

DISTRICT I
1825 N. French Dr., Hobbs, NM 88240
Phone (505) 825-4151 Fax (505) 825-0729

DISTRICT II
911 S. First St., Artesia, NM 88210
Phone (505) 748-1525 Fax (505) 748-0729

DISTRICT III
1000 Elia Braden Rd., Aztec, NM 87410
Phone (505) 826-4178 Fax (505) 826-4170

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 478-8233 Fax (505) 478-8483

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

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

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number	Pool Code	Pool Name
Property Code	Property Name DECKER	Well Number 1H
OGED No.	Operator Name SPECIAL ENERGY CORPORATION	Elevation 3874'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
M	17	12 S	38 E		250	SOUTH	640	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	SOUTH/South line	Feet from the	East/West line	County
M	20	12 S	38 E		330	SOUTH	640	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.

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

SURFACE LOCATION
Lot - N 33.272135
Long - W 103.125810
NMSPC - N 828588.3
E 910379.5
(NAD-83)

BOTTOM HOLE LOCATION
Lot - N 33.257701
Long - W 103.125845
NMSPC - N 823429.5
E 910425.5
(NAD-83)

OPERATOR CERTIFICATION
I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature _____ Date _____

Printed Name _____

Email Address _____

SURVEYOR CERTIFICATION
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my belief.

Date Surveyed _____
Signature of Professional Surveyor _____
Certification Number 7977

Scale: 1" = 1000'
WD Num.: 32936

OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #1

R. K. PINSON & ASSOCIATES, LLC

10201 Buffalo Ridge Road
Edmond, Oklahoma 73025
(405) 359-6727
Fax (405) 359-6728
E-mail: KPinson@RKPinson.com

April 10, 2017

TO: Working Interest Owners – Listed on Attached Exhibit "A"

RE: Well proposal – Decker 1-H
SHL: 250' FNL & 660' FWL
BHL: 330' FSL & 660' FWL
Section 20-12S-38E, N.M.P.M.
Lea County, NM

Dear Working Interest Owners:

Our client, Special Energy Corporation ("SEC"), P.O. Drawer 369, Stillwater, OK 74076, as Operator, does hereby propose the drilling of the Decker 1-H well as a horizontal well at the location referenced above, or at a legal location as approved by the governing regulatory agency. SEC intends to test the San Andres formation at a TVD of approximately 5,250' and a MD of 10,000'. As shown on the enclosed AFE estimated dry hole costs are \$715,450 and total estimated completed costs are \$2,501,845.00.

Please indicate your participation election in the space provided below and return one copy of this letter to the undersigned. If you elect to participate please also return an executed AFE along with your geological well requirements.

Thank you for your consideration and if you have any questions please do not hesitate to contact me.

Yours truly,

M. Zane Pinson
M. Zane Pinson, CPL
Project Manager

_____ I/we elect to participate in the drilling of the Jenna 1-H.

_____ I/we elect to **NOT** participate in the drilling of the Jenna 1-H

Signed: _____

Printed Name: _____ Title: _____

Company Name: _____

Date: _____

OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #2

Decker 1-H Compulsory Pooling List
Lea County, New Mexico
April 26, 2017

1. Known and unknown heirs of Becky Anker, deceased
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
2. Steven Barnett
5465 Commercial Street Southeast,
Apt 54
Salem, OR 97306
3. Known and unknown heirs of Billy Joe Barnett
c/o Veta Marie Hood
2384 State Street
Salem, OR 97301
4. Randy Barr
207 2nd Street
Mobeetie, TX 79061
5. Leslie Barr
913 W. Polk Avenue
Lovington, NM
6. Known and unknown heirs of Claudia Lee Barr
c/o Randy Barr
207 2nd Street
Mobeetie, TX 79061
7. Known and unknown heirs of Willie Juanita Houston Barron
c/o Sammie Myrl Hoffman
8175 Walnut Knoll Cove
Cordova, TN 38018
8. Billy Earl Barron
Address Unknown
9. Greg Bowen
4530 Hillside Avenue
Norco, CA 92860
10. Guy Bowen
6850 Sandy Lane
Riverside, CA 92505
11. Known and unknown heirs of Peggy Ruth Bowen
c/o Greg Bowen
4530 Hillside Avenue
Norco, CA 92860
12. Known and unknown heirs of Karen Briley, deceased
c/o B.J. Briley
P.O. Box 104
Malaga, NM 88263
13. B.J. Briley
P.O. Box 104
Malaga, NM 88263
14. Kristin Briley
3607 County Road 1200
Lubbock, TX 79407
15. Known and unkown heirs of Virginia Elizabeth Thompson Burke

c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
16. Michael E. Burke

c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
17. Timothy A. Burke
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
18. Pamela Sue Cannon
3652 Plantation Grove
Colorado Springs, CO 80920
19. Known and unknown heirs of Trela Valesta Cannon, deceased
c/o Mac A. Douglas
507 E. Broadway Street
Tatum, NM 88267
20. Debra Canoy
20 Ash Street
Mount Vernon, OH 43050

Decker 1-H Compulsory Pooling List
Lea County, New Mexico
April 26, 2017

21. David Carter
4289 Oakman Street South
Salem, OR 97302
22. Michael Carter
c/o David Carter
4289 Oakman Street South
Salem, OR 97302
23. Shawnell Carter
c/o David Carter
4289 Oakman Street South
Salem, OR 97302
24. Known and unknown heirs of Valeta
Louise Houston Cotton
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
25. Known and unknown heirs of Narisse
Cotton Sebelius
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
26. Norman Cotton
31945 Cortez Court
Murrieta, CA 92563
27. Janet L. Dishner
5388 Chieftain Circle
Alexandria, VA 22312
28. Mac A. Douglas
507 E. Broadway Street
Tatum, NM 88267
29. Linda Gonzales
20 Ash Street
Mount Vernon, OH 43050
30. Shawn Leah Cotton Govoni
146 Hawthorne Street
Sutherlin, OR 97479
31. Delanna K. Harding
21591 E. Mewes Road
Queen Creek, AZ 85242
32. Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
33. Cheryl Lynn Murphy, a/k/a Cheryl Lynn
Hendershot
280 Sherman Peak Drive
Bakersfield, CA 93308
34. Sammie Myrl Hoffman
8175 Walnut Knoll Cove
Cordova, TN 38018
35. Jessica Holladay
6302 North Davis Lane
Hobbs, NM 88242
36. Veta Marie Hood
2384 State Street
Salem, OR 97301
37. Known and unknown heirs of Bertha
Fletcher Houston
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
38. Known and unknown heirs of Ola Lorena
Houston, deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735
39. Known and unknown heirs of John
Wayne Houston, deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735
40. Known and unknown heirs of John R.
Houston
c/o Betty Jo Kringel
10971 Arlington Avenue
Riverside, CA 92505
41. Known and unknown heirs of Bertha
Fletcher Houston
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310

Decker 1-H Compulsory Pooling List
Lea County, New Mexico
April 26, 2017

42. Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
43. Jacco, Inc.
c/o Ellen E. Jackson-Swann
4800 Chesapeake St NW
Washington, DC 20016
44. Known and unknown heirs of Eddie
Maurice Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
45. Known and unknown heirs of Ava
Vonceile Houston Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
46. Shelley Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
47. Marcia Dianne Knight
c/o Debra Canoy
20 Ash Street
Mount Vernon, OH 43050
48. Gordon W. Leach
517 Hopper Drive
Corpus Christi, TX 78411
49. Dana Martin
913 West Polk Avenue
Lovington, NM 88260
50. Holly Mills
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
51. Shelia Olin
c/o Debra Canoy
20 Ash Street
Mount Vernon, OH 43050
52. Pamela B. Robertson
10821 Santa Clara Drive
Fairfax, VA 22030
53. Known and unknown heirs of Kurt
Mitchell Sebelius
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
54. Robin Leah Simpson
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
55. Ernest L. Thompson
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
56. Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
57. Known and unknown heirs of Linda Jean
VanScoik
c/o David Carter
4289 Oakman Street South
Salem, OR 97302
58. Known and unknown heirs of Omalee
Houston Wilson
c/o Exel Barrows
107 Rose Street
Campbellsville, KY 42718

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.

Article Addressed to:

town and unknown heirs of Becky Anker, deceased
o Countee Troupe
8 Clarmount Street Northwest
lem, OR 97304

9590 9402 2074 6132 7355 03

Article Number (Transfer from service label)

7016 2710 0000 0157 2906

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ 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

Restricted Delivery

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:

Known and unknown heirs of
Claudia Lee Barr, deceased
c/o Randy Barr
207 2nd Street
Vobeetie, TX 79061

9590 9402 1604 5362 4800 69

Article Number (Transfer from service label)

7016 2710 0000 0157 3057

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ 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

Restricted Delivery

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.

Article Addressed to:

even Barnett
165 Commercial Street
Southeast, Apt 54
alem, OR 97306

9590 9402 2074 6132 7355 34

Article Number (Transfer from service label)

7016 2710 0000 0157 2937

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ 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

Restricted Delivery

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:

Leslie Barr
913 W. Polk Avenue
Lovington, NM

9590 9402 2074 6132 7356 26

Article Number (Transfer from service label)

7016 2710 0000 0157 3026

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below: ☐ No

3. Service Type

☐ 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

Restricted Delivery

Domestic Return Receipt

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. Article Addressed to: own and unknown heirs of Willie Juanita Houston ron, deceased Sammie Myrl Hoffman 75 Walnut Knoll Cove dova, TN 38018	A. Signature <i>X.D. Jimmy Harrison</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) <i>Dewey Thomas Harrison</i> C. Date of Delivery <i>MAY 2017</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No <i>Sammie Myrl Hoffman, Deceased</i> <i>c/o Sherry Harrison</i> <i>8175 Walnut Knoll Cove</i> <i>Cordova, TN 38018</i> 3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Insured Mail ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery 9590 9402 1604 5362 4800 90 Article Number (Transfer from service label) 7016 2710 0000 0157 3088
PS Form 3811, July 2015 PSN 7530-02-000-9053 2P Domestic Return Receipt	

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. 1. Article Addressed to: Greg Bowen 1530 Hillside Avenue Norco, CA 92860	A. Signature <i>X.D. Mychon Bowen</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>D. Mychon Bowen</i> 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 ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation ☐ Signature Confirmation Restricted Delivery 9590 9402 1604 5362 4801 20 Article Number (Transfer from service label) 7016 2710 0000 0157 3118
PS Form 3811, July 2015 PSN 7530-02-000-9053 2 Domestic Return Receipt	

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. Article Addressed to: ddy Barr ' 2nd Street beetie, TX 79061	A. Signature <i>X Dee Barr</i> ☒ Agent ☐ Addressee B. Received by (Printed Name) <i>Dee Barr</i> C. Date of Delivery <i>4-14-17</i> 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 ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery 9590 9402 2074 6132 7355 96 Article Number (Transfer from service label) 7016 2710 0000 0157 2999
PS Form 3811, July 2015 PSN 7530-02-000-9053 2P Domestic Return Receipt	

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. 2. Article Addressed to: Guy Bowen 5850 Sandy Lane Riverside, CA 92505	A. Signature <i>X Guy Bowen</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery <i>4/14/17</i> 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 ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation ☐ Signature Confirmation Restricted Delivery 9590 9402 2074 6132 7354 20 Article Number (Transfer from service label) 7016 2710 0000 0157 3149
PS Form 3811, July 2015 PSN 7530-02-000-9053 2ane 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.

Article Addressed to:

own and unknown heirs of
Ruth Bowen, deceased
Greg Bowen
10 Hillside Avenue
rco, CA 92860

Lane

9590 9402 2074 6132 7354 73

Article Number (Transfer from service label)

7016 2710 0000 0157 2876

3 Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature


☐ Agent
☐ Addressee

B. Received by (Printed Name)

Mychael Bowen

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
☐ Insured Mail
☐ Registered Mail
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

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:

Kristin Briley
3607 County Road 1200
Lubbock, TX 79407

9590 9402 2074 6132 7355 41

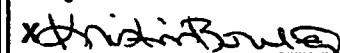
2. Article Number (Transfer from service label)

7016 2710 0000 0157 2944

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature


☐ Agent
☐ Addressee

B. Received by (Printed Name)

Kristin Briley

C. Date of Delivery

4-20-15

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
☐ Insured Mail
☐ Registered Mail
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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.

Article Addressed to:

Briley
Box 104
Malaga, NM 88263

9590 9402 2074 6132 7355 10

Article Number (Transfer from service label)

7016 2710 0000 0157 2913

3 Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature


☐ Agent
☐ Addressee

B. Received by (Printed Name)

Karen Briley

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
☐ Insured Mail
☐ Registered Mail
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

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:

Known and unknown heirs of
Karen Briley, deceased
c/o B.J. Briley
P.O. Box 104
Malaga, NM 88263

9590 9402 2074 6132 7354 80

2. Article Number (Transfer from service label)

7016 2710 0000 0157 2883

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature


☐ Agent
☐ Addressee

B. Received by (Printed Name)

Karen Briley

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
☐ Insured Mail
☐ Registered Mail
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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.

Article Addressed to:

Michael E. Burke
 Patricia A. Hull
 3 Leewood Drive
 Alexandria, VA 22310

9590 9402 2074 6132 7356 02

Article Number (Transfer from service label)

7016 2710 0000 0157 3002

S Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

4-14

3. Service Type

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

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

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:

Known and unknown heirs of Virginia Elizabeth Thompson
 Burke, deceased
 c/o Patricia A. Hull
 5113 Leewood Drive
 Alexandria, VA 22310

9590 9402 2074 6132 7355 12

2. Article Number (Transfer from service label)

7016 2710 0000 0157 2975

PS Form 3811, July 2015 PSN 7530-02-000-8053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

4-14

3. Service Type

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

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

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.

Article Addressed to:

Anthony A. Burke
 Patricia A. Hull
 113 Leewood Drive
 Alexandria, VA 22310

9590 9402 2074 6132 7356 33

Article Number (Transfer from service label)

7016 2710 0000 0157 3033

S Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

4-14

3. Service Type

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

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

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:

Pamela Sue Cannon
 3652 Plantation Grove
 Colorado Springs, CO 80920

9590 9402 1604 5362 4800 76

2. Article Number (Transfer from service label)

7016 2710 0000 0157 3064

PS Form 3811, July 2015 PSN 7530-02-000-8053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

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

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.

Article Addressed to:

bra Canoy
Ash Street
Vernon, OH 43050

9590 9402 1604 5362 4801 37

Article Number (Transfer from service label)

7016 2710 0000 0157 3125

S Form 3811, July 2015 PSN 7530-02-000-9053

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

☐ 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 5000)

Restricted Delivery

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:

Known and unknown heirs of Valeta Louise Houston
Cotton, deceased
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399

9590 9402 2074 6132 7355 89

2. Article Number (Transfer from service label)

7016 2710 0000 0157 2982

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

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

☐ 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 5000)

Restricted Delivery

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.

Article Addressed to:

Norman Cotton
31945 Cortez Court
Murrieta, CA 92563

9590 9402 2074 6132 7356 19

Article Number (Transfer from service label)

7016 2710 0000 0157 3019

S Form 3811, July 2015 PSN 7530-02-000-9053

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

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

(over 5000)

Restricted Delivery

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:

Known and unknown heirs of Valeta Louise Houston
Cotton, deceased
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399

9590 9402 2074 6132 7355 30

2. Article Number (Transfer from service label)

7016 2710 0000 0157 2951

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

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

☐ 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 5000)

Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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. Article Addressed to:	A. Signature <i>Debra Canoy</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Debra Canoy</i> C. Date of Delivery <i>04-20-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	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:	A. Signature <i>Delanna Harding</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Delanna Harding</i> C. Date of Delivery <i>4/14</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Jnda Gonzales 20 Ash Street Mount Vernon, OH 43050	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	Delanna K. Harding 21591 E. Mewes Road Queen Creek, AZ 85242	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restr Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation ☐ Signature Confirmation Restricted Delivery
9590 9402 1604 5362 4801 13 Article Number (Transfer from service label) 7016 2710 0000 0157 3101	PS Form 3811, July 2015 PSN 7530-02-000-9053	9590 9402 2074 6132 7354 35 2. Article Number (Transfer from service label) 7016 2710 0000 0157 8311	PS Form 3811, July 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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. Article Addressed to:	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>[Name]</i> C. Date of Delivery <i>4/14/17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	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:	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>[Name]</i> C. Date of Delivery <i>[Date]</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
hawn Leah Cotton Govoni 46 Hawthorne Street Utherlin, OR 97479	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	Dawn Harrington 34936 Persimmon Ave. Yucaipa, CA 92399	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restr Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation ☐ Signature Confirmation Restricted Delivery
9590 9402 2074 6132 7354 60 Article Number (Transfer from service label) 7016 2710 0000 0157 3132	PS Form 3811, July 2015 PSN 7530-02-000-9053	9590 9402 2074 6132 7354 59 2. Article Number (Transfer from service label) 7016 1970 0000 7217 4972	PS Form 3811, July 2015 PSN 7530-02-000-9053

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.

Article Addressed to:

Jessica Holladay
102 North Davis Lane
Albany, NM 88242

9590 9402 2074 6132 7353 36

7016 1970 0000 7217 4200

S Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jessica Holladay ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Jessica Holladay

C. Date of Delivery

4-14-15

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

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:

Known and unknown heirs of
Bertha Fletcher Houston, deceased
c/o Patricia A. Hull
5113 Leewood Drive
Alexandria, VA 22310

9590 9402 2074 6132 7351 52

7016 1970 0000 7217 4378

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

P. Hull ☐ Agent
☒ Addressee

B. Received by (Printed Name)

P. Hull

C. Date of Delivery

4-14

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

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:

Known and unknown heirs of John Wayne Houston,
deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735

9590 9402 2074 6132 7352 13

7016 1970 0000 7217 4323

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

R. Houston ☐ Agent
☒ Addressee

B. Received by (Printed Name)

R. Houston

C. Date of Delivery

04/13/15

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

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.

Article Addressed to:

Known and unknown heirs of
Bertha Fletcher Houston, deceased
c/o Patricia A. Hull
5113 Leewood Drive
Alexandria, VA 22310

9590 9402 2074 6132 7353 74

Article Number (Transfer from service label)

7016 1970 0000 7217 4262

S Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

P. Hull ☐ Agent
☒ Addressee

B. Received by (Printed Name)

P. Hull

C. Date of Delivery

4-14

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

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.

Article Addressed to:

Known and unknown heirs of
Lorena Houston, deceased
Ruben Dale Houston
9 W. 44th Street
Stockton, TX 79735

9590 9402 2074 6132 7352 44

7016 1970 0000 7217 4293

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X R Houston

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

04/13/11

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

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:

Known and unknown heirs of Ava Voncelle Houston
Knight, deceased
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308

9590 9402 2074 6132 7353 29

7016 1970 0000 7217 4217

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J M Hendrix

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/11/11

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

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.

Article Addressed to:

Tricia A. Hull
13 Leewood Drive
Lexandria, VA 22310

9590 9402 2074 6132 7354 42

Article Number (Transfer from service label)

7016 2710 0000 0157 9394

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X P Hull

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-14

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

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

Known and unknown heirs of
Eddie Maurice Knight, deceased
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308

9590 9402 2074 6132 7353 05

Article Number (Transfer from service label)

7016 1970 0000 7217 4187

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X J M Hendrix

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/11/11

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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. Article Addressed to: ricia Dianne Knight Debra Canoy Ash Street Junt Vernon, OH 43050	A. Signature X <u>Debra Canoy</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Debra Canoy</u> C. Date of Delivery <u>04-20-17</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	■ 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: Gordon W. Leach 517 Hopper Drive Corpus Christi, TX 78411	A. Signature X <u>Gordon W Leach</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Gordon W Leach</u> C. Date of Delivery <u>4-18-17</u> 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 ☐ Collect on Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™ ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (over \$500)	3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☐ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Collect on Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™ ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (over \$500)		
9590 9402 2074 6132 7353 98 7016 1970 0000 7217 4279	9590 9402 2074 6132 7352 37 7016 1970 0000 7217 430		
PS Form 3811, July 2015 PSN 7530-02-000-9053		PS Form 3811, July 2016 PSN 7630-02-000-8053	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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. Article Addressed to: helley Knight /o Cheryl Lynn Murphy 80 Sherman Peak Drive akersfield, CA 93308	A. Signature X <u>Cheryl Lynn Murphy</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Cheryl Lynn Murphy</u> C. Date of Delivery <u>4/14/17</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	■ 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: Dana Martin 313 West Polk Avenue ovington, NM 88260	A. Signature X <u>Dana Martin</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Dana Martin</u> C. Date of Delivery <u>4/14/17</u> 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 ☐ Collect on Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™ ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (over \$500)	3. Service Type ☐ Adult Signature ☐ Priority Mail Express® ☐ Adult Signature Restricted Delivery ☐ Registered Mail™ ☐ Certified Mail® ☐ Registered Mail Restricted Delivery ☐ Collect on Delivery ☐ Return Receipt for Merchandise ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™ ☐ Insured Mail ☐ Signature Confirmation Restricted Delivery (over \$500)		
9590 9402 2074 6132 7353 67 7016 1970 0000 7217 4248	9590 9402 2074 6132 7351 76 7016 1970 0000 7217 4361		
PS Form 3811, July 2015 PSN 7530-02-000-9053		PS Form 3811, July 2015 PSN 7530-02-000-9053	

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.

Article Addressed to:

Holly Mills
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304

9590 9402 2074 6132 7351 69
7016 1970 0000 7217 4385

S Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
4-14

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

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:

Shelia Olin
c/o Debra Canoy
20 Ash Street
Mount Vernon, OH 43050

9590 9402 2074 6132 7352 51
7016 1970 0000 7217 4132

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
04-20-17

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

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.

Article Addressed to:

heryl Lynn Murphy, a/k/a
heryl Lynn Hendershot
80 Sherman Peak Drive
akersfield, CA 93308

9590 9402 2074 6132 7352 68
7016 1970 0000 7217 4149

S Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
4-24-17

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

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:

Pamela B. Robertson
10821 Santa Clara Drive
Fairfax, VA 22030

9590 9402 2074 6132 7352 82
7016 1970 0000 7217 4163

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

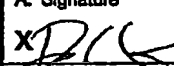
COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* ☐ Agent ☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery

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

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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.	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) D. HARRINGTON C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	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.	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) D. HARRINGTON C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Known and unknown heirs of Kurt Mitchell Sebelius, deceased /o Dawn Harrington 4936 Persimmon Ave. Yucaipa, CA 92399	3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	Robin Leah Simpson c/o Dawn Harrington 34936 Persimmon Ave. Yucaipa, CA 92399	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
9590 9402 2074 6132 7353 12 Article Number (Transfer from service label) 7016 1970 0000 7217 4194		9590 9402 2074 6132 7353 43 2. Article Number (Transfer from service label) 7016 1970 0000 7217 4224	
S Form 3811, July 2015 PSN 7530-02-000-9053		PS Form 3811, July 2015 PSN 7530-02-000-9053	
Domestic Return Receipt		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	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.	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) D. HARRINGTON C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	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.	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) D. HARRINGTON C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Article Addressed to: Known and unknown heirs of Narisse Cotton Sebelius, deceased c/o Dawn Harrington 34936 Persimmon Avenue Yucapia, CA 92399	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	Ernest L. Thompson c/o Patricia A. Hull 6113 Leewood Drive Alexandria, VA 22310	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
9590 9402 2074 6132 7351 45 Article Number (Transfer from service label) 7016 2710 0000 0157 3156		9590 9402 2074 6132 7353 81 2. Article Number (Transfer from service label) 7016 1970 0000 7217 4255	
S Form 3811, July 2015 PSN 7530-02-000-9053		PS Form 3811, July 2015 PSN 7530-02-000-9053	
Domestic Return Receipt		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.

Article Addressed to:

Junete Troupe
18 Clarmount Street Northwest
Iem, OR 97304

9590 9402 2074 6132 7354 04

Article Number (Transfer from service label)

7016 1970 0000 7217 4286

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

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

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

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:

Known and unknown heirs of
Ormalee Houston Wilson, deceased
c/o Exel Barrows
107 Rose Street
Campbellsville, KY 42718

9590 9402 2074 6132 7351 90

2 7016 1970 0000 7217 4347

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

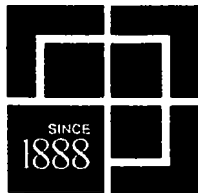
C. Date of Delivery

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

3. Service Type

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

Domestic Return Receipt



hinklelawfirm.com

HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson,
Partner

glarson@hinklelawfirm.com

May 16, 2017

VIA CERTIFIED MAIL

07 Ranch Minerals, LP
c/o Sarah K. Burrus
P.O. Box 1090
Plains, TX 79355

Re: Special Energy Corporation NMOCD Application

Dear Ms. Burrus:

Enclosed is a copy of an application for approval of a 160-acre, non-standard spacing and proration unit and compulsory pooling that Special Energy Corporation ("Special Energy") has filed with the New Mexico Oil Conservation Division ("the Division"). The proposed non-standard spacing and proration unit is comprised of the W/2 W/2 of Section 20, Township 12 South, Range 38 East, NMPM, Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 8, 2017 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. The 07 Ranch Minerals, LP ("07 Ranch") is not required to attend this hearing, but as an owner of an interest that may be affected by Special Energy's application, it may appear at the hearing and present testimony. If 07 Ranch does not appear at that time and become a party of record, it will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, June 1, 2017. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson

GWL:sm
Enclosure

OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H

Exhibit #3

PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88210
575-622-6510
(FAX) 575-746-6316

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

Decker 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

1. 07 Ranch Minerals, LP
c/o Sarah K. Burrus, General Partner
P.O. Box 1090
Plains, TX 79355
2. Aletha Wilson, as Trustee of the Glenn &
Aletha Wilson Revocable Trust, u/t/a
dated 6-11-2007
P.O. Box 38
Artois, CA 95913
3. B.J. Briley
P.O. Box 104
Malaga, NM 88263
4. Bertha Jo Carriere, f/k/a Bertha Jo
Malone
1039 State Highway Kk
Fordland, MO 65807
5. Betty Jo Kringel
10971 Arlington Avenue
Riverside, CA 92505
6. Billy Earl Barron
Address Unknown
7. Cheryl Lynn Murphy, a/k/a Cheryl Lynn
Hendershot
280 Sherman Peak Drive
Bakersfield, CA 93308
8. City Bank, as Successor Trustee of the
Anita Field Irrevocable Trust, dated April
3, 1986, for the benefit of Nancy Carnley
Attn: Dustin Gresham
P.O. Box 2307
Lubbock, TX 79408
9. Clint Field Burrus
2630 Beaver Lane
New Braunfels, TX 78132
10. Clinton Otha Houston
Box 245
Tatum, NM 88267
11. Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
12. Dana Martin
913 West Polk Avenue
Lovington, NM 88260
13. Dannie Marie Peebles
4496 Crestwood Circle
Concord, CA 94521
14. Darla Berton
10961 Desert Lawn Drive
Calimesa, CA 92320
15. David Carter
4289 Oakman Street South
Salem, OR 97302
16. David Harold Bozell
6431 SW 108th Place
Ocala, FL 34476
17. David J. Field
1916 Aberdeen
Lubbock, TX 79407
18. Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
19. Debra Canoy
20 Ash Street
Mount Vernon, OH 43050
20. Delanna K. Harding
21591 E. Mewes Road
Queen Creek, AZ 85242
21. Dixie Turnquist
P.O. Box 667
Yucaipa, CA 92399
22. Ernest L. Thompson
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
23. Exel Barrows
107 Rose Street
Campbellsville, KY 42718
24. Field Minerals, LLC
P.O. Box 1105
Lovington, NM 88260

Decker 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

25. Gary D. Wilson
P.O. Box 6312
Moore, OK 73153
26. Gordon W. Leach
517 Hopper Drive
Corpus Christi, TX 78411
27. Greg Bowen
4530 Hillside Avenue
Norco, CA 92860
28. Guy Bowen
6850 Sandy Lane
Riverside, CA 92505
29. Holly Mills
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
30. Jacco, Inc.
c/o Ellen E. Jackson-Swann
4800 Chesapeake St NW
Washington, DC 20016
31. Janet L. Dishner
5388 Chieftain Circle
Alexandria, VA 22312
32. Jessica Holladay
6302 North Davis Lane
Hobbs, NM 88242
33. Known and unknown heirs of Ava
Vonceile Houston Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
34. Known and unknown heirs of Becky
Anker, deceased
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
35. Known and unknown heirs of Bertha
Fletcher Houston
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
36. Known and unknown heirs of Billy Joe
Barnett
c/o Veta Marie Hood
2384 State Street
Salem, OR 97301
37. Known and unknown heirs of Claudia
Lee Barr
c/o Randy Barr
207 2nd Street
Mobeetie, TX 79061
38. Known and unknown heirs of Eddie
Maurice Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
39. Known and unknown heirs of John R.
Houston
c/o Betty Jo Kringel
10971 Arlington Avenue
Riverside, CA 92505
40. Known and unknown heirs of John
Wayne Houston, deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735
41. Known and unknown heirs of Karen
Briley, deceased
c/o B.J. Briley
P.O. Box 104
Malaga, NM 88263
42. Known and unknown heirs of Kurt
Mitchell Sebelius
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
43. Known and unknown heirs of Linda Jean
VanScoik
c/o David Carter
4289 Oakman Street South
Salem, OR 97302

Decker 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

- | | |
|--|--|
| 44. Known and unknown heirs of Nariisse
Cotton Sebelius
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399 | 3607 County Road 1200
Lubbock, TX 79407 |
| 45. Known and unknown heirs of Ola Lorena
Houston, deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735 | 53. Leslie Barr
913 W. Polk Avenue
Lovington, NM |
| 46. Known and unknown heirs of Omalee
Houston Wilson
c/o Exel Barrows
107 Rose Street
Campbellsville, KY 42718 | 54. Lila Sue Peebles
98 Clove Court
Oakley, CA 94561 |
| 47. Known and unknown heirs of Peggy
Ruth Bowen
c/o Greg Bowen
4530 Hillside Avenue
Norco, CA 92860 | 55. Linda Gonzales
20 Ash Street
Mount Vernon, OH 43050 |
| 48. Known and unknown heirs of Trela
Valesta Cannon, deceased
c/o Mac A. Douglas
507 E. Broadway Street
Tatum, NM 88267 | 56. Mac A. Douglas
507 E. Broadway Street
Tatum, NM 88267 |
| 49. Known and unknown heirs of Valeta
Louise Houston Cotton
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399 | 57. Marcia Dianne Knight
c/o Debra Canoy
20 Ash Street
Mount Vernon, OH 43050 |
| 50. Known and unknown heirs of Willie
Juanita Houston Barron
c/o Sammie Myrl Hoffman
8175 Walnut Knoll Cove
Cordova, TN 38018 | 58. Megan Smith Field
5901 Sarah Court
Austin, TX 78757 |
| 51. Known and unknown heirs of Virginia
Elizabeth Thompson Burke
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 | 59. Michael Carter
c/o David Carter
4289 Oakman Street South
Salem, OR 97302 |
| 52. Kristin Briley | 60. Michael E. Burke
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 |
| | 61. Nancy Houston
3625 Somerdale Street
Corona, CA 92879 |
| | 62. Norman Cotton
31945 Cortez Court
Murrieta, CA 92563 |
| | 63. Pamela B. Robertson
10821 Santa Clara Drive
Fairfax, VA 22030 |
| | 64. Pamela Sue Cannon
3652 Plantation Grove
Colorado Springs, CO 80920 |

Decker 1-H Project Area Pooled List
Lea County, New Mexico
April 26, 2017

- | | |
|--|---|
| 65. Parachute Energy, Ltd.
1916 Aberdeen
Lubbock, TX 79407 | 4289 Oakman Street South
Salem, OR 97302 |
| 66. Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 | 78. Shelia Olin
c/o Debra Canoy
20 Ash Street
Mount Vernon, OH 43050 |
| 67. Patsy Olivia Fulton
6115 W. 123rd Street S
Oktaha, OK 74450 | 79. Shelley Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308 |
| 68. Paula Bozell Knight
4741 NE County Road 660
Arcadia, FL 34266 | 80. Sheri L. Beaty
49 Misty Woods Road
Hartshorne, OK 74547 |
| 69. Randy Barr
207 2nd Street
Mobeetie, TX 79061 | 81. Steven Barnett
5465 Commercial Street Southeast,
Apt 54
Salem, OR 97306 |
| 70. Robin Leah Simpson
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399 | 82. Timothy A. Burke
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 |
| 71. Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735 | 83. Veta Marie Hood
2384 State Street
Salem, OR 97301 |
| 72. Sally Ann Burrus Doherty
4604 102nd Street
Lubbock, TX 79424 | 84. Vonal Rue Spry
3625 Somerdale Street
Corona, CA 92879 |
| 73. Sammie Myrl Hoffman
8175 Walnut Knoll Cove
Cordova, TN 38018 | |
| 74. Sarah K. Burrus
P.O. Box 1090
Plains, TX 79355 | |
| 75. Sharon Bozell Jones
3711 3rd Avenue Drive E
Palmetto, FL 34221 | |
| 76. Shawn Leah Cotton Govoni
146 Hawthorne Street
Sutherlin, OR 97479 | |
| 77. Shawnell Carter
c/o David Carter | |

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:

07 Ranch Minerals, LP
 c/o Sarah K. Burrus, General Partner
 P.O. Box 1090
 Plains, TX 79355

9590 9402 2703 6351 7668 19

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0165

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

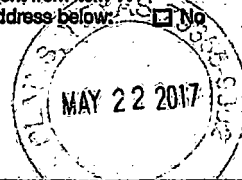
X *Tommy Burrus*

- ☐ 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

- ☐ 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

all Restricted Delivery

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:

Aletha Wilson,
 as Trustee of the Glenn & Aletha Wilson
 Revocable Trust
 P.O. Box 38
 Artois, CA 95913

9590 9402 2703 6351 7670 90

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0448

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Aletha Wilson*

- ☐ 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

- ☐ 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

all Restricted Delivery

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:

B.J. Briley
 P.O. Box 104
 Malaga, NM 88263

9590 9402 2703 6351 7668 40

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0196

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *B.J. Briley*

- ☐ 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

- ☐ 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

all Restricted Delivery

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. 1. Article Addressed to: Bertha Jo Carriere 1039 State Highway Kk Fordland, MO 65807 9590 9402 2703 6351 7668 71 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0226	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery <u>5-17-16</u> 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 ☐ Insured Mail ☐ Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

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

Domestic Return Receipt

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. 1. Article Addressed to: Betty Jo Kringel 10971 Arlington Avenue Riverside, CA 92505 9590 9402 2703 6351 7668 88 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0233	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 ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

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

Domestic Return Receipt

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. 1. Article Addressed to: Cheryl Lynn Murphy 280 Sherman Peak Drive Bakersfield, CA 93308 9590 9402 2703 6351 7669 01 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0257	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery <u>5-17</u> 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 ☐ Insured Mail ☐ Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

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

Domestic Return Receipt

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. 1. Article Addressed to: City Bank, as Successor Trustee of the Anita Field Irrevocable Trust Attn: Dustin Gresham P.O. Box 2307 Lubbock, TX 79408 9590 9402 2703 6351 7668 26 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0172	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) HANK TURNER C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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. 1. Article Addressed to: Clint Field Burrus 2630 Beaver Lane New Braunfels, TX 78132 9590 9402 2703 6351 7669 25 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0271	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) Katie Burrus C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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. 1. Article Addressed to: Clinton Otha Houston Box 245 Tatum, NM 88267 9590 9402 2703 6351 7669 32 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0288	A. Signature X ☐ Agent ☐ Addressee B. Received by (Printed Name) Beverta Houston C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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. 1. Article Addressed to: Countee Troupe 928 Clarmount Street Northwest Salem, OR 97304	A. Signature <i>[Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>COUNTTEE TROUPE</i> C. Date of Delivery <i>5-22-17</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:														
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7669 49 7016 2070 0000 3697 0295	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ (Insurance Mail)</td> <td></td> </tr> </table> all Restricted Delivery	☐ 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	☐ (Insurance Mail)	
☐ 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														
☐ (Insurance Mail)															

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

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

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

OFFICIAL USE

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 \$ Total Postage and Fees \$ Sent To <i>Dana Martin 998</i> Street and Apt. No., or PO Box <i>913 West Polk Avenue</i> City, State, ZIP+4® <i>Lovington, NM 88260</i>	POST OFFICE Postmark Here
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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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. 1. Article Addressed to: Dannie Marie Peebles 4496 Crestwood Circle Concord, CA 94521	A. Signature <i>[Signature]</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>JESE PEEBLES</i> C. Date of Delivery <i>5/28/17</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:														
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7669 63 7016 2070 0000 3697 0318	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ (Insurance Mail)</td> <td></td> </tr> </table> all Restricted Delivery	☐ 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	☐ (Insurance Mail)	
☐ 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														
☐ (Insurance Mail)															

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

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. 1. Article Addressed to: Darla Berton 10961 Desert Lawn Drive Calimesa, CA 92320 9590 9402 2349 6225 8221 59 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9343	A. Signature * Darla J. Berton ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery DARLA J. BERTON 5/22/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

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

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

OFFICIAL USE

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 \$ Total Postage and Fees \$ Sent To David Carter Street and Apt. No., or PO Box No. 4289 Oakman Street South City, State, ZIP+4® Salem, OR 97302	Postmark Here 507-9990
--	--

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse 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. 1. Article Addressed to: David Harold Bozell 6431 SW 108th Place Ocala, FL 34476 9590 9402 2703 6351 7669 87 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0332	A. Signature * David Bozell ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Bozell 5-19-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

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

7016 2070 0000 3697 0349

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

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

OFFICIAL USE

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

Total Postage and Fees

Sent To David J. Field 9998
Street and Apt. No., or PO Box No. 1916 Aberdeen
City, State, ZIP+4® Lubbock, TX 79407

PS Form 3800, 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:

Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399

9590 9402 2703 6351 7670 07

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0356

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

A. Signature

X DR

Agent

☐ Addressee

B. Received by (Printed Name)

D. Harrington

C. Date of Delivery

5/19/17

D. Is delivery address different from item 4? ☐ 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
☐ Insured Mail

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

all Restricted Delivery

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:

Debra Canoy
20 Ash Street
Mount Vernon, OH 43050

9590 9402 2703 6351 7670 14

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0363

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Debra Canoy

Agent

☒ Addressee

B. Received by (Printed Name)

Debra Canoy

C. Date of Delivery

05-29-17

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
☐ Insured Mail

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

all Restricted Delivery

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:

Delanna K. Harding
 21591 E. Mewes Road
 Queen Creek, AZ 85242

9590 9402 2703 6351 7670 21

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0370

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Delanna Harding*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Delanna Harding

C. Date of Delivery

6-2-17

- 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

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:

Dixie Turnquist
 P.O. Box 667
 Yucaipa, CA 92399

9590 9402 2703 6351 7670 38

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0387

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dixie Duke Turnquist*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

DIXIE DUKE TURNQUIST

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

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:

Ernest L. Thompson
 c/o Patricia A. Hull
 6113 Leewood Drive
 Alexandria, VA 22310

9590 9402 2703 6351 7670 52

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0400

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *P. Hull*

- ☐ 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

5-18

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

(over \$500)

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. 1. Article Addressed to: Exel Barrows 107 Rose Street Campbellsville, KY 42718	A. Signature <i>X Michael M. Barrows</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) _____ C. Date of Delivery <u>5-19</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No												
2. Article Number (Transfer from carrier label) 9590 9402 2703 6351 7670 69 7016 2070 0000 3697 0417	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table> (over 500)	☐ 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
☐ 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												

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

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. 1. Article Addressed to: Field Minerals, LLC P.O. Box 1105 Lovington, NM 88260	A. Signature <i>X Candice Lee</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) _____ C. Date of Delivery <u>MAY 24 2017</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No												
2. Article Number (Transfer from carrier label) 9590 9402 2703 6351 7670 76 7016 2070 0000 3697 0424	3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table> (over 500)	☐ 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
☐ 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												

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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7016 2070 0000 3697 0431

OFFICIAL USE

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 \$ _____ Total Postage and Fees \$ _____ Sent To <u>Gary D. Wilson</u> Street and Apt. No., or P.O. Box No <u>P.O. Box 6312</u> City, State, ZIP+4® <u>Moore, OK 73153</u>	Postmark Here
--	----------------------

PS Form 3800, April 2015 PSN 7530-02-000-9053-10 See Reverse 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. 1. Article Addressed to: Gordon W. Leach 517 Hopper Drive Corpus Christi, TX 78411	A. Signature X <i>Gordon W. Leach</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Gordon W. Leach</i> C. Date of Delivery <i>5/20</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7671 06 7016 2070 0000 3697 0455	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

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

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. 1. Article Addressed to: Greg Bowen 4530 Hillside Avenue Norco, CA 92860	A. Signature X <i>Greg Bowen</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Greg Bowen</i> C. Date of Delivery <i>5/20/17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7671 13 7016 2070 0000 3697 0462	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

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

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. 1. Article Addressed to: Guy Bowen 6850 Sandy Lane Riverside, CA 92505	A. Signature X <i>Karin Broadbent</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Karin Broadbent</i> C. Date of Delivery <i>5-20-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7671 20 7016 2070 0000 3697 0479	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

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

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.		A. Signature <u>[Signature]</u> ☐ Agent ☐ Addressee B. Received by (Printed Name) <u>Countee Troupe</u> C. Date of Delivery <u>5-22-17</u> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Holly Mills c/o Countee Troupe 928 Clarmount Street Northwest Salem, OR 97304		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 (over \$500)	
9590 9402 2703 6351 7671 37 7016 2070 0000 3697 0486		☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

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

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OFFICIAL USE

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 \$
 Total Postage and Fees \$
 Sent To Jacco, Inc.
c/o Ellen E. Jackson-Swann
4800 Chesapeake St NW
Washington DC 20001
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7016 2070 0000 3697 0493

U.S. Postal Service™
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 Domestic Mail Only

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OFFICIAL USE

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 \$
 Total Postage and Fees \$
 Sent To Janet L. Dishner
5388 Chieftain Circle
Alexandria VA 22312
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

7016 2070 0000 3697 0509

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:

Jessica Holladay
 6302 North Davis Lane
 Hobbs, NM 88242

9590 9402 2703 6351 7671 68

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0516

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jessica Holladay*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Jessica Holladay

C. Date of Delivery

5/19

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

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:

Known and unknown heirs of Ava Vonceile
 Houston Knight
 c/o Cheryl Lynn Murphy
 280 Sherman Peak Drive
 Bakersfield, CA 93308

9590 9402 2703 6351 7668 33

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0189

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Cheryl Lynn Murphy*

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. M.

C. Date of Delivery

5-11

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

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:

Known and unknown heirs of Becky Anker
 c/o Countee Troupe
 928 Clarmount Street Northwest
 Salem, OR 97304

9590 9402 2703 6351 7668 57

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0202

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Countee Troupe*

☐ Agent☐ Addressee

B. Received by (Printed Name)

Countee Troupe

C. Date of Delivery

5/22/17

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

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. 1. Article Addressed to: Known and unknown heirs of Bertha Fletcher Houston c/o Patricia A. Hull 6113 Leewood Drive Alexandria, VA 22310 9590 9402 2703 6351 7668 64 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0219	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 5-18 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

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

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☐ 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: Known and unknown heirs of Billy Joe Barnett c/o Veta Marie Hood 2384 State Street Salem, OR 97301 9590 9402 2703 6351 7668 95 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0219	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No 3. Service Type ☐ 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

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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. 1. Article Addressed to: Known and unknown heirs of Claudia Lee Barr c/o Randy Barr 207 2nd Street Mobeetie, TX 79061 9590 9402 2703 6351 7669 18 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0264	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No 3. Service Type ☐ 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

PS Form 3811, July 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:

Known and unknown heirs of Eddie Maurice Knight
 c/o Cheryl Lynn Murphy
 280 Sherman Peak Drive
 Bakersfield, CA 93308

9590 9402 2703 6351 7670 45

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0394

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Cheryl Murphy

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C.M.

C. Date of Delivery

5/17

- 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
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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:

Known and unknown heirs of John R. Houston
 c/o Betty Jo Kringel
 10971 Arlington Avenue
 Riverside, CA 92505

9590 9402 2703 6351 7671 75

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0523

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Betty Kringel

- ☐ 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

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

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- ☐ 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:

Known and unknown heirs of John Wayne Houston
 c/o Ruben Dale Houston
 1739 W. 44th Street
 Fort Stockton, TX 79735

9590 9402 2703 6351 7671 82

2. Article Number (Transfer from service label)

7016 2070 0000 3697 0530

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X B. Houston

- ☐ 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

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

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☐ 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.	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery
1. Article Addressed to: Known and unknown heirs of Karen Briley c/o B.J. Briley P.O. Box 104 Malaga, NM 88263	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7016 2070 0000 3697 0547	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 ☐ Insured Mail ☐ Restricted Delivery

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☐ 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.	A. Signature X <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>5/19/17</i>
1. Article Addressed to: Known and unknown heirs of Kurt Mitchell Sebelius c/o Dawn Harrington 34936 Persimmon Ave. Yucaipa, CA 92399	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7016 2070 0000 3697 0561	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 ☐ Insured Mail ☐ Restricted Delivery

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

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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 \$
 Total Postage and Fees \$
 Sent To **L.J. Van Scoik**
 Street and Apt. No., or PO Box No. **4289 Oakman Street South**
 City, State, ZIP+4® **Salem, OR 97302**

Postmark Here: *MAI 18 2017*

PS Form 3800, April 2015 PSN 7530-02-000-9053 See reverse 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. 1. Article Addressed to: Known and unknown heirs of Narisse Cotton Sebelius c/o Dawn Harrington 34936 Persimmon Ave. Yucaipa, CA 92399 9590 9402 2703 6351 7673 11	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>D. Harrington</i> C. Date of Delivery <i>5/19/17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7016 2070 0000 3697 0677	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 ☐ Restricted Delivery (over \$500)

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

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. 1. Article Addressed to: Known and unknown heirs of Ola Lorena Houston c/o Ruben Dale Houston 1739 W. 44th Street Fort Stockton, TX 79735 9590 9402 2703 6351 7673 35	A. Signature <i>X [Signature]</i> ☐ 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
2. Article Number (Transfer from service label) 7017 0660 0000 6477 8285	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 ☐ Restricted Delivery (over \$500)

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

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. 1. Article Addressed to: Known and unknown heirs of Omalce Houston Wilson c/o Exel Barrows 107 Rose Street Campbellsville, KY 42718 9590 9402 2703 6351 7673 42	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>5-19</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
2. Article Number (Transfer from service label) 7017 0660 0000 6477 8292	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 ☐ Restricted Delivery (over \$500)

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

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. 1. Article Addressed to: Known and unknown heirs of Peggy Ruth Bowen c/o Greg Bowen 4530 Hillside Avenue Norco, CA 92860 9590 9402 2703 6351 7674 10 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8360	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) <u>Greg Bowen</u> C. Date of Delivery <u>5/20/17</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ 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
☐ 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		

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

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

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

OFFICIAL USE

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 \$ Total Postage and Fees \$ Sent To <u>Trela Cannon</u> <u>Mac A. Douglas</u> <u>Heirs</u> <u>507 E. Broadway Street</u> <u>Street and Apt. No., or PO Box No.</u> <u>atum, NM 88267</u> <u>City, State, ZIP+4®</u>	Postmark Here
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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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. 1. Article Addressed to: Known and unknown heirs of Valeta Louise Houston Cotton c/o Dawn Harrington 34936 Persimmon Ave. Yucaipa, CA 92399 9590 9402 2589 6336 9490 79 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9299	A. Signature ☐ Agent ☒ Addressee B. Received by (Printed Name) <u>P. Harrington</u> C. Date of Delivery <u>5/19/17</u> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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. 1. Article Addressed to: Known and unknown heirs of Willie Juanita Houston Barron c/o Sammie Myrl Hoffman 8175 Walnut Knoll Cove Cordova, TN 38018 9590 9402 2349 6225 8221 42 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9336	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) Sherril Harrison C. Date of Delivery 5-20 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☒ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☒ 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
☒ 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		

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

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. 1. Article Addressed to: Known and unknown heirs of Virginia Elizabeth Thompson Burke c/o Patricia A. Hull 6113 Leewood Drive Alexandria, VA 22310 9590 9402 2589 6336 9490 93 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9312	A. Signature <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) 5-18 C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ 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
☐ 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		

PS Form 3811, July 2015 PSN 7530-02-000-9058 Domestic Return Receipt

4550 2697 0000 2070 2016

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

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

OFFICIAL USE

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 \$ Total Postage and Fees \$ Sent To Street and Apt. No., or PO Box No. 3607 County Road 1200 City, State, ZIP+4® Lubbock, TX 79407	Kristin Briley 3607 County Road 1200 Lubbock, TX 79407
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PS Form 3800, April 2015 PSN 7530-02-000-9047-2-1. See Reverse for Instructions

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

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

OFFICIAL USE

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

\$

Total Postage and Fees

\$

Sent To

Leslie Barr
 913 W. Polk Ave.
 Lovington, NM 88260

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

PS Form 3800, 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:
 Lila Sue Peebles
 98 Clove Court
 Oakley, CA 94561

9590 9402 2703 6351 7672 36

2. Article Number (Transfer from service label)
 7016 2070 0000 3697 0585

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/20/17

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
☐ 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 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:
 Linda Gonzales
 20 Ash Street
 Mount Vernon, OH 43050

9590 9402 2703 6351 7672 43

2. Article Number (Transfer from service label)
 7016 2070 0000 3697 0608

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

- ☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Linda Gonzales

05 23 17

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
☐ Insured Mail

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

Restricted Delivery

7016 2070 0000 3697 0622

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

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

OFFICIAL USE

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
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Mac A. Douglas
 Street and Apt. No., or PO Box No. 507 E. Broadway Street
 City, State, ZIP+4® Catum, NM 88267

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

7016 2070 0000 3697 0639

U.S. Postal Service™
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OFFICIAL USE

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
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Marcia Dianne Knight
 Street and Apt. No., or PO Box No. c/o Debra Canoy
 City, State, ZIP+4® 20 Ash Street
 Mt. Vernon, OH 43050

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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. 1. Article Addressed to: Megan Smith Field 5901 Sarah Court Austin, TX 78757 9590 9402 2703 6351 7672 81 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0646	A. Signature X <i>[Signature]</i> 5/23/17 ☐ 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 <table border="0"> <tr> <td> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ 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
☐ 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		

7016 2070 0000 3697 0653

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
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 \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ City, State, ZIP+4 [®] _____	
Michael Carter c/o David Carter 4289 Oakman Street South Salem, OR 97302	
PS Form 3800, 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: Michael E. Burke c/o Patricia A. Hull 6113 Leewood Drive Alexandria, VA 22310 9590 9402 2354 6225 8696 13 2. Article Number (Transfer from service label) 7017 0660 0000 6478 0530	COMPLETE THIS SECTION ON DELIVERY A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 5-18 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 TM ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation TM ☐ Signature Confirmation Restricted Delivery
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PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7016 2070 0000 3697 0660

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
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 \$ _____	
Total Postage and Fees \$ _____	
Sent To Street and Apt. No., or PO Box No. _____ City, State, ZIP+4 [®] _____	
Nancy Houston 1625 Somerdale Street Corona, CA 92879	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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. 1. Article Addressed to: Norman Cotton 31945 Cortez Court Murrieta, CA 92563 9590 9402 2703 6351 7673 28 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0684	A. Signature X <i>David Cotton</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>David Cotton</i> C. Date of Delivery <i>5/18</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No  3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

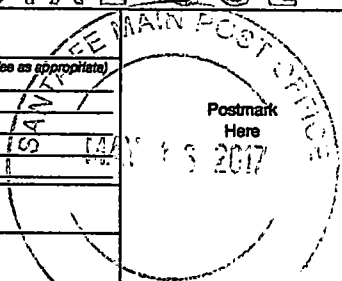
U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

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 \$ Total Postage and Fees \$ Sent To Pamela B. Robertson Street and Apt. No., or PO Box No. 10821 Santa Clara Drive City, State, ZIP+4® Fairfax, VA 22030	
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PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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. 1. Article Addressed to: Pamela Sue Cannon 3652 Plantation Grove Colorado Springs, CO 80920 9590 9402 2703 6351 7673 66 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8315	A. Signature X <i>Pamela Cannon</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Pamela Cannon</i> C. Date of Delivery <i>5/18</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

PS Form 3811, July 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:

Parachute Energy, Ltd.
 1916 Aberdeen
 Lubbock, TX 79407

9590 9402 2703 6351 7673 73

2. Article Number (Transfer from service label)

7017 0660 0000 6477 8322

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Mike Field

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Mike Field

C. Date of Delivery

5-22-17

- 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

Restricted Delivery

(over \$500)

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:

Patricia A. Hull
 6113 Leewood Drive
 Alexandria, VA 22310

9590 9402 2703 6351 7673 80

2. Article Number (Transfer from service label)

7017 0660 0000 6477 8339

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X P Hull

- ☐ 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

5-18

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

Restricted Delivery

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:

Patsy Olivia Fulton
 6115 W. 123rd Street S
 Oktaha, OK 74450

9590 9402 2703 6351 7673 97

2. Article Number (Transfer from service label)

7017 0660 0000 6477 8346

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Patsy Fulton

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Patsy Fulton

C. Date of Delivery

5/19/17

- 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

Restricted Delivery

Domestic Return Receipt

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. 1. Article Addressed to: Paula Bozell Knight 4741 NE County Road 660 Arcadia, FL 34266 9590 9402 2703 6351 7674 03 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8353	A. Signature <i>* Paula Knight</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) Paula Knight C. Date of Delivery 5-19-17 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 ☐ 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	

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

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. 1. Article Addressed to: Randy Barr 207 2nd Street Mobeetie, TX 79061 9590 9402 2703 6351 7674 27 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8377	A. Signature <i>* Randy Barr</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) RANDY BARR C. Date of Delivery 5-26-17 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	

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

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. 1. Article Addressed to: Robin Leah Simpson c/o Dawn Harrington 34936 Persimmon Ave. Yucaipa, CA 92399 9590 9402 2589 6336 9489 97 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8384	A. Signature <i>* Dawn Harrington</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) D. Harrington C. Date of Delivery 5/19/17 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	

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

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. 1. Article Addressed to: Ruben Dale Houston 1739 W. 44th Street Fort Stockton, TX 79735 [Redacted Address] 9590 9402 2589 6336 9489 28 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8391	A. Signature X B. Houston ☐ 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 MAY 22 2017 3. Service Type 4805 ☐ 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 Restricted Delivery

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

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. 1. Article Addressed to: Sally Ann Burrus Doherty 4604 102nd Street Lubbock, TX 79424 [Redacted Address] 9590 9402 2589 6336 9489 35 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8407	A. Signature X Sally Doherty ☐ 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 ☐ 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 Restricted Delivery (over \$500)

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

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. 1. Article Addressed to: Sammie Myrl Hoffman 8175 Walnut Knoll Cove Cordova, TN 38018 [Redacted Address] 9590 9402 2589 6336 9489 42 2. Article Number (Transfer from service label) 7017 0660 0000 6477 8414	A. Signature X Sherry Hoffman ☐ 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 ☐ 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 Restricted Delivery (over \$500)

PS Form 3811, July 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:

Sarah K. Burrus
P.O. Box 1090
Plains, TX 79355

9590 9402 2589 6336 9489 59

2. Article Number (Transfer from service label)

7017 0660 0000 6477 8421

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

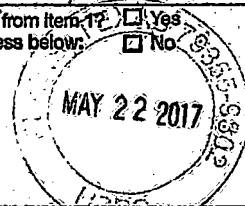
X *Tommy Burrus*

☐ 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

- ☐ 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

Restricted Delivery

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:

Sharon Bozell Jones
3711 3rd Avenue Drive E
Palmetto, FL 34221

9590 9402 2589 6336 9489 66

2. Article Number (Transfer from service label)

7017 0660 0000 6477 8438

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sharon Bozell Jones*

☐ 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

- ☐ 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

Restricted Delivery

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:

Shawn Cotton Govoni
146 Hawthorne Street
Sutherlin, OR 97479

9590 9402 2589 6336 9489 73

2. Article Number (Transfer from service label)

7017 0660 0000 6477 8445

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Shawn Cotton Govoni*

☐ 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

- ☐ 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

Restricted Delivery

7017 0660 0000 6477 8452

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

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

OFFICIAL USE

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
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Shawna Carter
 c/o David Carter
 Street and Apt. No., or PO Box No. 1289 Oakman Street South
 City, State, ZIP+4® Salem, OR 97302

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

7017 0660 0000 6477 8469

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

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

OFFICIAL USE

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
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Shelia Olin
 c/o Debra Canoy
 Street and Apt. No., or PO Box No. 20 Ash Street
 City, State, ZIP+4® Mount Vernon, OH 43050

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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.		A. Signature  B. Received by (Printed Name) C. Date of Delivery E.A.													
1. Article Addressed to: Shelley Knight c/o Cheryl Lynn Murphy 280 Sherman Peak Drive Bakersfield, CA 93308		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No													
2. Article Number (Transfer from service label) 9590 9402 2589 6336 9490 24		3. Service Type <table border="0"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>		☐ 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
☐ Adult Signature	☐ Priority Mail Express®														
☐ Adult Signature Restricted Delivery	☐ Registered Mail™														
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☐ Certified Mail Restricted Delivery	☐ Return Receipt for Merchandise														
☐ Collect on Delivery	☐ Signature Confirmation™														
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery														
7017 0660 0000 6477 8476		(over \$500)													

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. 1. Article Addressed to: Sheri L. Beaty 49 Misty Woods Road Hartshorne, OK 74547 9590 9402 2589 6336 9490 31	A. Signature ☒ Agent ☒ Addressee <i>Sheri Beaty</i> B. Received by (Printed Name) Sheri Beaty C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
2. Article Number (Transfer from service label) 7017 0660 0000 6477 8483	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table> ☐ Restricted Delivery	☐ 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
☐ 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		

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

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. 1. Article Addressed to: Steven Barnett 5465 Commercial Street Southeast, Apt 54 Salem, OR 97306 9590 9402 2589 6336 9490 48	A. Signature ☐ Agent ☒ Addressee <i>Steven Barnett</i> B. Received by (Printed Name) Steven Barnett C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
2. Article Number (Transfer from service label) 7017 0660 0000 6477 9268	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table> ☐ Restricted Delivery	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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

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☒ 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. Article Addressed to: Timothy A. Burke c/o Patricia A. Hull 6113 LeeWood Drive Alexandria, VA 22310 9590 9402 2589 6336 9490 55	A. Signature ☐ Agent ☒ Addressee <i>P Hull</i> B. Received by (Printed Name) Patricia A. Hull C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 5-18		
2. Article Number (Transfer from service label) 7017 0660 0000 6477 9275	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table> ☐ Restricted Delivery	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

PS Form 3811, July 2015 PSN 7530-02-000-9058 Domestic Return Receipt

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. 1. Article Addressed to: Veta Marie Hood 2384 State Street Salem, OR 97301	A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery 5-19-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☒ No		
2. Article Number (Transfer from service label) 9590 9402 2589 6336 9490 86	3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table> 7017 0660 0000 6477 9305 Restricted Delivery	☐ 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
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Domestic Mail Only

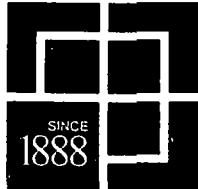
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☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	
Vonal Rue Spry	
3625 Somerdale Street	
Corona, CA 92879	
City, State, ZIP+4®	

Postmark Here

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See Reverse for Instructions



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson,
Partner

glarson@hinklelawfirm.com

May 16, 2017

VIA CERTIFIED MAIL

Ana Riddel Williamson, Trustee of the
Ana Riddel Trust, fbo Stephen and Margaret Williamson
4702 16th Street
Lubbock, TX 79416

Re: Special Energy Corporation NMOCD Application

Dear Ms. Williamson:

Enclosed is a copy of an application for approval of a 160-acre, non-standard spacing and proration unit and compulsory pooling that Special Energy Corporation ("Special Energy") has filed with the New Mexico Oil Conservation Division ("the Division").

The proposed non-standard spacing and proration unit is comprised of the W/2 W/2 of Section 20, Township 12 South, Range 38 East, NMPM, Lea County, New Mexico. The location of the proposed project area is orthodox. The Ana Riddel Trust, fbo Stephen and Margaret Williamson's (the "Trust") interests are not being pooled, but as the owner of an interest in an offsetting tract, it is entitled to receive notice of Special Energy's application.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 8, 2017 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. The Trust is not required to attend this hearing, but as an owner of an interest in an offset tract, it has the right to appear at the hearing and present testimony. If the Trust does not appear at the hearing, it will be precluded from contesting the matter at a later date.

A party appearing in the case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, June 1, 2017. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson

OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #4

GWL:sm

Enclosure

ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88211
575-622-6510
(FAX) 575-746-6316

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

7601 JEFFERSON ST NE - SUITE 180
ALBUQUERQUE, NEW MEXICO 87109
505-858-8320
(FAX) 505-858-8321

Decker 1-H Offset List
Lea County, New Mexico
April 26, 2017

1. 07 Ranch Minerals, LP
c/o Sarah K. Burrus, General Partner
P.O. Box 1090
Plains, TX 79355
2. Aletha Wilson, as Trustee of the Glenn &
Aletha Wilson Revocable Trust, u/t/a
dated 6-11-2007
P.O. Box 38
Artois, CA 95913
3. Ana Riddel Williamson, Trustee of the
Ana Riddel Trust, f/b/o Stephen and
Margaret Williamson
4702 16th Street
Lubbock, TX 79416
4. Austin Trust Company and Cynthia Lynn
Anderson, Co-Trustees of the
Oberholtzer Family Trust, f/b/o Cynthia
Lynn Anderson
336 South Congress, Suite 100
Austin, TX 78704
5. Austin Trust Company and Cynthia Lynn
Anderson, Co-Trustees of the
Oberholtzer Family Trust, f/b/o
Claudia Sue Means
336 South Congress, Suite 100
Austin, TX 78704
6. Austin Trust Company and Cynthia Lynn
Anderson, Co-Trustees of the
Oberholtzer Family Trust, f/b/o
Sharon K. Compton
336 South Congress, Suite 100
Austin, TX 78704
7. Austin Trust Company and Cynthia Lynn
Anderson, Co-Trustees of the
Oberholtzer Family Trust, f/b/o
Carol Ann Cantrell
336 South Congress, Suite 100
Austin, TX 78704
8. Austin Trust Company and Cynthia Lynn
Anderson, Co-Trustees of the
Oberholtzer Family Trust, f/b/o
Carl Edward Oberholtzer, Jr.
336 South Congress, Suite 100
Austin, TX 78704
9. B. Davis Gentry
9304 York Avenue
Lubbock, TX 79424
10. B.J. Briley
P.O. Box 104
Malaga, NM 88263
11. Bertha Jo Carriere, f/k/a Bertha Jo
Malone
1039 State Highway Kk
Fordland, MO 65807
12. Betty Jo Kringel
10971 Arlington Avenue
Riverside, CA 92505
13. Billy Earl Barron
Address Unknown
14. BP America
501 Westlake Park Boulevard
Houston, TX 77079
15. Cheryl Lynn Murphy, a/k/a Cheryl Lynn
Hendershot
280 Sherman Peak Drive
Bakersfield, CA 93308
16. City Bank, as Successor Trustee of the
Anita Field Irrevocable Trust, dated April
3, 1986, for the benefit of Nancy Carnley
Attn: Dustin Gresham
P.O. Box 2307
Lubbock, TX 79408
17. Clint Field Burrus
2630 Beaver Lane
New Braunfels, TX 78132
18. Clinton Otha Houston
Box 245
Tatum, NM 88267

Decker 1-H Offset List
Lea County, New Mexico
April 26, 2017

19. ConocoPhillips
P.O. Box 2197
Houston, TX 77252-2197
20. Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
21. Dallas Zane Farrar
16946 Meadowlark
Conroe, TX 77385
22. Dana Martin
913 W. Polk Avenue
Lovington, NM 88260
23. Dannie Marie Peebles
4496 Crestwood Circle
Concord, CA 94521
24. Darla Berton
10961 Desert Lawn Drive
Calimesa, CA 92320
25. David Carter
4289 Oakman Street South
Salem, OR 97302
26. David Harold Bozell
6431 SW 108th Place
Ocala, FL 34476
27. David J. Field
1916 Aberdeen
Lubbock, TX 79407
28. Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399
29. Debra Canoy
20 Ash Street
Mount Vernon, OH 43050
30. Delanna K. Harding
21591 E. Mewes Road
Queen Creek, AZ 85242
31. Dixie Turnquist
P.O. Box 667
Yucaipa, CA 92399
32. Don E. McInturff, as Trustee of the
Russell N. McInturff Trust
P.O. Box 6618
Lubbock, TX 79493
33. Don E. McInturff, as Trustee of the
Terry G. McInturff Trust
P.O. Box 6618
Lubbock, TX 79493
34. Donald Lasaro
c/o Betty Jo Kringel
10971 Arlington Avenue
Riverside, CA 92505
35. Dylan Thomas Fisher
c/o Sharon Darlene Jordan
18337 Hawthorne Avenue
Bloomington, CA 92316
36. Ernest L. Thompson
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
37. Exel Barrows
107 Rose Street
Campbellsville, KY 42718
38. Faraway Farms, Ltd.
9304 York Avenue
Lubbock, TX 79424
39. Field Minerals, LLC
P.O. Box 1105
Lovington, NM 88260
40. Gary D. Wilson
P.O. Box 6312
Moore, OK 73153
41. Geraldine Hisel, as Trustee of the Hisel
Family Revocable Living Trust, dated
May 22, 1997
621 Anthony Drive
Clovis, NM 88101
42. Gordon W. Leach
517 Hopper Drive
Corpus Christi, TX 78411

Decker 1-H Offset List
Lea County, New Mexico
April 26, 2017

43. Greg Bowen
4530 Hillside Avenue
Norco, CA 92860
44. Guy Bowen
6850 Sandy Lane
Riverside, CA 92505
45. Heather Droze
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
46. Holly Mills
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
47. Jacco, Inc.
c/o Ellen E. Jackson-Swann
4800 Chesapeake St NW
Washington, DC 20016
48. Janet L. Dishner
5388 Chieftain Circle
Alexandria, VA 22312
49. Jessica Holladay
6302 North Davis Lane
Hobbs, NM 88242
50. Jo Nell Ingram
816 Avenue C
Fort Sumner, NM 88119
51. Karen McKinley
11035 Huron Street, Unit 807
Northglenn, CO 80234
52. Known and unknown heirs of Ava
Vonceile Houston Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
53. Known and unknown heirs of Becky
Anker, deceased
c/o Countee Troupe
928 Clarmount Street Northwest
Salem, OR 97304
54. Known and unknown heirs of Bertha
Fletcher Houston
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310
55. Known and unknown heirs of Billy Joe
Barnett
c/o Veta Marie Hood
2384 State Street
Salem, OR 97301
56. Known and unknown heirs of Charles D.
Fisher, deceased
c/o Mary Jayne Fisher
403 South 3rd Street
Lovington, NM 88260
57. Known and unknown heirs of Claudia
Lee Barr
c/o Randy Barr
207 2nd Street
Mobeetie, TX 79061
58. Known and unknown heirs of Cleeta K.
Sterling, deceased
c/o Karen McKinley
11035 Huron Street, Unit 807
Northglenn, CO 80234
59. Known and unknown heirs of E. Jackson
Smith, deceased
c/o Joanne Smith
197 La Pasada Circle East
Ponte Vedra Beach, FL 32082
60. Known and unknown heirs of Eddie
Maurice Knight
c/o Cheryl Lynn Murphy
280 Sherman Peak Drive
Bakersfield, CA 93308
61. Known and unknown heirs of Eloise
McCain Garrison, deceased
c/o Halcom J. Garrison, Jr.
10941 Mays Road
Bethany, LA 71007

Decker 1-H Offset List
Lea County, New Mexico
April 26, 2017

- | | |
|---|---|
| 62. Known and unknown heirs of J. Dan Powell
c/o Matthew B. Powell
720 Centauri Drive
Grand Junction, CO 81506 | 70. Known and unknown heirs of Monaree Houston Bozell
c/o Paula Bozell Knight
4741 NE County Road 660
Arcadia, FL 34266 |
| 63. Known and unknown heirs of John R. Houston
c/o Betty Jo Kringel
10971 Arlington Avenue
Riverside, CA 92505 | 71. Known and unknown heirs of Narisse Cotton Sebelius
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399 |
| 64. Known and unknown heirs of John Wayne Houston, deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735 | 72. Known and unknown heirs of Nola Yvonne Leach, deceased
c/o Gordon W. Leach
517 Hopper Drive
Corpus Christi, TX 78411 |
| 65. Known and unknown heirs of Karen Briley, deceased
c/o B.J. Briley
P.O. Box 104
Malaga, NM 88263 | 73. Known and unknown heirs of Ola Lorena Houston, deceased
c/o Ruben Dale Houston
1739 W. 44th Street
Fort Stockton, TX 79735 |
| 66. Known and unknown heirs of Kurt Mitchell Sebelius
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399 | 74. Known and unknown heirs of Omalee Houston Wilson
c/o Exel Barrows
107 Rose Street
Campbellsville, KY 42718 |
| 67. Known and unknown heirs of Leon Powell, deceased
c/o Larry D. Norman
1562 Chevelle Drive
Baton Rouge, LA 70806 | 75. Known and unknown heirs of Peggy Ruth Bowen
c/o Greg Bowen
4530 Hillside Avenue
Norco, CA 92860 |
| 68. Known and unknown heirs of Linda Jean VanScoik
c/o David Carter
4289 Oakman Street South
Salem, OR 97302 | 76. Known and unknown heirs of Robert E. Daughtry and Blaine J. Daughtry, both deceased
c/o James R. Daughtry
1200 S. Courtenay Parkway
Merritt Island, FL 32952 |
| 69. Known and unknown heirs of Lorene Powell Farrar, deceased
c/o Dallas Zane Farrar
16946 Meadowlark
Conroe, TX 77385 | 77. Known and unknown heirs of Thomas J. Fisher, deceased
c/o Sharon Darlene Jordan
18337 Hawthorne Avenue
Bloomington, CA 92316 |

Decker 1-H Offset List
Lea County, New Mexico
April 26, 2017

- | | |
|---|--|
| 78. Known and unknown heirs of Trela
Valesta Cannon, deceased
c/o Mac A. Douglas
507 E. Broadway Street
Tatum, NM 88267 | 89. Mac A. Douglas
507 E. Broadway Street
Tatum, NM 88267 |
| 79. Known and unknown heirs of Valeta
Louise Houston Cotton
c/o Dawn Harrington
34936 Persimmon Ave.
Yucaipa, CA 92399 | 90. Marcia Dianne Knight
c/o Debra Canoy
20 Ash Street
Mount Vernon, OH 43050 |
| 80. Known and unknown heirs of Willie
Juanita Houston Barron
c/o Sammie Myrl Hoffman
8175 Walnut Knoll Cove
Cordova, TN 38018 | 91. Megan Smith Field
5901 Sarah Court
Austin, TX 78757 |
| 81. Known and unkown heirs of Virginia
Elizabeth Thompson Burke
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 | 92. Michael Carter
c/o David Carter
4289 Oakman Street South
Salem, OR 97302 |
| 82. Kristin Briley
3607 County Road 1200
Lubbock, TX 79407 | 93. Michael E. Burke
c/o Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 |
| 83. Lee Chesire Morley
1403 North Avalon
West Memphis, AR 72301 | 94. Nancy Houston
3625 Somerdale Street
Corona, CA 92879 |
| 84. Leigh Montoya
816 Avenue C
Fort Sumner, NM 88119 | 95. Norman Cotton
31945 Cortez Court
Murrieta, CA 92563 |
| 85. Leslie Barr
913 W. Polk Avenue
Lovington, NM | 96. Pamela B. Robertson
10821 Santa Clara Drive
Fairfax, VA 22030 |
| 86. Lila Sue Peebles
98 Clove Court
Oakley, CA 94561 | 97. Pamela Sue Cannon
3652 Plantation Grove
Colorado Springs, CO 80920 |
| 87. Linda Gonzales
20 Ash Street
Mount Vernon, OH 43050 | 98. Parachute Energy, Ltd.
1916 Aberdeen
Lubbock, TX 79407 |
| 88. Lisa Darlene Fisher
c/o Sharon Darlene Jordan
18337 Hawthorne Avenue
Bloomington, CA 92316 | 99. Patricia A. Hull
6113 Leewood Drive
Alexandria, VA 22310 |
| | 100. Patsy Olivia Fulton
6115 W. 123rd Street S
Oktaha, OK 74450 |

Decker 1-H Offset List
Lea County, New Mexico
April 26, 2017

125. ZPZ Delaware I, LLC
c/o Apache Coporation
2000 Post Oak Boulevard, Suite 100
Houston, TX 77056

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☐ 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: Ana Riddel Williamson, Trustee of the Ana Riddel Trust, f/b/o Stephen and Margaret Williamson 4702 16th Street Lubbock, TX 79416 [Redacted] 9590 9402 2703 6351 7664 99 2. Article Number (Transfer from service label) 7017 0660 0000 6477 9527	A. Signature ☐ Agent ☒ Addressee 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 [Signature] 3. Service Type <table style="width: 100%;"> <tr> <td style="vertical-align: top;"> ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail® ☐ Restricted Delivery </td> <td style="vertical-align: top;"> ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery </td> </tr> </table>	☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail® ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
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☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail® ☐ Restricted Delivery	☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery		

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☐ Adult Signature	☐ Priority Mail Express®																
☐ Adult Signature Restricted Delivery	☐ Registered Mail™																
☒ Certified Mail®	☐ Registered Mail Restricted Delivery																
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☐ Restricted Delivery																	

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

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. 1. Article Addressed to: Austin Trust Company and Cynthia Lynn Anderson, Co-Trustees of the Oberholtzer Family Trust, f/b/o Cynthia Lynn Anderson 336 South Congress, Suite 100 Austin, TX 78704 9590 9402 2703 6351 7666 97 2. Article Number (Transfer from service label) 7016 2070 0000 3697 2206	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Restricted Delivery</td> <td></td> </tr> </table>	☐ 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	☐ Insured Mail		☐ Restricted Delivery	
☐ 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																
☐ Insured Mail																	
☐ Restricted Delivery																	

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

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☒ 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: Austin Trust Company and Cynthia Lynn Anderson, Co-Trustees of the Oberholtzer Family Trust, f/b/o Sharon K. Compton 336 South Congress, Suite 100 Austin, TX 78704 9590 9402 2703 6351 7667 03 2. Article Number (Transfer from service label) 7016 2070 0000 3697 2213	A. Signature ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Restricted Delivery</td> <td></td> </tr> </table>	☐ 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	☐ Insured Mail		☐ Restricted Delivery	
☐ 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																
☐ Insured Mail																	
☐ Restricted Delivery																	

PS Form 3811, July 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:

B. Davis Gentry
 9304 York Avenue
 Lubbock, TX 79424

9590 9402 2703 6351 7665 05

2. Article Number (Transfer from service label)

7017 0660 0000 6477 9534

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

COMPLETE THIS SECTION ON DELIVERY

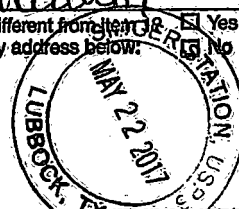
A. Signature

[Signature]
 B. Received by (Printed Name)
Kristen Houtz

☐ 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

☐ Priority Mail Express®

- ☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Mail
☐ Mail Restricted Delivery (0)

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:

BP America
 501 Westlake Park Boulevard
 Houston, TX 77079

9590 9402 2703 6351 7665 12

2. Article Number (Transfer from service label)

7016 2070 0000 3697 1933

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
 B. Received by (Printed Name)
D. Torres

☐ 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

☐ Priority Mail Express®

- ☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Mail
☐ Mail Restricted Delivery (over 500)

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:

ConocoPhillips
 P.O. Box 2197
 Houston, TX 77252-2197

9590 9402 2691 6351 9050 23

2. Article Number (Transfer from service label)

7016 2070 0000 3697 1964

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
 B. Received by (Printed Name)
R. Jenkins

☐ 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

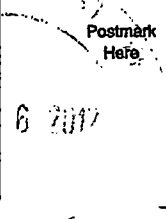
☐ Priority Mail Express®

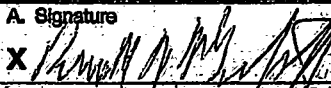
- ☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

☐ Mail
☐ Mail Restricted Delivery (0)

Domestic Return Receipt

7016 2070 0000 3697 1971

U.S. Postal Service CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee \$ _____	Postmark Here 
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 \$ _____	
Total Postage and Fees \$ _____	
Sent To Dallas Zane Farrar Street and Apt. No., or P.O. Box 16946 Meadowlark City, State, ZIP+4® Conroe, TX 77385	
PS Form 3800, April 2015 PSN 7530-02-000-90-7 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: Don E. McInturff, as Trustee of the Russell N. McInturff Trust P.O. Box 6618 Lubbock, TX 79493 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0042	COMPLETE THIS SECTION ON DELIVERY A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ Date of Delivery MAY 23 2017 D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below: _____ 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
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PS Form 3811, July 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: Don E. McInturff, as Trustee of the Terry G. McInturff Trust P.O. Box 6618 Lubbock, TX 79493 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0127	COMPLETE THIS SECTION ON DELIVERY A. Signature X  ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ Date of Delivery MAY 23 2017 D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below: _____ 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
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PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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☐ 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: Donald Lasaro c/o Betty Jo Kringel 10971 Arlington Avenue Riverside, CA 92505 9590 9402 2691 6351 9050 54 2. Article Number (Transfer from service label) 7016 2070 0000 3697 1995	A. Signature <i>X Betty Jo Kringel</i> ☐ 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 <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>	☐ 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
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☐ Adult Signature Restricted Delivery	☐ Registered Mail™												
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PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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☐ 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: Dylan Thomas Fisher c/o Sharon Darlene Jordan 18337 Hawthorne Avenue Bloomington, CA 92316 9590 9402 2691 6351 9050 61 2. Article Number (Transfer from service label) 7016 2070 0000 3697 2008	A. Signature <i>X Sharon D. Jordan</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Sharon D. Jordan</i> <i>5-22-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>	☐ 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
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☐ 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												

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

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☐ 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: Faraway Farms, Ltd. 9304 York Avenue Lubbock, TX 79424 9590 9402 2691 6351 9050 92 2. Article Number (Transfer from service label) 7016 2070 0000 3697 2039	A. Signature <i>X Faraway Farms, Ltd.</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery <i>Faraway Farms, Ltd.</i> <i>MAY 22 2017</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type <table style="width: 100%;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☐ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> </table>	☐ 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
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☐ Adult Signature Restricted Delivery	☐ Registered Mail™												
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☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery												

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

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- ☐ 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:

Geraldine Hisel, as Trustee of the
 Hisel Family Revocable Living Trust
 621 Anthony Drive
 Clovis, NM 88101

9590 9402 2691 6351 9051 15

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2053

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Geraldine Hisel

☐ Agent

☒ Addressee

B. Received by (Printed Name)

G Hisel

C. Date of Delivery

5-19-17

- 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
☐ Insured Mail

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

all Restricted Delivery

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:

Heather Droze
 c/o Countee Troupe
 928 Clairmont Street Northwest
 Salem, OR 97304

9590 9402 2691 6351 9051 08

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2046

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Heather Droze

☐ Agent

☒ Addressee

B. Received by (Printed Name)

HEATHER DROZE

C. Date of Delivery

5-22-17

- 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
☐ Insured Mail

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

all Restricted Delivery

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Jo Nell Ingram
 816 Avenue C
 Fort Sumner, NM 88119

9590 9402 2691 6351 9051 39

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2077

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Sharon Lewin

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Sharon Lewin

C. Date of Delivery

5/23/17

- 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
☐ Insured Mail

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

all Restricted Delivery

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:

Karen McKinley
 11035 Huron Street, Unit 807
 Northglenn, CO 80234

9590 9402 2691 6351 9051 46

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2084

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Karen McKinley* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/19/17

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
☐ Insured Mail ☐ all Restricted Delivery

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:

Known and unknown heirs of Cleeta K.
 Sterling
 c/o Karen McKinley
 11035 Huron Street, Unit 807
 Northglenn, CO 80234

9590 9402 2691 6351 9050 16

2. Article Number (Transfer from service label)

7016 2070 0000 3697 1957

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Karen McKinley* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/19/17

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
☐ Insured Mail ☐ all Restricted Delivery

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:

Known and unknown heirs of E. Jackson
 Smith
 c/o Joanne Smith
 197 La Pasada Circle East
 Ponte Vedra Beach, FL 32082

9590 9402 2691 6351 9050 78

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2015

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Joanne R. Smith* ☐ Agent ☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/23/17

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
☐ Insured Mail ☐ all Restricted Delivery

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:

Known and unknown heirs of Charles D. Fisher
 c/o Mary Jayne Fisher
 403 South 3rd Street
 Lovington, NM 88260

9590 9402 2691 6351 9025 03

2. Article Number (Transfer from service label)

7016 2070 0000 3697 1940

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Mary Jayne Fisher

- ☐ 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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Delivery Restricted Delivery
☐ Signature Confirmation Restricted Delivery (over \$500)

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

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:

Known and unknown heirs of Eloise McCain Garrison
 c/o Hiram J. Garrison, Jr.
 1094 Mays Road
 Betha, LA 71007

9590 9402 2691 6351 9050 85

7016 2070 0000 3697 2022

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Hiram J. Garrison

- ☐ 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

- ☐ 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: 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:

Known and unknown heirs of J. Dan Powell
 c/o Matthew B. Powell
 720 Centauri Drive
 Grand Junction, CO 81506

9590 9402 2691 6351 9051 22

7016 2070 0000 3697 2060

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Matthew Powell

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

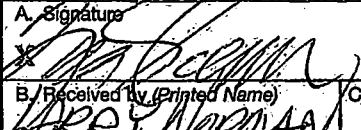
C. Date of Delivery

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

3. Service Type

- ☐ 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: 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.	A. Signature  ☐ Agent ☒ Addressee B. Received by (Printed Name) LARRY D. NORMAN C. Date of Delivery 5/20/17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Known and unknown heirs of Leon Powell c/o Larry D. Norman 1562 Chevelle Drive Baton Rouge, LA 70806 9590 9402 2691 6351 8750 29	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
2. Article Number (Transfer from service label) 7016 2070 0000 3697 2114	

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

Domestic Return Receipt

7016 2070 0000 3697 2145

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

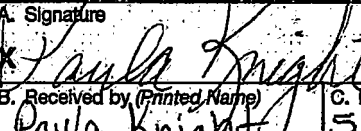
Domestic Mail Only

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

OFFICIAL USE

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	
\$	
Total Postage and Fees	
\$	
Sent To	
Lorene Farrar Dallas, TX 75385	
Street and Apt. No., or PO Box No. 6946 Meadowlark	
City, State, ZIP+4® Monroe, TX 77385	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse 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.	A. Signature  ☐ Agent ☒ Addressee B. Received by (Printed Name) Paula Knight C. Date of Delivery 5-19-17 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Known and unknown heirs of Monaree Houston Bozell c/o Paula Bozell Knight 4741 NE County Road 660 Arcadia, FL 34266 9590 9402 2691 6351 8750 29	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
2. Article Number (Transfer from service label) 7016 2070 0000 3697 2152	

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

Domestic Return Receipt

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.		A. Signature ☒ <i>Gordon W. Leach</i>	
1. Article Addressed to: Known and unknown heirs of Nola Yvonne Leach c/o Gordon W. Leach 517 Hopper Drive Corpus Christi, TX 78411		☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Gordon W. Leach</i> C. Date of Delivery <i>5/10</i>	
2. Article Number (Transfer from service label) 9590 9402 2691 6351 8750 74		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
7016 2070 0000 3697 2169		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	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

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

OFFICIAL USE

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 \$
 Total Postage and Fees \$

Sent To
 Street and Apt. No., or PO Box No. *James R. Daughtry, 3*
1200 S. Courtenay Parkway
 City, State, ZIP+4® *Merritt Island, FL 32952*

PS Form 3800, April 2013 PSN 7530-02-000-9047 See Reverse 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.		A. Signature ☒ <i>Sharon D. Jordan</i>	
1. Article Addressed to: Known and unknown heirs of Thomas J. Fisher c/o Sharon Darlene Jordan 18337 Hawthorne Avenue Bloomington, CA 92316		☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Sharon D. Jordan</i> C. Date of Delivery <i>5-22-17</i>	
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7667 89		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
7016 2070 0000 3697 0134		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	
PS Form 3811, July 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:

Lee Chesire Morley
 1403 North Avalon
 West Memphis, AR 72301

9590 9402 2691 6351 9051 53

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2091

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Karen Morley*

- ☐ 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

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Registered Mail Restricted Delivery

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

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:

Leigh Montoya
 816 Avenue C
 Fort Sumner, NM 88119

9590 9402 2691 6351 8750 12

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2107

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sharon Irwin*

- ☐ 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

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

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

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:

Lisa Darlene Fisher
 c/o Sharon Darlene Jordan
 18337 Hawthorne Avenue
 Bloomington, CA 92316

9590 9402 2691 6351 8750 36

2. Article Number (Transfer from service label)

7016 2070 0000 3697 2121

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sharon Jordan*

- ☐ Agent
☒ Addressee

B. Received by (Printed Name)

Sharon D. Jordan

C. Date of Delivery

5-22-17

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
☐ Registered Mail Restricted Delivery

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

Domestic Return Receipt

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. 1. Article Addressed to: Ralph Riddel, Jr. 658 County Road 452 Rotan, TX 79546 9590 9402 2691 6351 8750 43 2. Article Number (Transfer from service label) 7016 2070 0000 3697 2138	A. Signature X <i>Ralph Riddel</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Bodie Riddel</i> C. Date of Delivery <i>3-19-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No																
3. Service Type <table style="width: 100%; font-size: small;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery</td> <td></td> </tr> </table>		☐ 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	☐ Insured Mail		☐ Insured Mail Restricted Delivery	
☐ 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																
☐ Insured Mail																	
☐ Insured Mail Restricted Delivery																	

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

Domestic Return Receipt

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. 1. Article Addressed to: Riddel Land & Cattle, LP P.O. Box 874 Aspermont, TX 79502 9590 9402 2703 6351 7667 10 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0011	A. Signature X <i>Wayland Gray</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>WAYLAND GRAY</i> C. Date of Delivery <i>3-17-17</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No																
3. Service Type <table style="width: 100%; font-size: small;"> <tr> <td>☐ Adult Signature</td> <td>☐ Priority Mail Express®</td> </tr> <tr> <td>☐ Adult Signature Restricted Delivery</td> <td>☐ Registered Mail™</td> </tr> <tr> <td>☒ Certified Mail®</td> <td>☐ Registered Mail Restricted Delivery</td> </tr> <tr> <td>☐ Certified Mail Restricted Delivery</td> <td>☐ Return Receipt for Merchandise</td> </tr> <tr> <td>☐ Collect on Delivery</td> <td>☐ Signature Confirmation™</td> </tr> <tr> <td>☐ Collect on Delivery Restricted Delivery</td> <td>☐ Signature Confirmation Restricted Delivery</td> </tr> <tr> <td>☐ Insured Mail</td> <td></td> </tr> <tr> <td>☐ Insured Mail Restricted Delivery</td> <td></td> </tr> </table>		☐ 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	☐ Insured Mail		☐ Insured Mail Restricted Delivery	
☐ 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																
☐ Insured Mail																	
☐ Insured Mail Restricted Delivery																	

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

Domestic Return Receipt

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

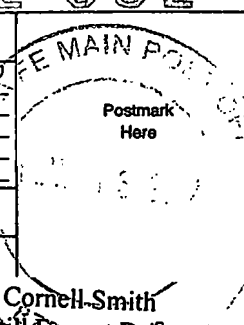
OFFICIAL USE

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	
\$	
Total Postage and Fees	
\$	
Sent To	
Riddel Minerals Management, LLC	
7911 Meadowbriar	
Houston, TX 77063	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7016 2070 0000 3697 0035

U.S. Postal Service CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
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 \$ _____	
Total Postage and Fees \$ _____	
Sent To Robert Cornell Smith	
Street and Apt. No., or PO Box No. 5908 Still Forest Drive	
City, State, ZIP+4® Dallas, TX 75252	
PS Form 3800, 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: Sharon Darlene Jordan 18337 Hawthorne Avenue Bloomington, CA 92316 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0103	COMPLETE THIS SECTION ON DELIVERY A. Signature ☒ Sharon D. Jordan ☐ Agent ☐ Addressee B. Received by (Printed Name) Sharon D. Jordan C. Date of Delivery 5-22-17 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 ☐ Insured Mail ☐ Insured Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
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PS Form 3811, July 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: Sharon Sue Irwin 816 Avenue C Fort Sumner, NM 88119 2. Article Number (Transfer from service label) 7016 2070 0000 3697 0110	COMPLETE THIS SECTION ON DELIVERY A. Signature ☒ Sharon Irwin ☐ Agent ☐ Addressee B. Received by (Printed Name) Sharon Irwin C. Date of Delivery 5/23/17 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 ☐ Insured Mail ☐ Insured Mail Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
--	---

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

Domestic Return Receipt

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.	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) Kenneth Hollaway C. Date of Delivery MAY 22 2017 D. Is delivery address different from item label? ☐ Yes ☒ No If YES, enter delivery address below:
1. Article Addressed to: The Midland National Bank of Midland, TX, Trustee for Bruce Gentry, Jr. 9304 York Avenue Lubbock, TX 79424	3. Service Type ☒ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Restricted Delivery ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery
2. Article Number (Transfer from service label) 9590 9402 2703 6351 7668 02 7016 2070 0000 3697 0158	

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

Domestic Return Receipt

7016 2070 0000 3697 0158

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

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

OFFICIAL USE

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	
\$	
Total Postage and Fees	
\$	
Sent To	
2PZ Delaware I, LLC	
Attn: Apache Corporation	
1000 Rosedale Blvd., Ste. 100	
Houston, TX 77056	
Street and Apt. No., or PO Box No.	
City, State, ZIP+4®	

Postmark Here

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

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 1 issue(s).

Beginning with the issue dated
May 19, 2017
and ending with the issue dated
May 19, 2017.


Publisher

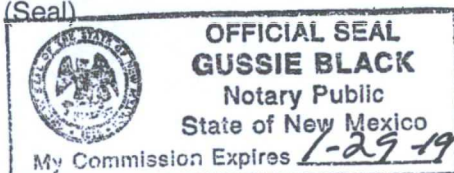
Sworn and subscribed to before me this
19th day of May 2017.


Business Manager

My commission expires

January 29, 2019

(Seal)



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL NOTICE
May 19, 2017

PUBLICATION NOTICE

This is to notify all interested parties, including 07 Ranch Minerals, LP, Aletha Wilson, as Trustee of the Glenn & Aletha Wilson Revocable Trust, Ana Riddel Williamson, Trustee of the Ana Riddel Trust, f/b/o Stephen and Margaret Williamson, Austin Trust Company and Cynthia Lynn Anderson, Co-Trustees of the Oberholtzer Family Trust, f/b/o Cynthia Lynn Anderson, the Oberholtzer Family Trust, f/b/o Claudia Sue Means, the Oberholtzer Family Trust, f/b/o Sharon K. Compton, the Oberholtzer Family Trust, f/b/o Carol Ann Cantrell, and the Oberholtzer Family Trust, f/b/o Carl Edward Oberholtzer, Jr., B. Davis Gentry, B.J. Briley, Bertha Jo Carriere, f/k/a Bertha Jo Malone, Betty Jo Kringel, Billy Earl Barron, BP America, Cheryl Lynn Murphy, a/k/a Cheryl Lynn Hendershot, City Bank as Successor Trustee of the Anita Field Irrevocable Trust, Clint Field Burrus, Clinton Otha Houston, Conoco Phillips, Countee Troupe, Dallas Zane Farrar, Dana Martin, Dannie Marie Peebles, Darla Berton, David Carter, David Harold Bozell, David J. Field, Dawn Harrington, Debra Canoy, Delanna K. Harding, Dixie Turnquist, Don E. McInturff, as Trustee of the Russell N. McInturff Trust and the Terry G. McInturff Trust, Donald Lasaro, Dylan Thomas Fisher, Ernest L. Thompson, Exel Barrows, Faraway Farms, Ltd., Field Minerals, LLC, Gary D. Wilson, Geraldine Hise, as Trustee of the Hise Family Revocable Living Trust, Gordon W. Leach, Greg Bowen, Guy Bowen, Heather Droze, Holly Mills, Jacco, Inc., Janet L. Dishner, Jessica Holladay, Jo Nell Ingram, Karen McKinley, the heirs of Ava Vonceile Houston Knight, the heirs of Becky Anker, the heirs of Bertha Fletcher Houston, the heirs of Billy Joe Barnett, the heirs of Charles D. Fisher, the heirs of Claudia Lee Barr, the heirs of Cleeta K. Sterling, the heirs of E. Jackson Smith, the heirs of Eddie Maurice Knight, the heirs of Eloise McCain Garrison, the heirs of J. Dan Powell, the heirs of John R. Houston, the heirs of John Wayne Houston, the heirs of Karen Briley, the heirs of Kurt Mitchell Sebelius, the heirs of Leon Powell, the heirs of Linda Jean Van Scoik, the heirs of Lorene Powell Farrar, the heirs of Monaree Houston Bozell, the heirs of Narisse Cotton Sebelius, the heirs of Nola Yvonne Leach, the heirs of Ola Lorena Houston, the heirs of Omalee Houston Wilson, the heirs of Peggy Ruth Bowen, the heirs of Robert E. Daughtry and Blaine J. Daughtry, the heirs of Thomas J. Fisher, the heirs of Trela Valesta Cannon, the heirs of Valeta Louise Houston Cotton, the heirs of Willie Juanita Houston Barron, the heirs of Virginia Elizabeth Thompson Burke, Kristin Briley, Lee Chesire Morley, Leigh Montoya, Leslie Barr, Lila Sue Peebles, Linda Gonzales, Lisa Darlene Fisher, Mac A. Douglas, Marcia Dianne Knight, Megan Smith Field, Michael Carter, Michael E. Burke, Nancy Houston, Norman Cotton, Pamela B. Robertson, Pamela Sue Cannon, Parachute Energy, Ltd., Patricia A. Hull, Patsy Olivia Fulton, Paula Bozell Knight, Ralph Riddel, Jr., Randy Barr, Riddel Land & Cattle, LP, Riddel Minerals Management, LLC, Robert Cornell Smith, Robin Leah Simpson, Ruben Dale Houston, Sally Ann Burrus Doherty, Sammie Myrl Hoffman, Sarah K. Burrus, Sharon Bozell Jones, Sharon Darlene Jordan, Sharon Sue Irwin, Shawn Leah Cotton Govoni, Shawnell Carter, Shelia Olin, Shelley Knight, Sheri L. Beaty, Steven Barnett, The Midland National Bank of Midland, TX, Trustee for Bruce Gentry, Jr., Timothy A. Burke, Veta Marie Hood, Vonal Rue Spry, and ZPZ Delaware I, LLC, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Special Energy Corporation (Case No. 15712) at 8:15 a.m. on June 8, 2017 in Porter Hall at 1220 South St. Francis Drive, Santa Fe, New Mexico. Special Energy seeks an order (i) approving a 160-acre, non-standard spacing and proration unit in the W/2 W/2 of Section 20, Township 12 South, Range 38 East, Lea County, New Mexico, and (ii) pooling all uncommitted mineral interests in the San Andres formation. The project area is to be dedicated to the Decker #1-H well, which will be horizontally drilled from a surface location in Unit M of Section 17, Township 12 South, Range 38 East to a bottom hole location in Unit M of Section 20, Township 12 South, Range 38 East. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost, the designation of Special Energy as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The proposed project area is located approximately nine miles east of Tatum, New Mexico.

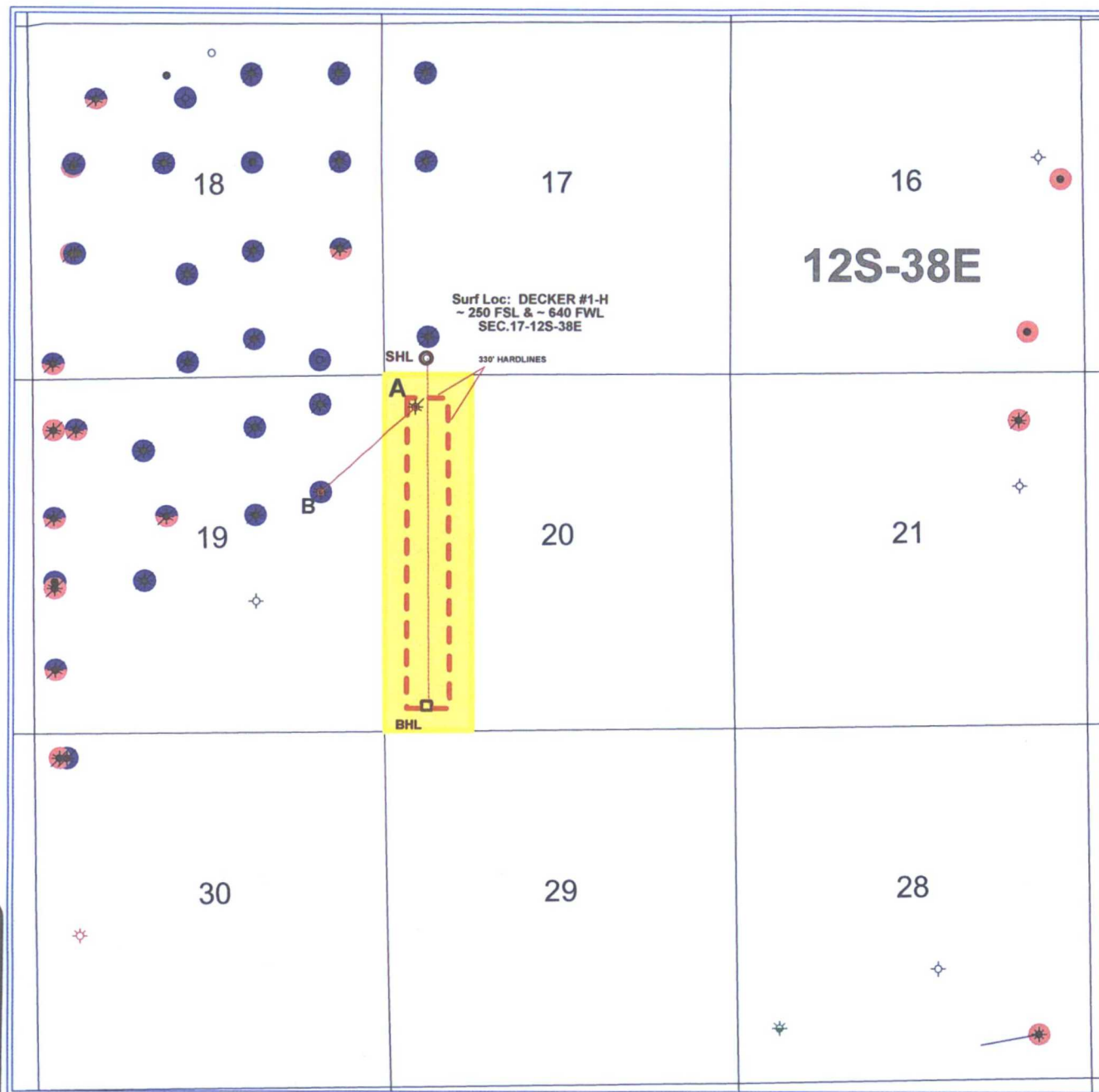
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HINKLE, HENSLEY, SHANOR & MARTIN, LLP
PO BOX 2068
SANTA FE, NM 87504

OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #5



LOCATION MAP

SAN ANDRES HORIZONTAL

OCD Case #

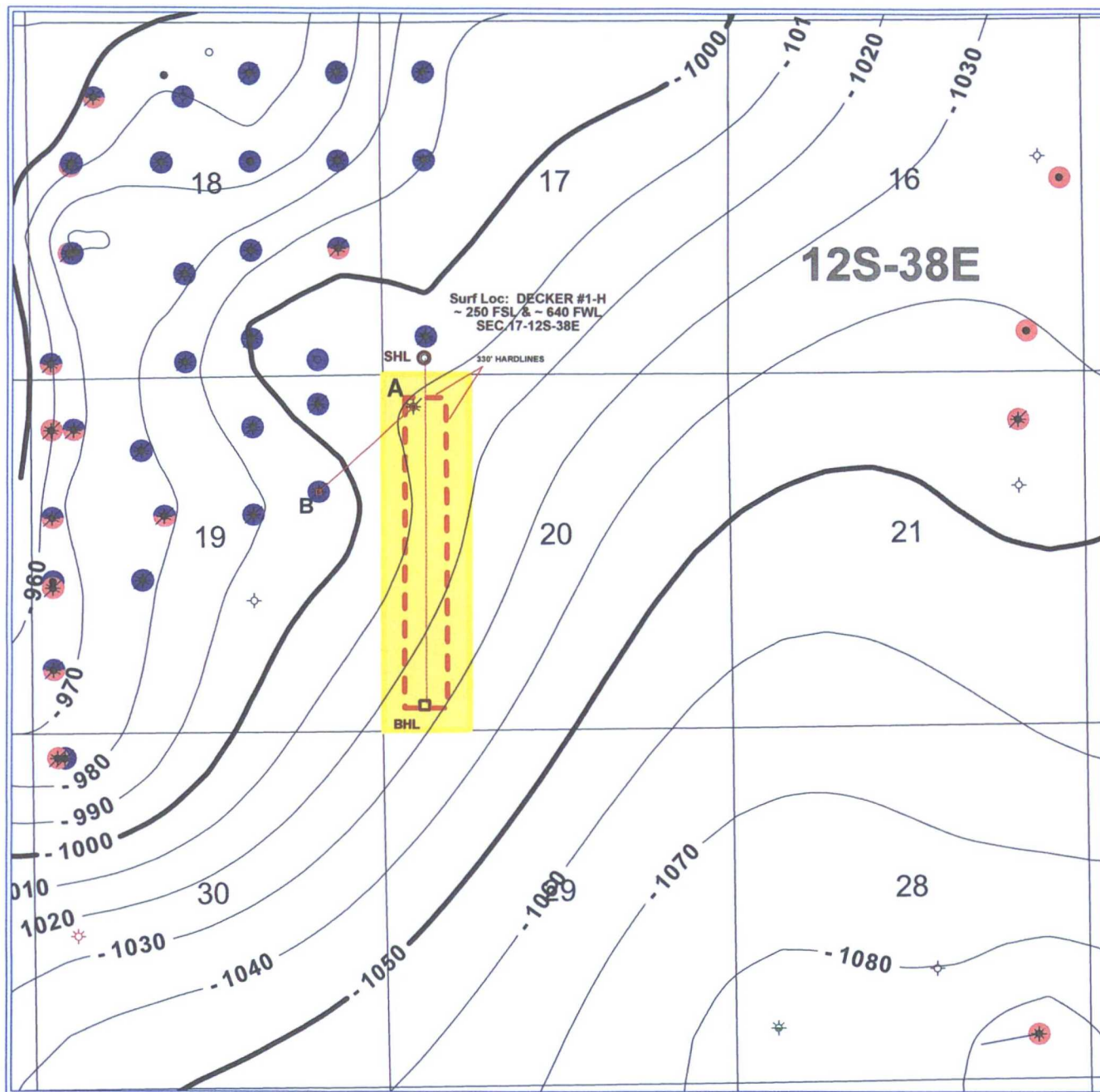
EXHIBIT #



ATTRIBUTE MAP



OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #7



SAN ANDRES P1 MARKER

STRUCTURE MAP

CI=10'

OCD Case #

EXHIBIT #



ATTRIBUTE MAP

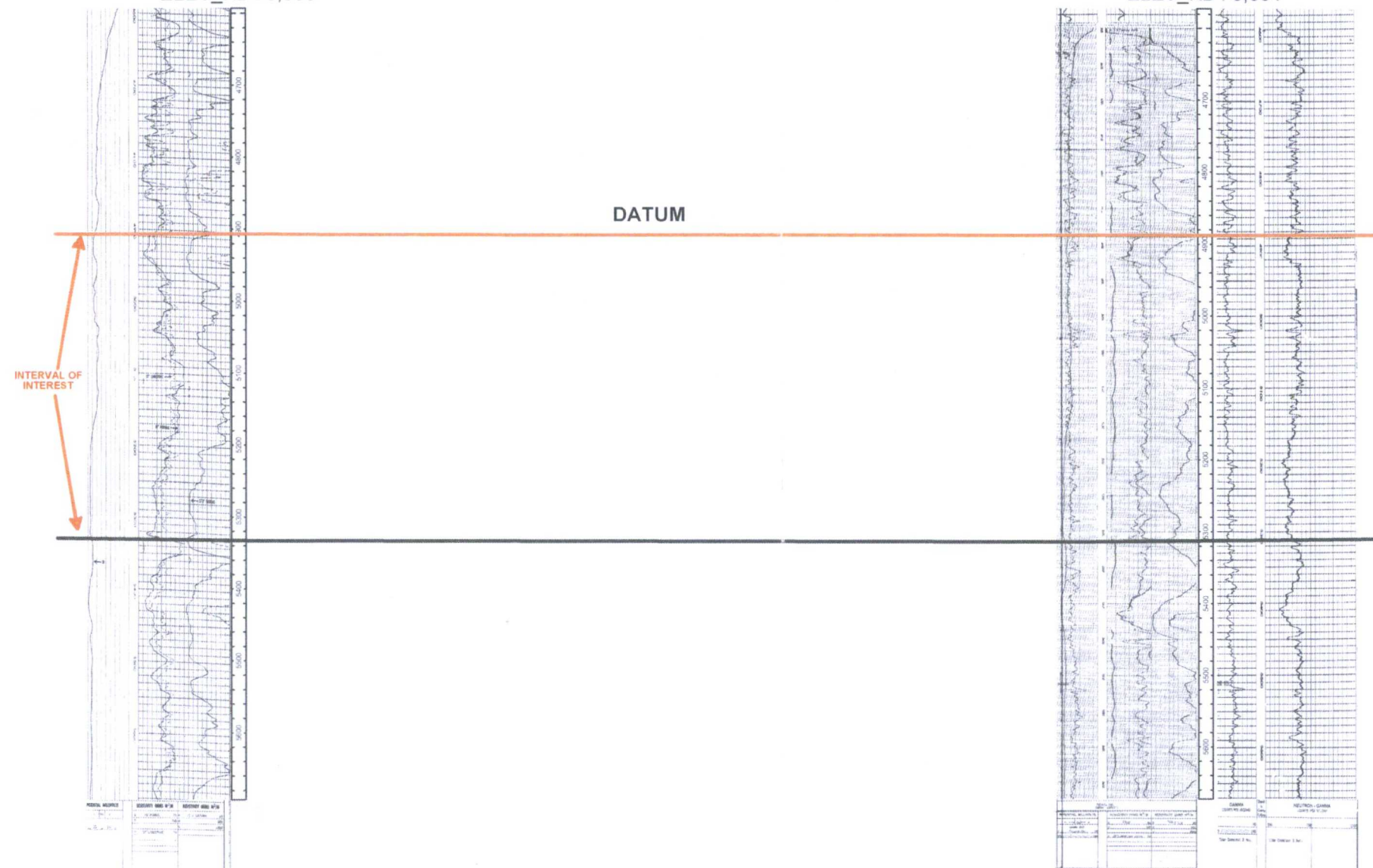


OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #8

Stratigraphic Cross Section A---B

ELK OIL COMPANY
L&M
A T12S R38E S20
467 FNL 467 FWL
WELL MBO : 51.4
TD : 12,018
ELEV_KB : 3,880

PAN AMERICAN CORPORATION
STATE A-19 RA/B
T12S R38E S19 **B**
1650 FNL 990 FEL
WELL MBO : 29.3
TD : 12,020
ELEV_KB : 3,881



DEVONIAN
WOLFCAMP



Stratigraphic Xsec A---B

San Andres Formation

OCD Case No. 15712
SPECIAL ENERGY CORP.
Decker #1-H
Exhibit #9