK 73102-5010

PS Form 3811, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



**SEND**

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

1. Complete items 1, 2, and 3.  
 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.

4. Article Addressed to:

DEVON ENERGY PROD CO LP  
 333 W SHERIDAN AVE  
 OKLAHOMA CITY OK 73102-5010

9590 9401 0033 5071 8261 36

7015 0640 0007 1135 5766

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**SECTION ON DELIVERY**

A. Signature  
 X David Carrillo Agent

B. Received by (Printed Name)  
 C. Date of Delivery  
 7/2/2015

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

**SENDER**

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

1. Complete items 1, 2, and 3.  
 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.

4. Article Addressed to:

DEVON ENERGY PROD CO LP  
 333 W SHERIDAN AVE  
 OKLAHOMA CITY OK 73102-5010

9590 9401 0033 5071 8261 29

7015 0640 0007 1135 5744

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**SECTION ON DELIVERY**

A. Signature  
 X David Carrillo Agent

B. Received by (Printed Name)  
 C. Date of Delivery  
 7/2/2015

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

7015 0640 0007 1135 5737

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

Domestic Mail Only

**MHF/COG  
WEST PEARL**

For delivery information, v

Certified Mail Fee

\$ 3.45

Extra Services &amp; Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.10☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage \$


**ENCANA OIL & GAS (USA) INC  
370 17TH ST #1700  
DENVER CO 80202**

for Instructions

7015 0640 0007 1135 5720

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

Domestic Mail Only

**MHF/COG  
WEST PEARL**

For delivery information, v

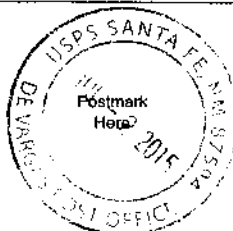
Certified Mail Fee

\$ 3.45

Extra Services &amp; Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.10☐ Return Receipt (electronic) \$☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage \$


**HYDE FRANCES W INC  
PETROLEUM BLDG  
210 W. 6th Street  
FORT WORTH TX 76102**

for Instructions

**CERTIFIED MAIL**

SENDER: COMPLETE THIS SECTION

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

1 Article Addressed to:

**ENCANA OIL & GAS (USA) INC  
370 17TH ST #1700  
DENVER CO 80202**

9590 9401 0033 5071 8262 97

2 Article Number (Transfer from container label)

7015 0640 0007 1135 5737

PS Form 3811, April 2015 PSN 7530-02-000-9053

THIS SECTION ON DELIVERY

A. Signature

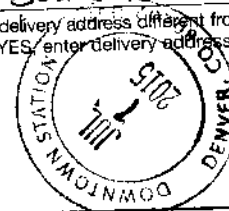
X

B. Received by (Printed Name)

Susan Hornillo

☐ Agent☐ Addressee

C. Date of Delivery

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


3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☒ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ all Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0007 1135 5713

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

**MHF/COG**  
**WEST PEARL**

For delivery information:

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

HYDE OIL & GAS CORP  
 6300 RIDGLEA PL 1018  
 FORT WORTH TX 76116

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



7015 0640 0007 1135 5904

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

**MHF/COG**  
**WEST PEARL**

For delivery information:

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

KENT ROBERT W  
 PO BOX 630741  
 HOUSTON TX 77263-0741

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



**CERTIFIED MAIL**

SENDER: CC

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

ON ON DELIVERY

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

1. Article Addressed to:

HYDE OIL & GAS CORP  
 6300 RIDGLEA PL 1018  
 FORT WORTH TX 76116

9590 9401 0033 5071 8262 73

2. Article Number (Transfer from carrier label)

7015 0640 0007 1135 5713

PS Form 3811, April 2015 PSN 7530-02-000-9053

A. Signature  
 x Ben Hicks

B. Received by (Printed Name)  
BEN HICKS

C. Date of Delivery  
11-10-15

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

II Restricted Delivery (over \$500)

Domestic Return Receipt

7015 0640 0007 1135 5645

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

**MHF/COG**  
**WEST PEARL**

For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

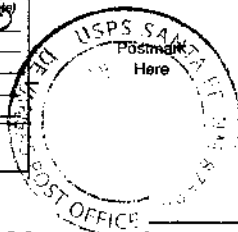
☐ Adult Signature Restricted Delivery \$

Postage

\$

LINN ENERGY HOLDINGS LLC  
 600 TRAVIS ST STE 5100  
 HOUSTON TX 77002-3092

For instructions



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

**MHF/COG**  
**WEST PEARL**

For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

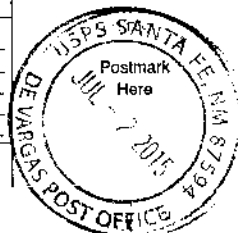
☐ Adult Signature Restricted Delivery \$

Postage

\$

MAGNUM HUNTER  
 PRODUCTION INC  
 202 S CHEYENNE AVE  
 STE 1000  
 TULSA OK 74103-3001

See reverse for instructions



7015 0640 0007 1135 5638

**SENDER:**

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

1. Article Addressed to:

LINN ENERGY HOLDINGS LLC  
 600 TRAVIS ST STE 5100  
 HOUSTON TX 77002-3092

9590 9401 0033 5071 8262 11

7015 0640 0007 1135 5645

PS Form 3811, April 2015 PSN 7530-02-000-9053

**ACTION ON DELIVERY**

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 06 2015

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

**THIS SECTION ON DELIVERY**

**SENDER:**

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

1. Article Addressed to:

MAGNUM HUNTER  
 PRODUCTION INC  
 202 S CHEYENNE AVE  
 STE 1000  
 TULSA OK 74103-3001

9590 9401 0033 5071 8262 04

7015 0640 0007 1135 5638

PS Form 3811, April 2015 PSN 7530-02-000-9053

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

JUL 06 2015

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Mail Restricted Delivery

(over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0007 1135 5874

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

**For delivery information:** **MHF/COG**  
**WEST PEARL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate):  
☒ Return Receipt (hardcopy) \$ 2.80  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Postmark Here  
 SANTA FE NM  
 JUL 11 2015  
 POST OFFICE 461

MERIT ENE MGT  
 PARTNERS I LP  
 13727 NOEL RD #500  
 DALLAS TX 75240

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPL

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

DELIVERY

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

1 Article Addressed to:

MERIT ENE MGT  
 PARTNERS I LP  
 13727 NOEL RD #500  
 DALLAS TX 75240

9590 9401 0033 5071 8258 44

2. Article Number (Transfer from service label)

7015 0640 0007 1135 5874

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X Darnella Warner ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Darnella Warner C. Date of Delivery 7/7/15

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

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input checked="" type="checkbox"/> Signature Confirmation™         |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Restricted Mail                         |   |
| <input type="checkbox"/> Restricted Delivery                     |   |

7015 0640 0007 1135 5867

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

**For delivery information:** **MHF/COG**  
**WEST PEARL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate):  
☒ Return Receipt (hardcopy) \$ 2.80  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage \$ \_\_\_\_\_

Postmark Here  
 USPS SANTA FE NM  
 JUL 11 2015  
 DENVER POST OFFICE 87594

MERIT ENERGY PTRS D-III LP  
 13727 NOEL RD #500  
 DALLAS TX 75240

for Instructions

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

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

4 Article Addressed to:

MERIT ENERGY PTRS D-III LP  
 13727 NOEL RD #500  
 DALLAS TX 75240

9590 9401 0033 5071 8258 87

2 Article Number (Transfer from service label)

7015 0640 0007 1135 5867

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X Darnella Warner ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Darnella Warner C. Date of Delivery 7/7/15

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

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input checked="" type="checkbox"/> Signature Confirmation™         |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Restricted Delivery                     |   |

7015 0640 0007 1135 5850

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

**MHF/COG**  
**WEST PEARL**

For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee

\$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

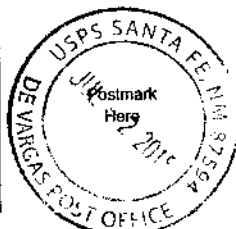
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

MERIT ENERGY PTNRS III LP  
 13727 NOEL RD #500  
 DALLAS TX 75240



See Reverse for Instructions

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

**MHF/COG**  
**WEST PEARL**

For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee

\$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

MONCRIEF MICHAEL J  
 777 TAYLOR #1030  
 FORT WORTH TX 76102



See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

MERIT ENERGY PTNRS III LP  
 13727 NOEL RD #500  
 DALLAS TX 75240

2. Article Number (Transfer from service label)

9590 9401 0033 5071 8258 70

7015 0640 0007 1135 5850

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ Darnella Warner ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Darnella Warner

C. Date of Delivery

7/7/15

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

**SENDER: CC**

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

1. Article Addressed to:

MONCRIEF MICHAEL J  
 777 TAYLOR #1030  
 FORT WORTH TX 76102

2. Article Number (Transfer from service label)

9590 9401 0033 5071 8258 63

7015 0640 0007 1135 5843

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

☒ Michael J Moncrief ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Michael J Moncrief

C. Date of Delivery

7/6

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery



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

Domestic Mail Only

**MHF/COG  
WEST PEARL**

For delivery information:

Certified Mail Fee

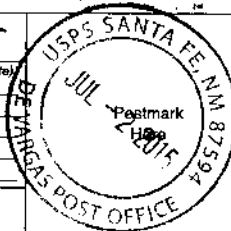
Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

MONCRIEF R B  
109 E 9TH ST  
FORT WORTH TX 76102

for instructions



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

Domestic Mail Only

**MHF/COG  
WEST PEARL**

For delivery information:

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

PEAR RESOURCES  
PO BOX 11044  
MIDLAND TX 79702



PS Form 3811, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

MONCRIEF R B  
109 E 9TH ST  
FORT WORTH TX 76102

9590 9401 0033 5071 8259 79

2

7015 0640 0007 1135 5836

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

7/9/15

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

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™  
☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

(over \$500)

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

PEAR RESOURCES  
PO BOX 11044  
MIDLAND TX 79702

9590 9401 0033 5071 8259 62

2. Article Number (Transfer from service label)

7015 0640 0007 1135 5829

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

7-9-15

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

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™  
☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

(over \$500)

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

Domestic Return Receipt

7015 0640 0007 1135 5683

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

Domestic Mail Only

**MHF/COG  
WEST PEARL**

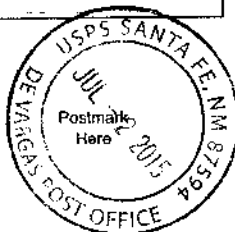
For delivery information, visit [usps.com](http://usps.com)

Certified Mail Fee

\$ 3.45  
Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 2.80  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage

**BURLINGTON RES OIL &  
GAS CO LP  
PO BOX 51810  
MIDLAND TX 79710-1810**



PS Form 3800, April 2015 PSN 7530-02-000-9053

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

**BURLINGTON RES OIL &  
GAS CO LP  
PO BOX 51810  
MIDLAND TX 79710-1810**

9590 9401 0033 5071 8262 59

7015 0640 0007 1135 5683

**COMPLAINEE: COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]* ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*[Signature]* C. Date of Delivery 7/10/15

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

51810

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                     | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®          | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                 | <input checked="" type="checkbox"/> Signature Confirmation™         |
| <input type="checkbox"/> Delivery Restricted Delivery        | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Mail Restricted Delivery            |   |

(over \$500)

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt