

COG OPERATING LLC

White Falcon 16 Federal Com #21H

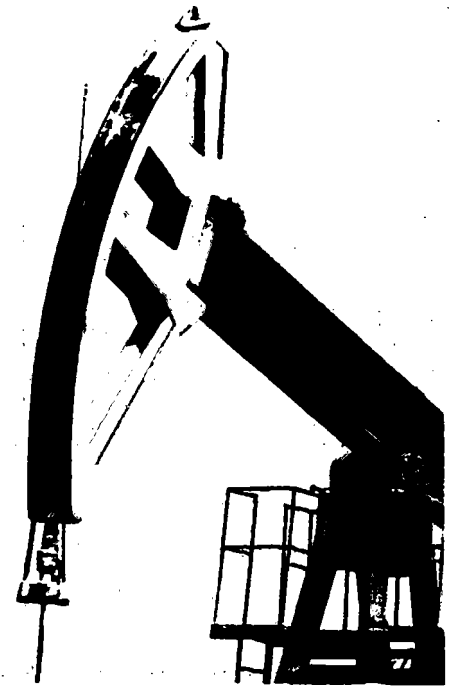
White Falcon 16 Federal Com #22H

White Falcon 16 State Com #23H

White Falcon 16 State Com #24H

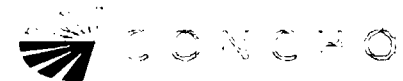
Section 16 & 21-T25S-R35E

Lea County, New Mexico



BEFORE THE OIL CONSERVATION DIVISION
EXAMINER HEARING AUGUST 31, 2017

CASE NOS. 15812 AND 15813



DISTRICT I
1022 N. FRENCH DR., HOBBS, NM 88240
Phone: (575) 393-0101 Fax: (575) 393-0700

DISTRICT II
811 S. FIRST ST., ARTESIA, NM 88210
Phone: (575) 740-1223 Fax: (575) 740-8750

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (505) 334-0170 Fax: (505) 334-0170

DISTRICT IV
1820 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 478-3480 Fax: (505) 478-3482

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

HOBBS OCD

AUG 21 2017

RECEIVED

Form C-102

Revised August 1, 2011

Submit one copy to appropriate

District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-43931	Pool Code 17980	Pool Name Dogie Draw; Wolfcamp
Property Code 319419	Property Name WHITE FALCON 16 FEDERAL COM	Well Number 21H
OCRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3246.4'

Surface Location

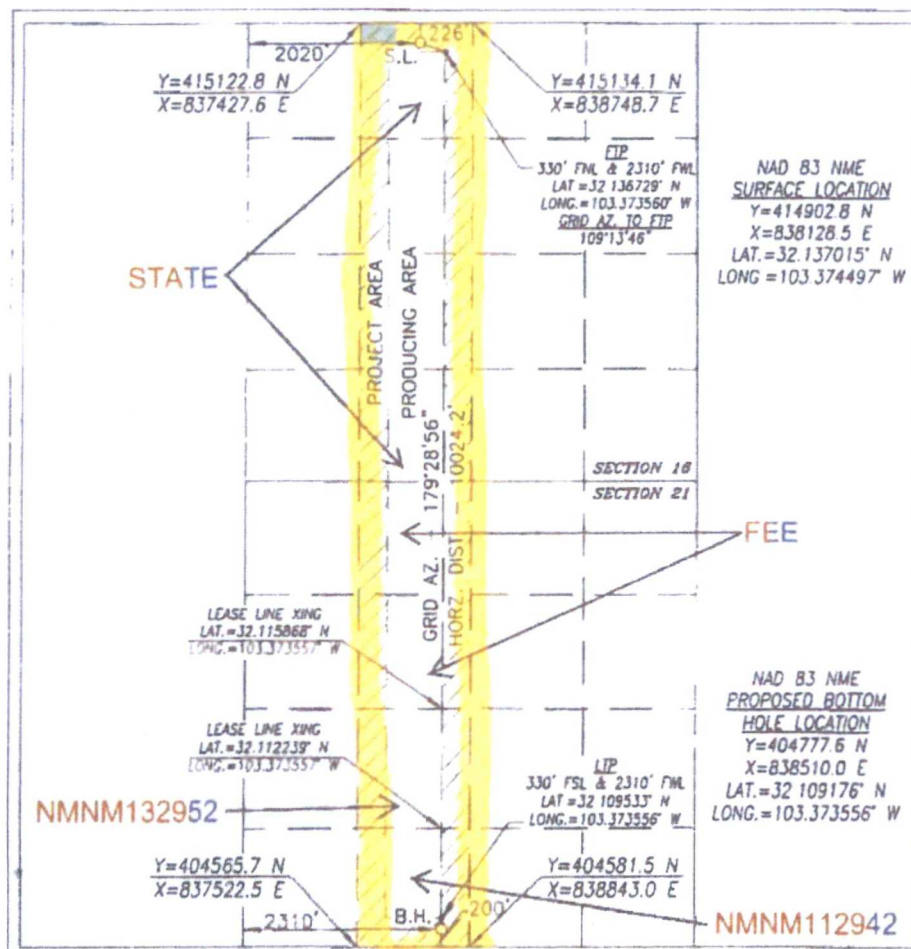
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	16	25-S	35-E		226	NORTH	2020	WEST	LEA

Bottom Hole Location if Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	21	25-S	35-E		200	SOUTH	2310	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320			

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



OPERATOR CERTIFICATION

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased 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 mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Mayte Reyes 3-27-17
Signature Date

Mayte Reyes

Printed Name

mreyes1@concho.com

E-mail 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.

FEBRUARY 6, 2017

Date of Survey

Signature & Seal of Professional Surveyor



Chad L. Harcrow 2/17/17
Certificate No. CHAD HARCROW 17777
W.O. # 17-272 DRAWN BY: JH

BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico

Exhibit No. 1

Submitted by: COG OPERATING LLC

Hearing Date: August 31, 2017

DISTRICT IV
1020 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 475-3480 Fax: (505) 475-3482

1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

AUG 21 2017

District Office

RECEIVED

☐ AMENDED REPORT

API Number 30-025-43932	Pool Code 17980	Pool Name Dogie Draw; Wolfcamp
Property Code 319419	Property Name WHITE FALCON 16 FEDERAL COM	Well Number 22H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3246.6'

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	16	25-S	35-E		226	NORTH	1940	WEST	LEA

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	21	25-S	35-E		200	SOUTH	1650	WEST	LEA

Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No.
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[illegible]

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased 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 mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature Mate Rose 32717 Date

Mayte Reyes

Printed Name _____

mreyes1@concho.com

E-mail Address

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.

FEBRUARY 6, 2017

Date of Survey

Signature & Seal of Professional Surveyor



2/16/17

Certificate No. CHAD HARCROW 17777
W.O. # 17-270 DRAWN BY: JH

BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico

Exhibit No. 2

Submitted by: **COG OPERATING, LLC**

Hearing Date: August 31, 2017

DISTRICT I
1000 N. FRANCIS DR., SUITE 200, ALBUQUERQUE, NM 87102
Phone: (505) 241-6179 Fax: (505) 241-6179

DISTRICT II
511 E. FIRST ST., ALBUQUERQUE, NM 87102
Phone: (505) 241-6179 Fax: (505) 241-6179

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (505) 241-6179 Fax: (505) 241-6179

DISTRICT IV
1000 E. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 476-3400 Fax: (505) 476-3400

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-43699	Pool Code 17980	Pool Name Dogie Draw; Wolfcamp
Property Code	Property Name WHITE FALCON 16 STATE COM	Well Number 23H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3257.4'

Surface Location

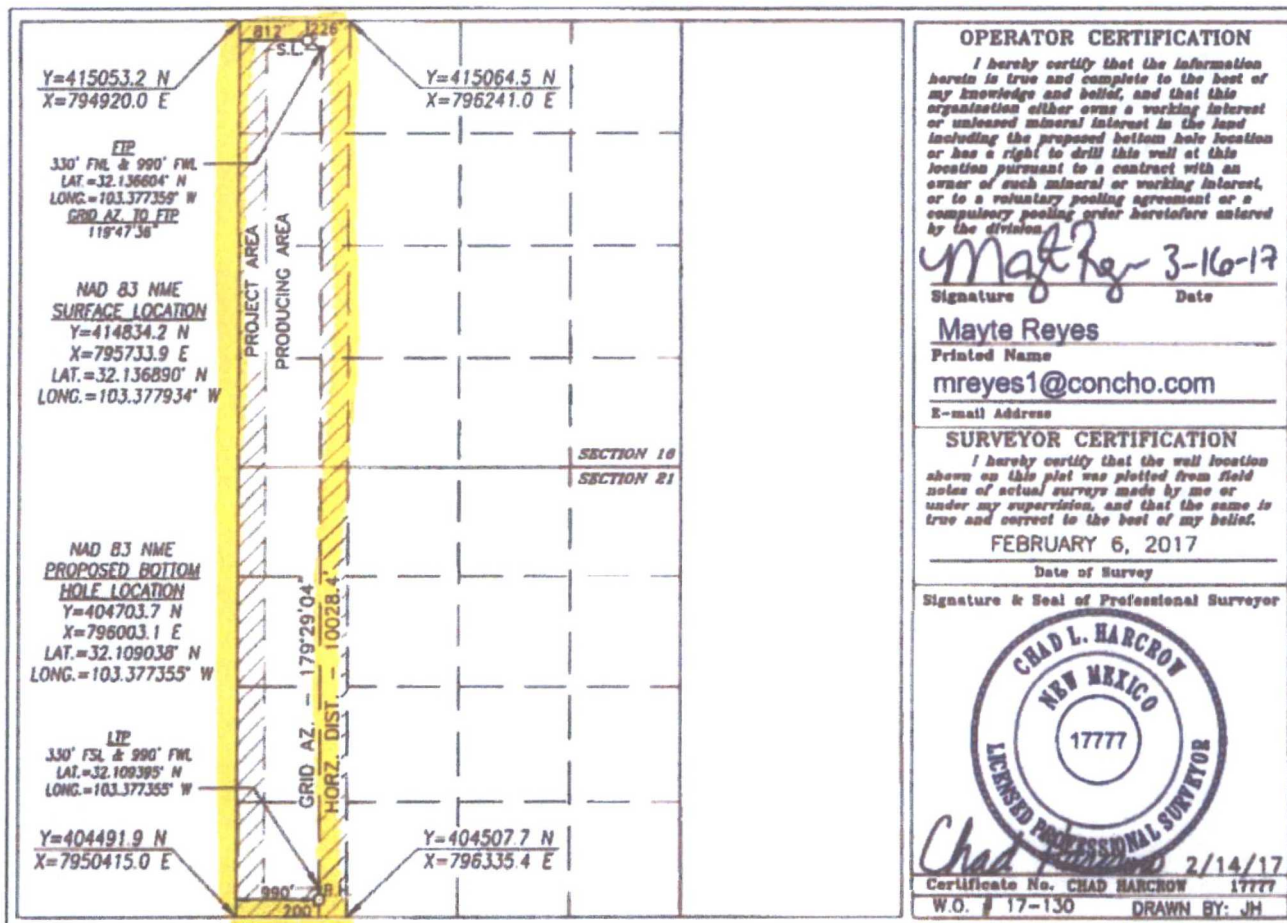
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	16	25-S	35-E		226	NORTH	812	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	21	25-S	35-E		200	SOUTH	990	WEST	LEA

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320			

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



BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 3
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

DISTRICT I
1800 N. FRENCH DR., MURKIN, NM 88540
Phone: (575) 355-0101 Fax: (575) 355-0720

DISTRICT II
511 E. FIRST ST., ARIZONA, NM 88210
Phone: (575) 748-1200 Fax: (575) 748-0720

DISTRICT III
1000 RIO BRAZOS RD., AZTEC, NM 87410
Phone: (505) 334-6170 Fax: (505) 334-6170

DISTRICT IV
1300 E. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 476-5400 Fax: (505) 476-5400

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

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

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-25 - 43700	Pool Code 17980	Pool Name Dogie Draw; Wolfcamp
Property Code	Property Name WHITE FALCON 16 STATE COM	Well Number 24H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3255.0'

Surface Location

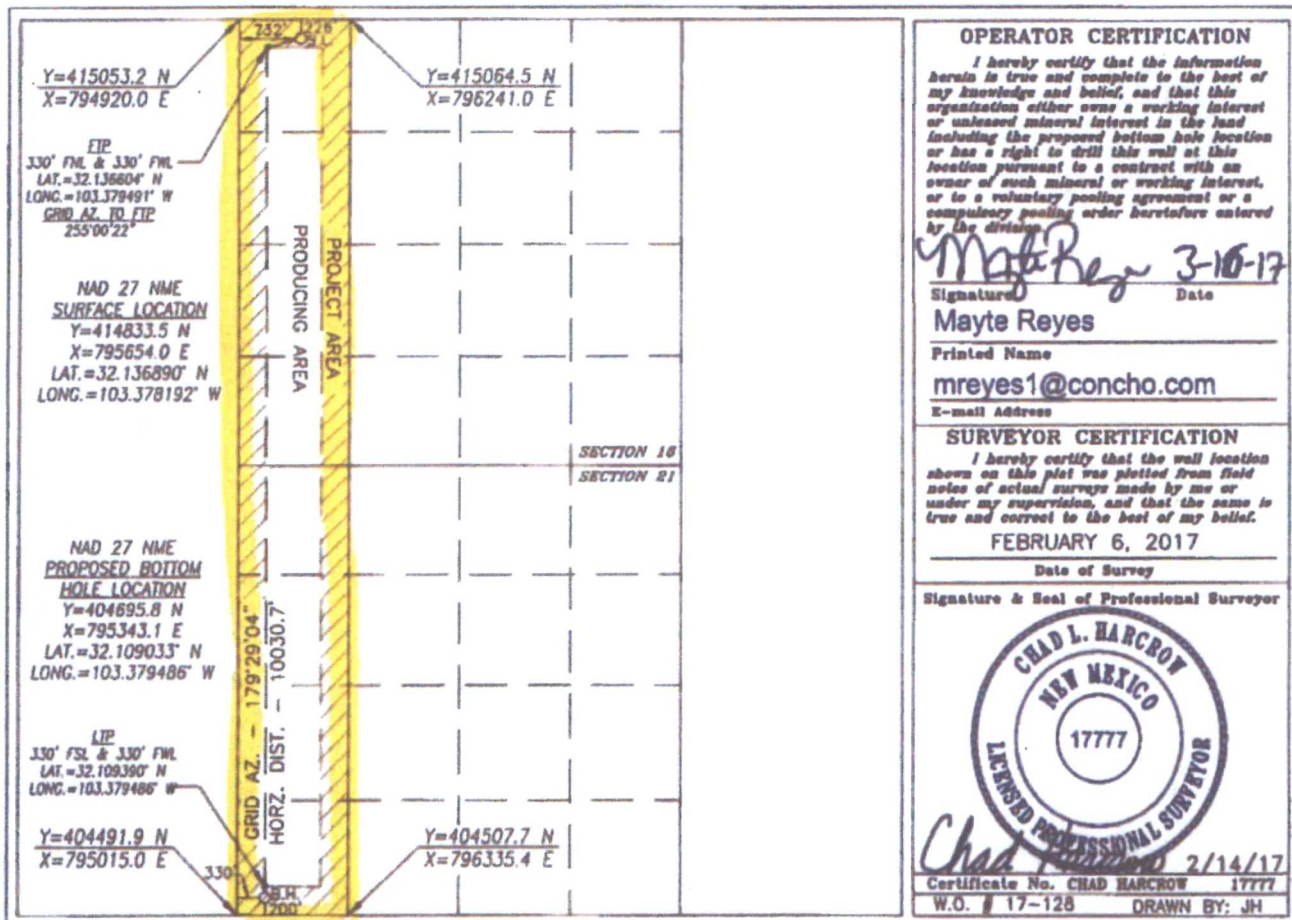
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	16	25-S	35-E		226	NORTH	732	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	21	25-S	35-E		200	SOUTH	330	WEST	LEA

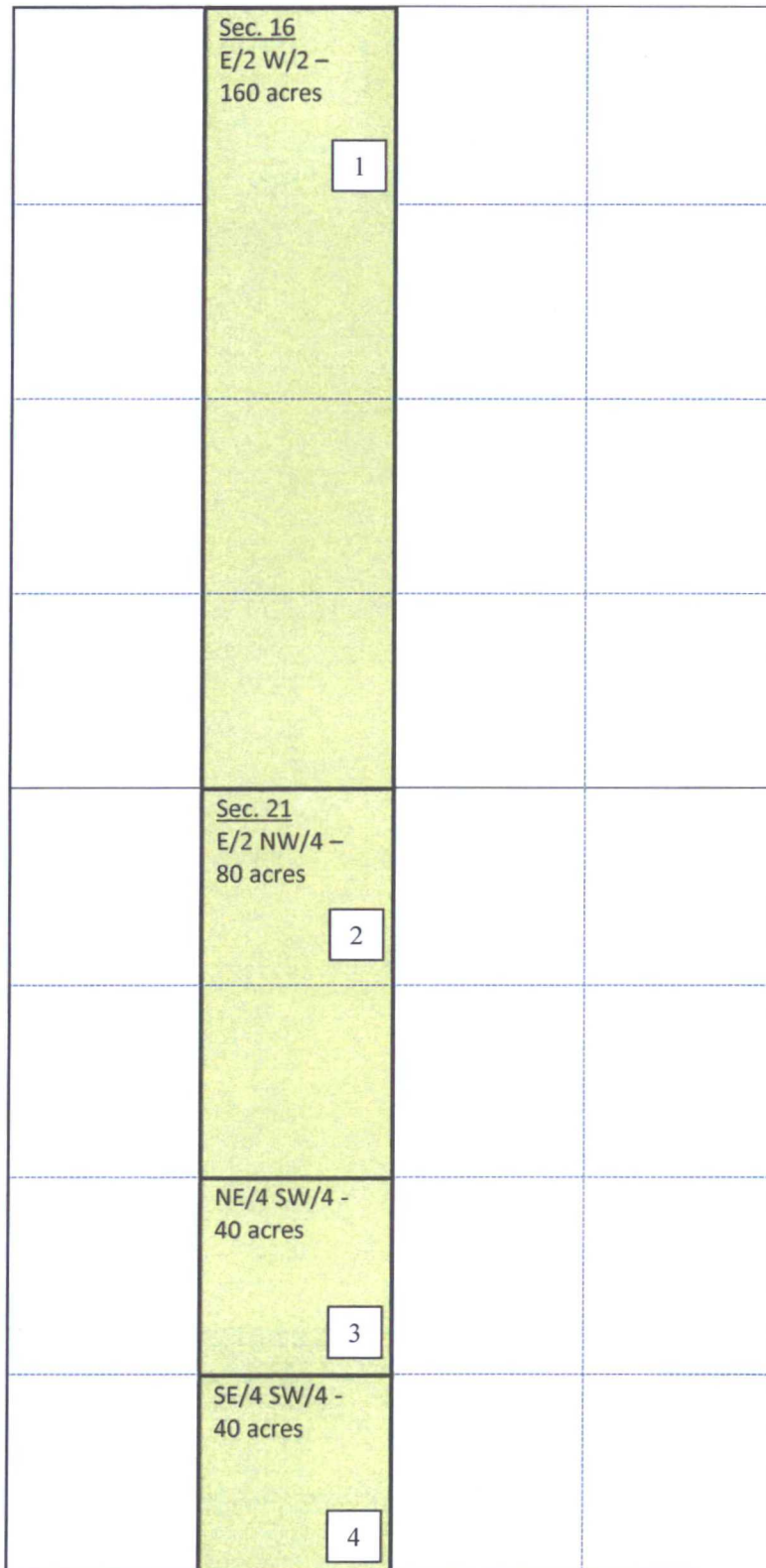
Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No.
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**NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION**



BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 4
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

WHITE FALCON 16 FED COM #21H & #22H (Case #15812)
T25S-R35E-Section 16: E/2 W/2 & Section 21: E/2 W/2 of
LEA COUNTY, NM



WHITE FALCON 16 FED COM #21H & #22H (Case #15812)
T25S-R35E-Section 16: E/2 W/2 & Section 21: E/2 W/2 of
LEA COUNTY, NM

Tract 1 - E/2 W/2 of Section 16 (160 acres)

COG OPERATING, LLC – 82.49%
EOG Y RESOURCES, INC. – 8.00%
EOG A RESOURCES, INC. – 2.67%
EOG M RESOURCES, INC. – 2.67%
FUEL PRODUCTS, INC. – 1.39%
GAHR ENERGY COMPANY – 1.39%
S.N.S. OIL & GAS PROPERTIES, INC. – 1.39%

Tract 2 – E/2 NW/4 of Section 21 (80 acres)

COG OPERATING, LLC – 49.25%
COG ACREAGE LP – 32.00%
CHISOS, LTD. – 6.25%
APACHE CORPORATION – 12.50%

Tract 3 – NE/4 SW/4 of Section 21 (40 acres)

COG OPERATING LLC – 100.00%

Tract 4 – SE/4 SW/4 of Section 21 (40 acres)

COG OPERATING LLC – 100.00%

UNIT RECAPITULATION T25S-R35E-Section 16: E/2 W/2 and Section 21: E/2 W/2

COG OPERATING, LLC	78.59%
COG ACREAGE LP	8.00%
CHISOS, LTD.	1.56%
EOG Y RESOURCES, INC.	4.00%
EOG A RESOURCES, INC.	1.33%
EOG M RESOURCES, INC.	1.33%
FUEL PRODUCTS, INC.	0.69%
GAHR ENERGY COMPANY	0.69%
S.N.S. OIL & GAS PROPERTIES, INC.	0.69%
APACHE CORPORATION	3.125%

PARTIES WITH UNMARKETABLE TITLE

Pooled Party	Party Who Received Notice
<i>Estate of Beulah M. Baird*</i>	Norma Baird Loving, Trustee of the Beulah M Baird Trust dated July 6, 1990 2009 Crockett Ct. Irving, TX 76240 Estate of Beulah M. Baird 2009 Crockett Ct. Irving, TX 76240 Weldon Baird, Trustee of the Beulah M Baird Trust dated July 6, 1990 709 McCoy Drive Irving, TX 75062
<i>Estate of Ora Mae Davis*</i>	James Davis P.O. Box 4251 Midland, TX 79704 Gary G. Davis 404 Circleview Dr. S. Hurst, TX 76054 Charlotte S. E. Garza 324 Heneretta Drive Hurst, TX 76054-2242 Leland E. Davis 1625 9th Ave SE St Cloud, MN 56304 Lee & Judy Davis Revocable Trust 1625 9th Ave SE St Cloud, MN 56304 George M. Davis 209 Melody Lane Gainesville, TX 76240
<i>Estate of Elbert E. Medlin*</i>	Estate of Elbert E. Medlin 4819 E. Libby Lane Scottsdale, AZ 85254 Estate of Elbert E. Medlin c/o Shamrock Royalty, LLC 200 W. Hwy. 6, Ste 320 Woodway, TX 76712
<i>Estate of Jamie Ann Billington*</i>	Jerry Billington P.O. Box 1994 Amarillo, TX 79105

Interests seeking to Compulsory Pool

*** Deceased**

WHITE FALCON 16 STATE COM #23H & #24H (Case #15813)
T25S-R35E-Section 16: W/2 W/2 & Section 21: W/2 W/2
LEA COUNTY, NM

<u>Sec. 16</u> W/2 W/2 – 160 acres 1			
<u>Sec. 21</u> W/2 NW/4 – 80 acres 2			
NW/4 SW/4 – 40 acres 3			
SW/4 SW/4 – 40 acres 4			

**WHITE FALCON 16 STATE COM #23H & #24H (Case #15813)
T25S-R35E-Section 16: W/2 W/2 & Section 21: W/2 W/2
LEA COUNTY, NM**

Tract 1 - W/2 W/2 of Section 16 (160 acres)

COG OPERATING, LLC – 82.49%
EOG Y RESOURCES, INC. – 8.00%
EOG A RESOURCES, INC. – 2.67%
EOG M RESOURCES, INC. – 2.67%
FUEL PRODUCTS, INC. – 1.39%
GAHR ENERGY COMPANY – 1.39%
S.N.S. OIL & GAS PROPERTIES, INC. – 1.39%

Tract 2 – W/2 NW/4 of Section 21 (80 acres)

COG OPERATING, LLC – 49.25%
COG ACREAGE LP – 32.00%
CHISOS, LTD. – 6.25%
APACHE CORPORATION – 12.50%

Tract 3 – NW/4 SW/4 of Section 21 (40 acres)

COG OPERATING LLC – 23.00%
COG ACREAGE LP – 75.50%
OHIO STATE UNIVERSITY – 1.50%

Tract 4 – SW/4 SW/4 of Section 21 (40 acres)

COG OPERATING LLC – 21.00%
COG ACREAGE LP – 68.62%
ENERGEN RESOURCES CORP. – 9.38%
OHIO STATE UNIVERSITY – 1.00%

UNIT RECAPITULATION T25S-R35E-Section 16: W/2 W/2 and Section 21: W/2 W/2

COG OPERATING, LLC	59.08%
COG ACREAGE LP	26.02%
ENERGEN RESOURCES CORP.	1.17%
CHISOS, LTD.	1.56%
EOG Y RESOURCES, INC.	4.00%
EOG A RESOURCES, INC.	1.33%
EOG M RESOURCES, INC.	1.33%
FUEL PRODUCTS, INC.	0.69%
GAHR ENERGY COMPANY	0.69%
S.N.S. OIL & GAS PROPERTIES, INC.	0.69%
OHIO STATE UNIVERSITY	0.31%
APACHE CORPORATION	3.13%

PARTIES WITH UNMARKETABLE TITLE

Pooled Party	Party Who Received Notice
<i>Estate of Beulah M. Baird*</i>	Norma Baird Loving, Trustee of the Beulah M Baird Trust dated July 6, 1990 2009 Crockett Ct. Irving, TX 76240 Estate of Beulah M. Baird 2009 Crockett Ct. Irving, TX 76240 Weldon Baird, Trustee of the Beulah M Baird Trust dated July 6, 1990 709 McCoy Drive Irving, TX 75062
<i>Estate of Ora Mae Davis*</i>	James Davis P.O. Box 4251 Midland, TX 79704 Gary G. Davis 404 Circleview Dr. S. Hurst, TX 76054 Charlotte S. E. Garza 324 Heneretta Drive Hurst, TX 76054-2242 Leland E. Davis 1625 9th Ave SE St Cloud, MN 56304 Lee & Judy Davis Revocable Trust 1625 9th Ave SE St Cloud, MN 56304

	George M. Davis 209 Melody Lane Gainesville, TX 76240
<i>Estate of Elbert E. Medlin*</i>	Estate of Elbert E. Medlin 4819 E. Libby Lane Scottsdale, AZ 85254 Estate of Elbert E. Medlin c/o Shamrock Royalty, LLC 200 W. Hwy. 6, Ste 320 Woodway, TX 76712
<i>Estate of Jamie Ann Billington*</i>	Jerry Billington P.O. Box 1994 Amarillo, TX 79105
<i>Estate of Barry B. Thompson*</i>	Estate of Barry B. Thompson 1856 Bugtussle Lane West, TX 76691 Sandra Thompson, Trustee of the Thompson Family Trust created under the Last Will and Testament of Barry B. Thompson, dated August 29, 2002 1856 Bugtussle Lane West, TX 76691

Interests seeking to Compulsory Pool

*** Deceased**



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6517

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

Re: Well Proposal – White Falcon 16 Federal Com 21H

Sec 16: E/2 W/2 - T25S-R35E

Sec 21: E/2 W/2 - T25S-R35E

SHL: 226' FNL/ 2020' FWL, or a legal location in Sec 16 (Unit C)

BHL: 200' FSL/ 2310' FWL, or a legal location in Sec 21 (Unit N)

Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the White Falcon 16 Federal Com 21H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,508' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$12,080,500.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: E/2 W/2 - T25S-R35E and Sec 21: E/2 W/2 - T25S-R35E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG proposes to acquire your interest via term assignment. It has the following general provisions:

- 3 year primary term
- Delivering a 75% NRI, proportionately reduced
- \$750 per net acre bonus consideration

The Term Assignment offer terminates November 1, 2017 and is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 Federal Com 21H.

_____ I/We hereby elect not to participate in the White Falcon 16 Federal Com 21H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6586

Apache Corp
Attn: Amy Lindsey
303 Veterans Airpark, Ste 1000
Midland, TX 79705

Re: Well Proposal – White Falcon 16 Federal Com 21H
Sec 16: E/2 W/2 - T25S-R35E
Sec 21: E/2 W/2 - T25S-R35E
SHL: 226' FNL/ 2020' FWL, or a legal location in Sec 16 (Unit C)
BHL: 200' FSL/ 2310' FWL, or a legal location in Sec 21 (Unit N)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the White Falcon 16 Federal Com 21H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,508' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$12,080,500.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: E/2 W/2 - T25S-R35E and Sec 21: E/2 W/2 - T25S-R35E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG would like to lease your minerals under the following general terms:

- Bonus of \$750 /Net Mineral Acre
- 3 Year Primary Term
- 25% Royalty Interest

The Lease offer is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 Federal Com 21H.

_____ I/We hereby elect not to participate in the White Falcon 16 Federal Com 21H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6517

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

Re: Well Proposal – White Falcon 16 Federal Com 22H
Sec 16: E/2 W/2 - T25S-R35E
Sec 21: E/2 W/2 - T25S-R35E
SHL: 226' FNL/ 1940' FWL, or a legal location in Sec 16 (Unit C)
BHL: 200' FSL/ 1650' FWL, or a legal location in Sec 21 (Unit N)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC, as Operator, hereby proposes to drill the White Falcon 16 Federal Com 22H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,526' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$12,230,500.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: E/2 W/2 - T25S-R35E and Sec 21: E/2 W/2 - T25S-R35E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG proposes to acquire your interest via term assignment. It has the following general provisions:

- 3 year primary term
- Delivering a 75% NRI, proportionately reduced
- \$750 per net acre bonus consideration

The Term Assignment offer terminates November 1, 2017 and is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 Federal Com 22H.

_____ I/We hereby elect **not** to participate in the White Falcon 16 Federal Com 22H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6586

Apache Corp
Attn: Amy Lindsey
303 Veterans Airpark, Ste 1000
Midland, TX 79705

Re:

Well Proposal – White Falcon 16 Federal Com 22H

Sec 16: E/2 W/2 - T25S-R35E

Sec 21: E/2 W/2 - T25S-R35E

SHL: 226' FNL/ 1940' FWL, or a legal location in Sec 16 (Unit C)

BHL: 200' FSL/ 1650' FWL, or a legal location in Sec 21 (Unit N)

Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC, as Operator, hereby proposes to drill the White Falcon 16 Federal Com 22H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,526' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$12,230,500.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: E/2 W/2 - T25S-R35E and Sec 21: E/2 W/2 - T25S-R35E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG would like to lease your minerals under the following general terms:

- Bonus of \$750 /Net Mineral Acre
- 3 Year Primary Term
- 25% Royalty Interest

The Lease offer is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 Federal Com 22H.

_____ I/We hereby elect not to participate in the White Falcon 16 Federal Com 22H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6517

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

Re: Well Proposal – White Falcon 16 State Com 23H
Sec 16: W/2 W/2 - T25S-R35E
Sec 21: W/2 W/2 - T25S-R35E
SHL: 226' FNL/ 812' FWL, or a legal location in Sec 16 (Unit D)
BHL: 200' FSL/ 990' FWL, or a legal location in Sec 21 (Unit M)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the White Falcon 16 State Com 23H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,545' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$11,911,833.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: W/2 W/2 - T25S-R35E and Sec 21: W/2 W/2 - T25S-R35E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG proposes to acquire your interest via term assignment. It has the following general provisions:

- 3 year primary term
- Delivering a 75% NRI, proportionately reduced
- \$750 per net acre bonus consideration

The Term Assignment offer terminates November 1, 2017 and is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 8
Submitted by: **COG OPERATING, LLC**
Hearing Date: August 31, 2017

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 State Com 23H.

_____ I/We hereby elect **not** to participate in the White Falcon 16 State Com 23H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6579

Chisos Ltd
670 Dona Ana Road SW
Deming, NM 88030

Re: Well Proposal – White Falcon 16 State Com 23H
Sec 16: W/2 W/2 - T25S-R35E
Sec 21: W/2 W/2 - T25S-R35E
SHL: 226' FNL/ 812' FWL, or a legal location in Sec 16 (Unit D)
BHL: 200' FSL/ 990' FWL, or a legal location in Sec 21 (Unit M)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the White Falcon 16 State Com 23H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,545' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$11,911,833.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: W/2 W/2 - T25S-R35E and Sec 21: W/2 W/2 - T25S-R35E. It has the following general provisions:

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- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG would like to lease your minerals under the following general terms:

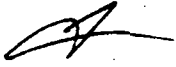
- Bonus of \$750 /Net Mineral Acre
- 3 Year Primary Term
- 25% Royalty Interest

The Lease offer is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 State Com 23H.

_____ I/We hereby elect not to participate in the White Falcon 16 State Com 23H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6517

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

Re: Well Proposal – White Falcon 16 State Com 24H
Sec 16: W/2 W/2 - T25S-R35E
Sec 21: W/2 W/2 - T25S-R35E
SHL: 226' FNL/ 732' FWL, or a legal location in Sec 16 (Unit D)
BHL: 200' FSL/ 330' FWL, or a legal location in Sec 21 (Unit M)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the White Falcon 16 State Com 24H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,543' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$11,911,766.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement which is enclosed for your review and approval. The Operating Agreement covers Sec 16: W/2 W/2 - T25S-R35E and Sec 21: W/2 W/2 - T25S-R35E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

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- 3 year primary term
- Delivering a 75% NRI, proportionately reduced
- \$750 per net acre bonus consideration

The Term Assignment offer terminates November 1, 2017 and is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 State Com 24H.

_____ I/We hereby elect **not** to participate in the White Falcon 16 State Com 24H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____



June 15, 2017

US Certified Mail - 91 7199 9991 7036 0803 6579

Chisos Ltd
670 Dona Ana Road SW
Deming, NM 88030

Re: Well Proposal – White Falcon 16 State Com 24H
Sec 16: W/2 W/2 - T25S-R35E
Sec 21: W/2 W/2 - T25S-R35E
SHL: 226' FNL/ 732' FWL, or a legal location in Sec 16 (Unit D)
BHL: 200' FSL/ 330' FWL, or a legal location in Sec 21 (Unit M)
Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (COG), as Operator, hereby proposes to drill the White Falcon 16 State Com 24H well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately 12,543' and a MD of approximately 22,300' to test the Wolfcamp formation ("Operation"). The total cost of the Operation is estimated to be \$11,911,766.00, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

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- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided below, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. A self-addressed, postage paid envelope is enclosed for your convenience. If you do not wish to participate, COG would like to lease your minerals under the following general terms:

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- 3 Year Primary Term
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The Lease offer is subject to the approval of COG's management and verification of title.

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If you have any questions, please do not hesitate to contact the undersigned at (432) 221-0465 or Megan Flanagan at (432) 685-2588.

Respectfully,



Mike Wallace
Senior Landman

_____ I/We hereby elect to participate in the White Falcon 16 State Com 24H.

_____ I/We hereby elect not to participate in the White Falcon 16 State Com 24H.

Company: _____

By: _____

Name: _____

Title: _____

Date: _____

**COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING**

WELL NAME: **WHITE FALCON 16 FEDERAL COM #21H**
 SHL: SEC 16: 226 FNL & 2020 FWL
 BHL: SEC 21: 200 FSL & 2310 FWL
 FORMATION: WOLFCAMP
 LEGAL: 16-T25S-R35E

PROSPECT NAME: **BULLDOG 2535 (717109)**
 STATE & COUNTY: **New Mexico, Lea**
 OBJECTIVE: **DRILL & COMPLETE**
 DEPTH: **22,300**
 TVD: **12,508**

		<u>Dria - Rig</u>			<u>Tank Btty</u>		<u>Pmpa</u>		
		<u>Release(D)</u>		<u>Completion(C)</u>	<u>Constrctn(TB)</u>		<u>Equipment(PEQ)</u>		<u>TOTAL</u>
INTANGIBLE COSTS									
Title/Creative/Permit	201	11,000							11,000
Insurance	202	4,000	302						4,000
Damages/Right of Way	203	5,000	303						5,000
Survey/Stake Location	204	6,000			351				6,000
Location/Pits/Road Expense	205	120,000	305	10,000	353	57,000	366		187,000
Drilling / Completion Overhead	206	11,100	306						11,100
Turnkey Contract	207	0	307						0
Footage Contract	208	0	308						0
Daywork Contract	209	697,000	309						697,000
Directional Drilling Services	210	303,000	310						303,000
Fuel & Power	211	148,000	311	5,000	354		367		153,000
Water	212	60,000	312	855,000			368		915,000
Bbs	213	120,000	313	4,500			369		124,500
Mud & Chemicals	214	180,000	314	25,000			370		185,000
Drill Stem Test	215	0	315						0
Coring & Analysis	216	0							0
Cement Surface	217	28,000							28,000
Cement Intermediate	218	45,000							45,000
Cement 2nd Intermediate/Production	219	80,000							80,000
Cement Squeeze & Other (Kickoff Plug)	220	110,000					371		110,000
Float Equipment & Centralizers	221	22,000							22,000
Casing Crews & Equipment	222	50,000							50,000
Fishing Tools & Service	223	0	323				372		0
Geologic/Engineering	224	0	324		355		373		0
Contract Labor	225	5,500	325	8,200	356	54,000	374		67,700
Company Supervision	226	98,600	326	30,000	357		375		98,600
Contract Supervision	227	108,000	327	128,000	358		376	5,500	242,500
Testing Casing/Tubing	228	20,000	328	10,000			377		30,000
Mud Logging Unit	229	43,000	329						43,000
Logging	230	150,000					378		150,000
Perforating/Wireline Services	231	4,000	331	435,000			379		439,000
Stimulation/Treating			332	3,783,000			380		3,783,000
Completion Unit			333	138,000			381	7,700	145,700
Swabbing Unit			334				382		0
Rentals-Surface	235	180,000	335	315,000	359		383	8,600	511,600
Rentals-Subsurface	236	150,000	336	75,000			384		225,000
Trucking/Forklift/Rig Mobilization	237	120,000	337	20,000	360		385	5,500	145,500
Welding Services	238	4,000	338	5,000	361		386		9,000
Water Disposal	239	0	339	60,000	362	270,000	387		330,000
Plug to Abandon	240	0	340						0
Seismic Analysis	241	0	341						0
Miscellaneous	242	0	342				389		0
Contingency	243	57,000	343	250,000	363		390		307,000
Closed Loop & Environmental	244	275,000	344	5,000	364		388		280,000
Coil Tubing			346	440,000					440,000
Flowback Crews & Equip			347	98,000					98,000
Offset Directional/Frac	248	0	348						0
TOTAL INTANGIBLES		3,173,200		6,680,700	381,000		25,300		10,260,200
TANGIBLE COSTS									
Surface Casing	401	128,000							128,000
Intermediate Casing	402	631,000							631,000
Production Casing/Liner	403	357,000							357,000
Tubing			504	47,300			530		47,300
Wellhead Equipment	405	65,000	505	22,000			531	3,300	90,300
Pumping Unit				0			508	111,000	111,000
Prime Mover				0			507		0
Roads				0			508	49,500	49,500
Pumps-Sub Surface (Bif)			509				532	8,600	8,600
Tanks					510	37,000			37,000
Flowlines					511	84,000			84,000
Heater Treater/Separator					512	106,000			106,000
Electrical System					513	69,000	533		69,000
Packers/Anchors/Hangers	414	0	514	6,000			534		6,000
Couplings/Fittings/Valves	415	0			515	123,000			123,000
Dehydration					517				0
Injection Plant/CO2 Equipment					518				0
Pumps-Surface					521	12,000			12,000
Instrumentation/SCADA/POC					522		529	4,400	4,400
Miscellaneous	419	0	519		523		535		0
Contingency	420	0	520		524		536		0
Meters/LACT					525	31,000			31,000
Flares/Combustors/Emission					526	25,000			25,000
Gas Lift/Compression			527	15,000	516	35,000	528		50,000
TOTAL TANGIBLES		1,181,000		90,300	522,000		177,000		1,970,300
TOTAL WELL COSTS		4,354,200		6,771,000	903,000		202,300		12,230,500

COG Operating LLC

% of Total Well Cost

36%

55%

7%

2%

Date Prepared: 4/5/2017

COG Operating LLC

We approve:
% Working Interest

By: PWS TC 5-16-17 KG

Company:
By:

Printed Name:
Title:
Date:

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 9
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

**COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING**

WELL NAME: WHITE FALCON 16 FEDERAL COM #22H	PROSPECT NAME: BULLDOG 2535 (717109)
SHL: SEC 16: 226 FNL & 1940 FWL	STATE & COUNTY: New Mexico, Lea
BHL: SEC 21: 200 FSL & 1650 FWL	OBJECTIVE: DRILL & COMPLETE
FORMATION: WOLFCAMP	DEPTH: 22,300
LEGAL: 16-T25S-R35E	TVD: 12,528

		Drig - Rig		Completion(C)		Tank Btty		Pmpa.		TOTAL	
INTANGIBLE COSTS		Release(D)				Constrcn(TB)		Equipment(PEQ)			
Title/Curtive/Permit	201	11,000								11,000	
Insurance	202	4,000	302							4,000	
Damages/Right of Way	203	5,000	303			351				5,000	
Survey/Stake Location	204	6,000				352				6,000	
Location/Pits/Road Expense	205	120,000	305	10,000		353	57,000	368		187,000	
Drilling / Completion Overhead	206	11,100	306							11,100	
Turnkey Contract	207	0	307							0	
Footage Contract	208	0	308							0	
Daywork Contract	209	697,000	309							697,000	
Directional Drilling Services	210	303,000	310							303,000	
Fuel & Power	211	148,000	311	5,000	354			367		153,000	
Water	212	60,000	312	855,000				368		915,000	
Bits	213	120,000	313	4,500				369		124,500	
Mud & Chemicals	214	160,000	314	25,000				370		185,000	
Drill Stem Test	215	0	315							0	
Coring & Analysis	216	0								0	
Cement Surface	217	28,000								28,000	
Cement Intermediate	218	45,000								45,000	
Cement 2nd Intermediate/Production	219	80,000								80,000	
Cement Squeeze & Other (Kickoff Plug)	220	110,000						371		110,000	
Floot Equipment & Centralizers	221	22,000								22,000	
Casing Crews & Equipment	222	50,000								50,000	
Fishing Tools & Service	223	0	323					372		0	
Geologic/Engineering	224	0	324			355		373		0	
Contract Labor	225	5,500	325	8,200	356	54,000		374		67,700	
Company Supervision	226	66,600	326	30,000	357			375		96,600	
Contract Supervision	227	108,000	327	128,000	358			376	5,500	242,500	
Testing Casing/Tubing	228	20,000	328	10,000				377		30,000	
Mud Logging Unit	229	43,000	329							43,000	
Logging	230	0						378		0	
Perforating/Wireline Services	231	4,000	331	435,000				379		439,000	
Stimulation/Treating			332	3,763,000				380		3,763,000	
Completion Unit			333	138,000				381	7,700	145,700	
Swabbing Unit			334					382		0	
Rentals-Surface	235	180,000	335	315,000	359			383	6,600	511,600	
Rentals-Subsurface	236	150,000	336	75,000				384		225,000	
Trucking/Forklift/Rig Mobilization	237	120,000	337	20,000	360			385	5,500	145,500	
Welding Services	238	4,000	338	5,000	361			386		9,000	
Water Disposal	239	0	339	60,000	362	270,000		387		330,000	
Plug to Abandon	240	0	340							0	
Seismic Analysis	241	0	341							0	
Miscellaneous	242	0	342					389		0	
Contingency	243	57,000	343	250,000	363			390		307,000	
Closed Loop & Environmental	244	275,000	344	5,000	364			388		280,000	
Coil Tubing			346	440,000						440,000	
Flowback Crews & Equip			347	98,000						98,000	
Offset Directional/Frac	248	0	348							0	
TOTAL INTANGIBLES		3,023,200		6,680,700		381,000		25,300		10,110,200	
TANGIBLE COSTS											
Surface Casing	401	128,000								128,000	
Intermediate Casing	402	631,000								631,000	
Production Casing/Liner	403	357,000								357,000	
Tubing			504	47,300				530		47,300	
Wellhead Equipment	405	65,000	505	22,000				531	3,300	90,300	
Pumping Unit				0				508	111,000	111,000	
Prime Mover				0				507		0	
Rods				0				508	48,500	48,500	
Pumps-Sub Surface (BH)			509					532	8,800	8,800	
Tanks					510	37,000				37,000	
Flowlines					511	84,000				84,000	
Heater Treater/Separator					512	108,000				108,000	
Electrical System					513	69,000		533		69,000	
Packers/Anchors/Hangers	414	0	514	6,000				534		6,000	
Couplings/Fittings/Valves	415	0				123,000				123,000	
Dehydration					517					0	
Injection Plant/CO2 Equipment					518					0	
Pumps-Surface					521	12,000				12,000	
Instrumentation/SCADA/POC					522			526	4,400	4,400	
Miscellaneous	419	0	519		523			535		0	
Contingency	420	0	520		524			536		0	
Meters/LACT					525	31,000				31,000	
Flares/Combustors/Emission					526	25,000				25,000	
Gas Lift/Compression			527	15,000	516	35,000		528		50,000	
TOTAL TANGIBLES		1,181,000		90,300		522,000		177,000		1,970,300	
TOTAL WELL COSTS		4,204,200		6,771,000		903,000		202,300		12,080,500	

COG Operating LLC

% of Total Well Cost

35%

58%

7%

2%

Date Prepared: 4/5/2017

COG Operating LLC

We approve:

% Working Interest

By: PWS

TC 5-16-17

KG

Company:

By:

Printed Name:

Title:

Date:

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING

WELL NAME: WHITE FALCON 18 STATE COM #23H	PROSPECT NAME: BULLDOG 2535 (717109) S Lea Co Sand & Shale no PH 2M
SHL: SEC 18: 226 FNL & 812 FWL	STATE & COUNTY: New Mexico, Lea
BHL: SEC 21: 200 FSL & 990 FWL	OBJECTIVE: DRILL & COMPLETE
FORMATION: WOLFCAAMP	DEPTH: 22,300
LEGAL: 18-25S-35E	TVD: 12,545

		Dria - Rig Release(D)	Completion(C)	Tank Btty Constructn(TB)	Pmea Equipment(PEQ)	TOTAL
INTANGIBLE COSTS						
Title/Curative/Permit	201	11,000				11,000
Insurance	202	4,000	302			4,000
Damages/Right of Way	203	5,000	303	351		5,000
Survey/Stake Location	204	6,000		352		6,000
Location/Pits/Road Expense	205	130,000	305	10,000	353	188,400
Drilling / Completion Overhead	206	12,000	306	48,400	368	12,000
Turnkey Contract	207	0	307			0
Footage Contract	208	0	308			0
Daywork Contract	209	748,000	309			748,000
Directional Drilling Services	210	298,000	310			298,000
Fuel & Power	211	120,000	311	5,000	354	125,000
Water	212	85,833	312	843,000	367	909,833
Bits	213	144,000	313	4,500	369	148,500
Mud & Chemicals	214	300,000	314	25,000	370	325,000
Drift Stem Test	215	0	315			0
Coring & Analysis	216	0				0
Cement Surface	217	30,000				30,000
Cement Intermediate	218	50,000				50,000
Cement 2nd Intermediate/Production	219	80,000				80,000
Cement Squeeze & Other (Kickoff Plug)	220	100,000			371	100,000
Float Equipment & Centralizers	221	17,800				17,800
Casing Crews & Equipment	222	50,000				50,000
Fishing Tools & Service	223	0	323		372	0
Geologic/Engineering	224	0	324	355	373	0
Contract Labor	225	5,500	325	8,200	356	50,400
Company Supervision	226	72,000	326	30,000	357	102,000
Contract Supervision	227	118,000	327	129,000	358	250,500
Testing Casing/Tubing	228	20,000	328	10,000	377	30,000
Mud Logging Unit	229	51,000	329			51,000
Logging	230	0			378	0
Perforating/Wireline Services	231	4,000	331	428,000	379	432,000
Stimulation/Treating			332	3,705,000	380	3,705,000
Completion Unit			333	138,000	381	145,700
Swabbing Unit			334		382	0
Rentals-Surface	235	190,000	335	315,000	359	511,600
Rentals-Subsurface	236	140,000	336	75,000	384	215,000
Trucking/Forklift/Rig Mobilization	237	170,000	337	20,000	360	195,500
Welding Services	238	4,000	338	5,000	361	9,000
Water Disposal	239	0	339	60,000	362	195,000
Plug to Abandon	240	0	340		135,000	0
Selismic Analysis	241	0	341			0
Miscellaneous	242	0	342		389	0
Contingency	243	59,000	343	250,000	363	309,000
Closed Loop & Environmental	244	300,000	344	5,000	364	305,000
Coil Tubing			346	440,000	388	440,000
Flowback Crews & Equip			347	88,000		88,000
Offset Directional/Frac	248	0	348			0
TOTAL INTANGIBLES		3,304,133	6,603,700	220,100	25,300	10,153,233
TANGIBLE COSTS						
Surface Casing	401	82,000				82,000
Intermediate Casing	402	824,000				824,000
Production Casing/Liner	403	383,000				383,000
Tubing			504	47,300	530	47,300
Wellhead Equipment	405	65,000	505	22,000	531	90,300
Pumping Unit				0	506	111,000
Prime Mover				0	507	0
Rods				0	508	49,500
Pumps-Sub Surface (BH)			509		532	8,800
Tanks				510	25,000	25,000
Flowlines				511	35,000	35,000
Heater Treater/Separator				512	84,400	84,400
Electrical System				513	25,000	25,000
Packers/Anchors/Hangers	414	0	514	6,000	533	6,000
Couplings/Fittings/Valves	415	0			534	63,400
Dehydration				515	83,400	83,400
Injection Plant/CO2 Equipment				517		0
Pumps-Surface				518		0
Instrumentation/SCADA/POC				521	8,400	8,400
Miscellaneous	419	0	519		522	4,400
Contingency	420	0	520		529	4,400
Meters/LACT				523		0
Flares/Combustors/Emission				525		0
Gas Lift/Compression			527	15,000	538	24,400
TOTAL TANGIBLES		1,164,000	90,300	327,300	177,000	1,758,600
TOTAL WELL COSTS		4,468,133	6,694,000	547,400	202,300	11,911,833

COG Operating LLC

Date Prepared: 3/20/2017

We approve:
% Working Interest

COG Operating LLC

By: TIM SMITH

TCAGE 5-18-17

KO

Company:
By:

Printed Name:
Title:
Date:

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

**COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING**

WELL NAME: WHITE FALCON 16 STATE COM #24H
SHL: SEC 16: 226 FNL & 732 FWL
BHL: SEC 21: 200 FSL & 330 FWL
FORMATION: WOLFCAMP
LEGAL: 16-25S-35E

PROSPECT NAME: BULLDOG 2535 (717109) S Lea Co Sand & Shale no PH 2M
STATE & COUNTY: New Mexico, Lea
OBJECTIVE: DRILL & COMPLETE
DEPTH: 22,300
TVD: 12,543

		Drill - Rig Release(D)	Completion(C)	Tank Btty Constrctn(TB)	Pmpg Equipment(PEQ)	TOTAL
INTANGIBLE COSTS						
Title/Curative/Permit	201	11,000				11,000
Insurance	202	4,000	302			4,000
Damages/Right of Way	203	5,000	303			5,000
Survey/Stake Location	204	6,000		351		6,000
Location/Pit/Road Expense	205	130,000	305	10,000	352	188,400
Drilling / Completion Overhead	206	12,000	306		353	12,000
Turnkey Contract	207	0	307			0
Footage Contract	208	0	308			0
Daywork Contract	209	748,000	309			748,000
Directional Drilling Services	210	288,000	310			288,000
Fuel & Power	211	120,000	311	5,000	354	125,000
Water	212	66,833	312	843,000	367	909,833
Bits	213	144,000	313	4,500	368	148,500
Mud & Chemicals	214	300,000	314	25,000	370	325,000
Drill Stem Test	215	0	315			0
Coring & Analysis	216	0				0
Cement Surface	217	30,000				30,000
Cement Intermediate	218	50,000				50,000
Cement 2nd Intermediate/Production	219	80,000				80,000
Cement Squeeze & Other (Kickoff Plug)	220	100,000			371	100,000
Float Equipment & Centralizers	221	17,800				17,800
Casing Crews & Equipment	222	50,000				50,000
Fishing Tools & Service	223	0	323		372	0
Geologic/Engineering	224	0	324	355	373	0
Contract Labor	225	5,500	325	8,200	356	50,400
Company Supervision	226	72,000	326	30,000	357	102,000
Contract Supervision	227	116,000	327	128,000	358	250,500
Testing Casing/Tubing	228	20,000	328	10,000	377	30,000
Mud Logging Unit	229	51,000	329			51,000
Logging	230	0			378	0
Perforating/Wireline Services	231	4,000	331	428,000	379	432,000
Stimulation/Treating			332	3,705,000	380	3,705,000
Completion Unit			333	138,000	381	145,700
Swabbing Unit			334		382	0
Rentals-Surface	235	190,000	335	315,000	359	511,600
Rentals-Subsurface	236	140,000	336	75,000		215,000
Trucking/Forklift/Rig Mobilization	237	170,000	337	20,000	360	195,500
Welding Services	238	4,000	338	5,000	361	9,000
Water Disposal	239	0	339	60,000	362	195,000
Plug to Abandon	240	0	340		387	0
Seismic Analysis	241	0	341			0
Miscellaneous	242	0	342		389	0
Contingency	243	59,000	343	250,000	363	309,000
Closed Loop & Environmental	244	300,000	344	5,000	364	305,000
Coil Tubing			346	440,000		440,000
Flowback Crews & Equip			347	68,000		68,000
Offset Directional/Frac	246	0	348			0
TOTAL INTANGIBLES		3,304,133	6,603,700	220,100	25,300	10,153,233
TANGIBLE COSTS						
Surface Casing	401	82,000				82,000
Intermediate Casing	402	624,000				624,000
Production Casing/liner	403	383,000				383,000
Tubing			504	47,300	530	47,300
Wellhead Equipment	405	65,000	505	22,000	531	80,300
Pumping Unit				0	506	111,000
Prime Mover				0	507	0
Rods				0	508	49,500
Pumps-Sub Surface (BH)			509		532	8,800
Tanks				25,000		25,000
Flowlines				35,000		35,000
Heater Treater/Separator				84,333		84,333
Electrical System				25,000	533	25,000
Packers/Anchors/Hangers	414	0	514	6,000	534	6,000
Couplings/Fittings/Valves	415	0		83,400		83,400
Dehydration					515	0
Injection Plant/CO2 Equipment					516	0
Pumps-Surface				8,400	521	8,400
Instrumentation/SCADA/POC					522	4,400
Miscellaneous	419	0	519		523	0
Contingency	420	0	520		524	0
Meters/LACT				24,400	525	24,400
Flares/Combustors/Emission				18,700	526	18,700
Gas Lift/Compression			527	15,000	518	40,000
TOTAL TANGIBLES		1,164,000	90,300	327,233	177,000	1,758,533
TOTAL WELL COSTS		4,468,133	6,694,000	547,333	202,300	11,811,786

COG Operating LLC

% of Total Well Cost

38%

58%

5%

2%

Date Prepared: 3/20/2017

COG Operating LLC

By: TIM SMITH

Page 5-16-17

KG

We approve:
% Working Interest

Company:

By:

Printed Name:

Title:

Date:

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 10
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

HOLLAND & HART



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

August 11, 2017

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.**

White Falcon 16 Federal Com No. 21H Well

White Falcon 16 Federal Com No. 22H Well

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on August 31, 2017. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices, located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

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

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

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

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

HOLLAND & HART



**Jordan L. Kessler
Associate**

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

August 11, 2017

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
White Falcon 16 Federal Com No. 21H Well
White Falcon 16 Federal Com No. 22H Well**

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

This application has been set for hearing before a Division Examiner at 8:15 AM on August 31, 2017. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

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

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

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

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

**White Falcon 16 Fed Com 21H 22H - Pooling Notice List:
Case No. 15812**

EOG Y Resources Inc.
5509 Champions Drive
Midland, TX 79706

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG Y Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG A Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

Fuel Products, Inc.
P.O. Box 3098
Midland, TX 79702

Gahr Energy Company
PO Box 1889
Midland, TX 79702

S.N.S. Oil & Gas Properties, Inc.
P.O. Box 2234
Ardmore, OK 73402

V-F Petroleum, Inc.
P.O. Box 1889
Midland, TX 79702

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

Apache Corporation
303 Veterans Airpark, Ste. 1000
Midland, TX 79705

Estate of Elbert E. Medlin, deceased
4819 E Libby Lane
Scottsdale, AZ 85254

Estate of Elbert E. Medlin, deceased
c/o Shamrock Royalty, LLC
200 W. Hwy 6, Ste 320
Woodway, TX 76712

Estate of Jamie Ann Billington, deceased
c/o Jerry Billington
P.O. Box 1994
Amarillo, TX 79105

Estate of Ora Mae Davis, deceased
c/o James Davis
P.O. Box 4251
Midland, TX 79704

Estate of Ora Mae Davis, deceased
c/o Gary G. Davis
404 Circleview Dr. S.
Hurst, TX 76054

Estate of Ora Mae Davis, deceased
c/o Charlotte S. E. Garza
324 Heneretta Drive
Hurst, TX 76054-2242

Estate of Ora Mae Davis, deceased
c/o Lee & Judy Davis Revocable Trust
1625 9th Ave SE
St Cloud, MN 56304

Estate of Ora Mac Davis, deceased
c/o George M. Davis
209 Melody Lane
Gainesville, TX 76240

Estate of Beulah M. Baird, deceased
2009 Crockett Ct
Irving, TX 75038

Norma Baird Loving, Trustee of the Beulah M. Baird Trust dated July 6, 1990
2009 Crockett Ct
Irving, TX 75038

Weldon Baird, Trustee of the Beulah M. Baird Trust dated July 6, 1990
709 McCoy Drive
Irving, TX 75062

7017 1450 0000 8463 2187

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

White Falcon 16 State Com
23H and 24H
Case No. 15814M P1501

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Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.50
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total \$
Sent to \$
Street \$
City, \$

EOG Y Resources, Inc.
WIO/Lessee
5509 Champions Drive
Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9000 See Reverse for Instructions

7017 1450 0000 8463 2170

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White Falcon 16 State Com
23H and 24H
Case No. 15814M P1501

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Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.50
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total \$
Sent to \$
Street \$
City, \$

EOG A Resources, Inc.
WIO/Lessee
5509 Champions Drive
Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9000 See Reverse for Instructions

0900 8948 0000 0541 2707

U.S. Postal Service **White Falcon 16 State Com**
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 Domestic Mail Only Case No. 15813

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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 \$
 Sent \$
 Street \$
 City \$

EOG M Resources, Inc. -
 WIO/Lessee
 5509 Champions Drive
 Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

ES000 8948 0000 0541 2707

U.S. Postal Service **White Falcon 16 State Com**
CERTIFIED MAIL 23H and 24H ~~Postage~~
 Domestic Mail Only Case No. 15813

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

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 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 \$
 Sent \$
 Street \$
 City \$

EOG Y Resources, Inc. -
 WIO/Lessee
 105 S. 4th Street
 Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER, COMPLETE THIS SECTION

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

1. Article Addressed to:
 EOG Y Resources, Inc. -
 WIO/Lessee
 105 S. 4th Street
 Artesia, NM 88210

2. 9590 9402 2002 6123 0706 23
 7017 1450 0000 8463 0053

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
☒ Addressee

B. Received by (Printed Name) ☐ Date of Delivery
 J. N. C. 8/14/17

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

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

7017 1450 0000 8463 0046

U.S. Postal Service
CERTIFIED MAIL® White Falcon 16 State Com.
 Domestic Mail Only 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$
 Extra Services & Fees (check box, add fee to postage)
☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery
 Postage
 \$
 Total Paid
 \$
 Sent To
 Street
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

EOG A Resources, Inc. -
 WIO/Lessee
 105 S. 4th Street
 Artesia, NM 88210

Postmark Here
 AUG 11 2017
 USPS

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:
 EOG A Resources, Inc. -
 WIO/Lessee
 105 S. 4th Street
 Artesia, NM 88210

9590 9402 2002 6123 0706 30

2. Article Identification Number
 7017 1450 0000 8463 0046

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 8/16/17

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

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

Domestic Return Receipt

7017 1450 0000 8463 0039

U.S. Postal Service
CERTIFIED MAIL® White Falcon 16 State Com.
 Domestic Mail Only 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee
 \$
 Extra Services & Fees (check box, add fee to postage)
☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery
 Postage
 \$
 Total Paid
 \$
 Sent To
 Street
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

EOG M Resources, Inc. -
 WIO/Lessee
 105 S. 4th Street
 Artesia, NM 88210

Postmark Here
 AUG 11 2017
 USPS

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:
 EOG M Resources, Inc. -
 WIO/Lessee
 105 S. 4th Street
 Artesia, NM 88210

9590 9402 2763 6351 3726 47

2. Article Identification Number
 7017 1450 0000 8463 0039

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 8/14/17

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

Domestic Return Receipt

7017 1450 0000 8463 0022

U.S. Postal Service
CERTIFIED MAIL®
 Domestic Mail Only
 White Falcon 16 State Com
 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit our website at www.usps.com

OFFICIAL USE

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

Postmark Here
 AUG 11 2017

Postage \$
 Total \$
 Sent \$
 City, State, ZIP+4®
 Birmingham, AL 35203

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:
 Energen Resources Corporation -
 WIO/Lessee
 605 Richard Arrington Jr. Blvd North
 Birmingham, AL 35203

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

3. Signature
 Brenda Armstrong
 Received by (Printed Name)
 Brenda Armstrong
 Date of Delivery
 Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

9590 9402 2763 6351 3726 30
 7017 1450 0000 8463 0022
 PS Form 3811, July 2015 PSN 7530-02-000-9053 (over \$500)
 Domestic Return Receipt

7017 1450 0000 8463 0022

U.S. Postal Service
CERTIFIED MAIL®
 Domestic Mail Only
 White Falcon 16 State Com
 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit our website at www.usps.com

OFFICIAL USE

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

Postmark Here
 AUG 11 2017

Postage \$
 Total \$
 Sent \$
 City, State, ZIP+4®
 Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

7017 1450 0000 8463 0954

U.S. Postal Service
CERTIFIED MAIL® White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Pooled
 Case No. 15813
 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
 \$
 Sent
 Street
 City, State, ZIP+4®

Gahr Energy Company, Inc.
 - WIO/Lessee
 P.O. Box 1889
 Midland, TX 79702

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

7017 1450 0000 8463 0947

U.S. Postal Service
CERTIFIED MAIL® White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Pooled
 Case No. 15813
 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
 \$

S.N.S. Oil & Gas properties,
 Inc. - WIO/Lessee
 P.O. Box 2234
 Ardmore, OK 73402

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:
 S.N.S. Oil & Gas properties,
 Inc. - WIO/Lessee
 P.O. Box 2234
 Ardmore, OK 73402

2. 7017 1450 0000 8463 0947

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 S.S.S.O.K.

C. Date of Delivery
 AUG 14 2017

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

9590 9402 2763 6351 3726 09

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

U.S. Postal Service
CERTIFIED MAIL
Domestic Mail Only

White Falcon 16 State Com
23H and 24H Pooled
Case No. 15813

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

\$

Sent To

Street or

City, State

V-F Petroleum, Inc.
WIO/Lessee
P.O. Box 1889
Midland, TX 79702

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

See Reverse for instructions

U.S. Postal Service White Falcon 16 State Com
CERTIFIED MAIL 23H and 24H Pooled
Domestic Mail Only Case No. 15813

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

\$

Chisos, Ltd. - Unleased
Mineral Owner
670 Dona Ana Road SW
Deming, NM 88030

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

See Reverse for instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chisos, Ltd. - Unleased
Mineral Owner
670 Dona Ana Road SW
Deming, NM 88030

9590 9402 2763 6351 3740 30

2. 7017 1450 0000 8463 0923

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X1 [Signature]

Agent

☐ Address

B. Received by (Printed Name)

B. Jacobson

C. Date of Delivery

8/11/17

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

Over \$500

Restricted Delivery

Domestic Return Receipt

7017 1450 0000 8463 0916

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

White Falcon 16 State Com
 23H and 24H Posted
 Case No. 15813

For delivery information, visit usps.com

OFFICIAL USE

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

Postage \$
 Total Postage \$
 Sent To
 Street and A/I
 City, State, ZIP+4®

Ohio State University -
 Unleased Mineral Owner
 281 W. Lane Ave
 Columbus, OH 43210

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Ohio State University -
 Unleased Mineral Owner
 281 W. Lane Ave
 Columbus, OH 43210

9590 9402 2763 6351 3740 47

2. 7017 1450 0000 8463 0916

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

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name)
 L. Gibbs

C. Date of Delivery
 8-14-17

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

7017 1450 0000 8463 0909

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

White Falcon 16 State Com
 23H and 24H Posted
 Case No. 15813M 8752

For delivery information, visit usps.com

OFFICIAL USE

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

Postage \$
 Total \$
 Sent To
 Street
 City, State, ZIP+4®

Apache Corporation - Unleased
 Mineral Owner
 303 Veterans Airpark, Ste. 1000
 Midland, TX 79705

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Apache Corporation - Unleased
 Mineral Owner
 303 Veterans Airpark, Ste. 1000
 Midland, TX 79705

9590 9402 2763 6351 3740 54

2. 7017 1450 0000 8463 0909

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

COMPLETE THIS SECTION ON DELIVERY

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

B. Received by (Printed Name)
 Donna Berry

C. Date of Delivery
 8/16/17

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

7017 1450 0000 8463 0886

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only White Falcon 16 State Com
 23H and 24H Pooled
 For delivery information, visit www.usps.com
OFFICIAL USE
 Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.40
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Fee \$
 Sent To Estate of Elbert E. Medlin,
 deceased
 4819 E Libby Lane
 Scottsdale, AZ 85254
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7017 1450 0000 8463 0886

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only White Falcon 16 State Com
 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit our website at www.usps.com
OFFICIAL USE
 Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.40
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total Fee \$
 Sent To Estate of Elbert E. Medlin,
 deceased
 c/o Shamrock Royalty, LLC
 200 W. Hwy 6, Ste 320
 Woodway, TX 76712
 City, State, ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Estate of Elbert E. Medlin,
 deceased
 c/o Shamrock Royalty, LLC
 200 W. Hwy 6, Ste 320
 Woodway, TX 76712

9590 9402 1505 5362 6142 80

2. 7017 1450 0000 8463 0886

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 9-14-17

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
☐ 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)

7017 1450 0000 8463 0879

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Period
 Case No. 15813

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
 \$

Sent
 \$

Street
 City

Estate of Jamie Ann Billington,
 deceased
 c/o Jerry Billington
 P.O. Box 1994
 Amarillo, TX 79105

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

RETURNED

7017 1450 0000 8463 1067

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Period
 Case No. 15813

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
 \$

Sent
 \$

Street
 City

Estate of Ora Mae Davis,
 deceased
 c/o James Davis
 P.O. Box 4251
 Midland, TX 79704

PS Form 3800, April 2015 PSN 7530-02-000-9057 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:
 Estate of Ora Mae Davis,
 deceased
 c/o James Davis
 P.O. Box 4251
 Midland, TX 79704

2. (Transfer from service label)
 7017 1450 0000 8463 1067

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X

B. Received by (Printed Name)
 JAMES DAVIS

C. Date of Delivery
 AUG 11 2017

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

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

05017 1450 0000 8463 1050

U.S. Postal Service
CERTIFIED MAIL
 White Falcon 16 State Com
 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit FEA.usps.com

OFFICIAL USE

Certified Mail Fee \$ 3.75

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$ 6.55

Sent To Estate of Ora Mae Davis, deceased

Street and c/o Gary G. Davis

City, State 404 Circlevue Dr. S.
Hurst, TX 76054

PS Form 3800, April 2015 PSN 7530-02-000-9000 See Reverse for Instructions

05401 1450 0000 8463 1043

U.S. Postal Service
CERTIFIED MAIL
 White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Pooled
 Case No. 15813
 For delivery information, visit FEA.usps.com

OFFICIAL USE

Certified Mail Fee \$ 3.75

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$ 6.55

Sent To Estate of Ora Mae Davis, deceased

Street and c/o Charlotte S. E. Garza

City, State 324 Heneretta Drive
Hurst, TX 76054-2242

PS Form 3800, April 2015 PSN 7530-02-000-9000 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:
 Estate of Ora Mae Davis, deceased
 c/o Charlotte S. E. Garza
 324 Heneretta Drive
 Hurst, TX 76054-2242

2. Article Number (Transfer from service label)
 9590 9402 1505 5362 6144 40

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☒ Addressee
 X Charlotte S. E. Garza

B. Received by (Printed Name) Charlotte S. E. Garza 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

PS Form 3811, July 2015 PSN 7530-02-000-9000 Domestic Return Receipt

9501 348 0000 0541 2102

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

White Falcon 16 State Court
 23H and 24H Pooled
 Case No. 15813

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 \$

Postmark Here

Estate of Ora Mae Davis, deceased
 c/o Lee & Judy Davis Revocable Trust
 1625 9th Ave SE
 St Cloud, MN 56304

See Reverse for Instructions

COMPLETE THIS SECTION

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

1. Article Addressed to:
 Estate of Ora Mae Davis, deceased
 c/o Lee & Judy Davis Revocable Trust
 1625 9th Ave SE
 St Cloud, MN 56304

9590 9403 1012 5271 2883 78

7017 1450 0000 8463 1036

PS Form 3811, July 2013 PSN 7530-02-000-9083

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X Leland E Davis

B. Received by (Printed Name)
 Leland E Davis

C. Date of Delivery
 AUG 11 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

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

all Restricted Delivery

Static Return Receipt

9501 348 0000 0541 2102

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

White Falcon 16 State Court
 23H and 24H Pooled
 Case No. 15813

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 \$

Postmark Here

Total Paid \$
 Sent To
 Street at
 City, State

Estate of Ora Mae Davis, deceased
 c/o George M. Davis
 209 Melody Lane
 Gainesville, TX 76240

See Reverse for Instructions

RETURNED

7017 1450 0000 8463 1012

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Pooled
 Case No. 15813

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 \$

Postmark Here

Estate of Beulah M. Baird
 deceased
 2009 Crockett Ct
 Irving, TX 75038

City, State, ZIP+4[®]

PS Form 3800, April 2015 See Reverse for Instructions

COMPLETE THIS SECTION

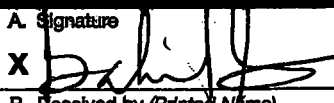
Complete items 1, 2, and 3.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Estate of Beulah M. Baird,
 deceased
 2009 Crockett Ct
 Irving, TX 75038

9590 9402 2002 6123 0723 13

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 1012

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X  ☐ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 8-14-17

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
☐ Restricted Delivery

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

(over \$500)

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

7017 1450 0000 8463 1005

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Pooled
 Case No. 15813

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 \$

Postmark Here

USPS

Norma Baird Loving, Trustee
 of the Beulah M. Baird Trust
 dated July 6, 1990
 2009 Crockett Ct
 Irving, TX 75038

City, State, ZIP+4[®]

PS Form 3800, April 2015 See Reverse for Instructions

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:
 Norma Baird Loving, Trustee
 of the Beulah M. Baird Trust
 dated July 6, 1990
 2009 Crockett Ct
 Irving, TX 75038

9590 9402 2763 6351 3726 61

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 1005

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X  ☐ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 8-14-17

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

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

7017 1450 0000 8463 0992

U.S. Postal Service
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Restricted
 Case No. 15813

For delivery information, visit 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 \$
 Sent To
 Street
 City, State

Weldon Baird, Trustee of the
 Beulah M. Baird Trust dated
 July 6, 1990
 709 McCoy Drive
 Irving, TX 75062

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

7017 1450 0000 8463 0985

U.S. Postal Service
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Restricted
 Case No. 15813

For delivery information, visit 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 Post \$
 Sent To
 Street and
 City, State

Estate of Barry B. Thompson,
 deceased
 1856 Bugtussle Lane
 West, TX 76691

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:
 Weldon Baird, Trustee of the
 Beulah M. Baird Trust dated
 July 6, 1990
 709 McCoy Drive
 Irving, TX 75062

9590 9402 2763 6351 3726 54

2. Article Identification Number (from service label)
 7017 1450 0000 8463 0992

PS Form 3811, July 2015 PSN 7530-02-000-9083

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 Brad Hellums

C. Date of Delivery
 8/15/17

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
☐ 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:
 Estate of Barry B. Thompson,
 deceased
 1856 Bugtussle Lane
 West, TX 76691

9590 9402 1505 5362 6143 72

2. Article Identification Number (from service label)
 7017 1450 0000 8463 0985

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 SHERRA THOMPSON

C. Date of Delivery
 8-15-17

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

Domestic Return Receipt

7017 1450 0000 8463 0978

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Pooled.
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Sandra Thompson, Trustee of the
 Thompson Family Trust created under
 the Last Will and Testament of Barry B.
 Thompson, dated August 29, 2002
 1856 Bugtussle Lane
 West, TX 76691

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

7017 1450 0000 8463 1166

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Pooled.
 Case No. 15813

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) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$

Sent \$

State

City

Estate of Stephen Scott Moore, deceased
 c/o Richard Lyons Moore, as Co-Trustee
 under the Will of Stephen Scott Moore
 PO Box 841524
 Dallas, TX 75284

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. Estate of Stephen Scott Moore, deceased
c/o Richard Lyons Moore, as Co-Trustee
under the Will of Stephen Scott Moore
PO Box 841524
Dallas, TX 75284

2. Article Number (Transfer from service label)
7017 1450 0000 8463 1166

3. Service Type
☐ 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™
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Signature
☐ Agent
☐ Addressee

B. Received by (Printed Name) Samuel

C. Date of Delivery
AUG 14 2017

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

9590 9402 1505 5362 6143 58

PS Form 3811, July 2015 PSN 7580-02-000-9053 Domestic Return Receipt

7017 1450 0000 8463 1159

U.S. Postal Service **White Falcon 16 State Com**
CERTIFIED MAIL 23H and 24H Pooled
 Domestic Mail Only Case No. 15813

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 Po \$
 Sent To \$
 Street Address \$
 City, State, ZIP+4 \$

Estate of Stephen Scott Moore, deceased
 c/o Michael Harrison Moore, as Co-
 Trustee under the Will of Stephen Scott
 Moore
 PO Box 205576
 Dallas, TX 75320

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for Instructions

7017 1450 0000 8463 1142

U.S. Postal Service **White Falcon 16 State Com**
CERTIFIED MAIL 23H and 24H Pooled
 Domestic Mail Only Case No. 15813

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 \$

Postmark Here

Kevin Moore SSMTT GST
 Exempt Trust
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Kevin Moore SSMTT GST
 Exempt Trust
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

9590 9402 1505 5362 6143 34

2 7017 1450 0000 8463 1142

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
 X ☐ Addressee

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

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

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

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

7017 1450 0000 8463 1135

U.S. Postal Service
CERTIFIED MAIL® Domestic Mail Only
 White Falcon 16 State Com
 23H and 24H Banded
 Case No. 15813
 For delivery information, visit us at 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 \$
 Sent To
 Street
 City, St

Ryan Moore SSMTT GST
 Exempt Trust
 1204 West 7th St., Ste 200
 Fort Worth, TX 76113

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ryan Moore SSMTT GST
 Exempt Trust
 1204 West 7th St., Ste 200
 Fort Worth, TX 76113

9590 9402 1505 5362 6143 27

2. Article Number (Transfer from service label)

7017 1450 0000 8463 1135

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Stamp*
☐ 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

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

Domestic Return Receipt

7017 1450 0000 8463 1128

U.S. Postal Service
CERTIFIED MAIL® Domestic Mail Only
 White Falcon 16 State Com
 23H and 24H Banded
 Case No. 15813
 For delivery information, visit us at 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 Pos
 \$
 Sent To
 Street and
 City, State

Kevin Moore SSMTT GST
 Nonexempt Trust
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Kevin Moore SSMTT GST
 Nonexempt Trust
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

9590 9402 1505 5362 6143 10

2. Article Number (Transfer from service label)

7017 1450 0000 8463 1128

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Kevin Ellis*
☐ 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
☐ 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

7102 2104 0000 8463 1111

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Court
 23H and 24H Pooled
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.50

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

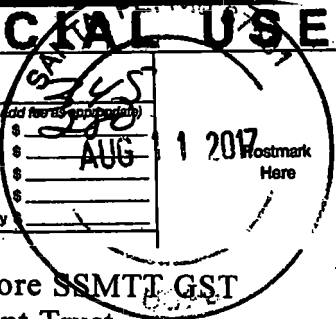
Postage
 \$ 1.00

Total \$ 4.50

Sent To: Ryan Moore SSMTT GST
 Nonexempt Trust
 1204 West 7th St., Ste 200
 Fort Worth, TX 76113

City: SI

PS Form 3800, April 2015, SH (10-1) (10-1) (10-1) 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:
 Ryan Moore SSMTT GST
 Nonexempt Trust
 1204 West 7th St., Ste 200
 Fort Worth, TX 76113

9590 9402 1505 5362 6143 03

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 1111

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Stamp*

B. Received by (Printed Name)
 Sara Carpenter

C. Date of Delivery
 8/14/17

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
☐ Restricted Delivery

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

7102 2104 0000 8463 1104

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Court
 23H and 24H Pooled
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.50

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

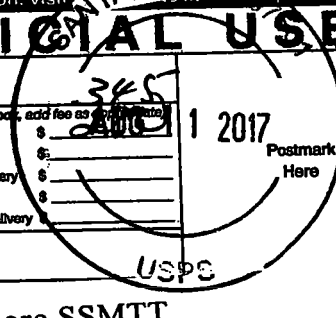
Postage
 \$ 1.00

Total \$ 4.50

Sent To: Kevin Moore SSMTT
 Nonexempt Trust
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

City: PS

PS Form 3800, April 2015, SH (10-1) (10-1) (10-1) 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:
 Kevin Moore SSMTT
 Nonexempt Trust
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

9590 9402 1505 5362 6142 97

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 1104

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Kevin Ellis*

B. Received by (Printed Name)
 KE Ellis

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

9601 2948 0000 0541 2102

U.S. Postal Service White Falcon 16 State Com
CERTIFIED MAIL 23H and 24H Pooled
 Case No. 15813
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

USPS

Ryan Moore SSMTT
 Nonexempt Trust
 1204 West 7th St., Ste 200
 Fort Worth, TX 76113

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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

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

1. Ryan Moore SSMTT
 Nonexempt Trust
 1204 West 7th St., Ste 200
 Fort Worth, TX 76113

9590 9402 2942 7094 6350 32

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 1098

COMPLETE THIS SECTION ON DELIVERY

A. Signature X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 8/14/17

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☐ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

1801 2948 0000 0541 2102

U.S. Postal Service White Falcon 16 State Com
CERTIFIED MAIL 23H and 24H Pooled
 Case No. 15813
 Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

USPS

Meridian 102 LP
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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

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

1. Article Addressed to:

Meridian 102 LP
 16400 N. Dallas Pkwy, Ste 400
 Dallas, TX 75248

9590 9402 2002 6123 0706 16

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 1081

COMPLETE THIS SECTION ON DELIVERY

A. Signature X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 8/14/17

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☐ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

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

White Falcon 16 State Com 23H and 24H - Offset Notice List – Case No. 15813

Devon Energy Production Company, L.P.
P.O. BOX 842485
Dallas, TX 75284-2485

Chevron U.S.A. Inc.
1400 Smith St., 41102
Houston, TX 77002

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

Amerdev New Mexico, LLC
5707 Southwest Parkway
Building 1, Ste. 275
Austin, TX 78735

OneEnergy Partners Operating, LLC
2929 Allen Parkway, Ste. 200
Houston, TX 77019

Chisos Minerals, LLC
1111 Bagby St., Ste. 2150
Houston, TX 77002

Barry B. Thompson
1856 Bugtussle Land
West, TX 76691

G. Dan Thompson
12107 Lueders Land
Dallas, TX 75230

Dr. Guy J. Nations
6th & Hampshire St.
Quincy, IL

Barbara Medlin
4819 E. Libby St.
Scottsdale, AZ 85254

Jerry Billington, a/k/a
Jerry Dewayne Billington
P. O. Box 1994
Amarillo, TX 79105

Michael Hall Medlin
223 FM 74
Boerne, TX 78006

George M. Davis
209 Melody Lane
Gainesville, TX 76240

Georgia Davis Griffith
3302 Trailing Heart Road
Roswell, NM 88201

Donna Davis Hammack
2911 Sable Crossing
San Antonio, TX 78232

Terry Davis Holt
122 Vintage Drive
Corinth, TX 76210

Allen Clay Davis
P. O. Box 962
Ardmore, OK 73402

James M. Davis
924 E. Bryan
Kermit, TX 79745

William K. Hollis
1610 Heritage
Mission, TX 78572

Karen Freck Rogerud
7931 Presidio
Boerne, TX 78015

Michael Freck
P. O. Box 5121
Sam Rayburn, TX 75951

Robert Freck
6020 Manila
El Paso, TX 79924

Shawn Freck
22621 South 2121th St.
Queen Creek, AZ 85242

Joseph Mark Gregory
8905 Random Rd.
Fort Worth, TX 76179

The Cobb Family Trust
1202 Cherrywood Court
Allen, TX 75002

**Pamela Madera, Trustee of The
Madera Trust, U/A 7-20-2016**
3 Rayos De Luz
Placitas, NM 87043

Energen Resources Corporation
605 Richard Arrington, Jr. Boulevard North
Birmingham AL 35203-2707

Norma Baird Loving
2009 Crockett Court
Irving, TX 75038

Weldon R Baird
2009 Crockett Court
Irving, TX 75038

**Richard Lyons Moore and
Michael Scott, Trustees
under the Last Will and Testament
of Stephen Scott Moore, deceased**
P. O. Box 51570
Midland, TX 79710

Santo Petroleum, LLC
P. O. Box 1020
Artesia, NM 88211-1020

OneEnergy Partners Operating, LLC
2029 Allen Parkway, Ste. 200
Houston, TX 77019

**Dan M. Leonard, Trustee of the
DML Revocable Trust dated
January 10, 2007**
P. O. Box 3422
Midland, TX 79702

LML Properties, LLC
P. O. Box 3194
Boulder, CO 80307

Jack's Peak, LLC
P. O. Box 294928
Kerrville, TX 78029

Leonard Legacy Royalty, LLC
P. O. Box 3422
Midland, TX 79702

New Mexico Oil Corporation
P. O. Box 1714
Roswell, NM 88202

Schelro, LTD.
P. O. Box 62490
San Angelo, TX 76906

Amerdev New Mexico, LLC
5707 Southwest Parkway
Building 1, Ste. 275
Austin, TX 78735

Energex, LLC
4425 98th Street, Ste., 200
Lubbock, TX 79424

MRC Permian Co.
5400 LBJ Freeway, Ste. 1500
Dallas, TX 75240

Harold M. Hall, Jr.
1211 Popets Way
Crosby, TX 77532

Donnie Hall
1211 Poppets Way
Crosby, TX 77532

Mike Hall, a/k/a
Michael H. Hall
P. O. Box 2883
Big Spring, TX 79721

George H. Hall
3261 Birch Ave.
Grapevine, TX 76051

Bert Madera
524 Antelope Ridge
Jal, NM 88252

Sara Lee Madera Langford
5310 Fairway Drive W.
Fayetteville, PA 17222-9230

Mildred M. McCall
1484 Hamblen Road
Kingwood, TX 77339

**Eleanor P. Brown, Trustee
Of Trust "A" of the Scott
R. Brown Revocable Trust
Dated 11-27-1996**
1040 Crestview Circle
Farmington, NM 87401

EOG Y Resources Inc.
5509 Champions Drive
Midland, TX 79706

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG Y Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG A Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

Fuel Products, Inc.
P.O. Box 3098
Midland, TX 79702

Gahr Energy Company, Inc.
P.O. Box 1889
Midland, TX 79702

S.N.S. Oil & Gas Properties, Inc.
P.O. Box 2234
Ardmore, OK 73402

COG Acreage LP
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

Apache Corporation
303 Veterans Airpark, Ste. 1000
Midland, TX 79705

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

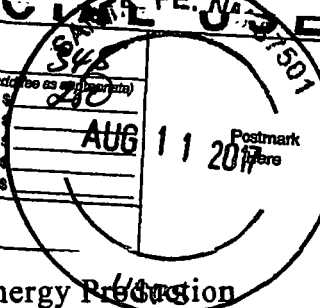
U.S. Postal Service
CERTIFIED MAIL RECEIPT

Domestic Mail Only White Falcon 16 State Com
23H and 24H Offset

For delivery information: Case No. 15813

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
City, State,
P.O. Box 3
Devon Energy Production
Company, L.P.
P.O. BOX 842485
Dallas, TX 75284-2485

- 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:

Devon Energy Production
Company, L.P.
P.O. BOX 842485
Dallas, TX 75284-2485

9590 9402 2942 7094 6375 00

2. Article Number (Transfer from card on back)
7017 1450 0000 8377 7612

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
B. Received by (Printed Name)
C. Date of Delivery
AUG 14 2017
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

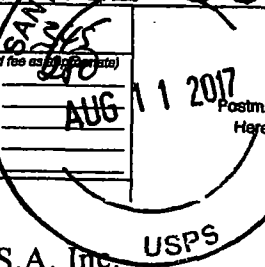
U.S. Postal Service
CERTIFIED MAIL RECEIPT

Domestic Mail Only White Falcon 16 State Com
23H and 24H Offset

For delivery information: Case No. 15813

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 \$



Sent To
Street
City, State,
Chevron U.S.A. Inc.
1400 Smith St., 41102
Houston, TX 77002

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:

Chevron U.S.A. Inc.
1400 Smith St., 41102
Houston, TX 77002

9590 9402 2942 7094 6373 33

2. Article Number (Transfer from card on back)
7017 1450 0000 8377 7629

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

COMPLETE THIS SECTION ON DELIVERY

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

3. Service Type
☐ 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

7017 1450 0000 8377 7636

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

White Falcon 16 State Com
23H and 24H Offset
Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.85

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ _____

☐ Certified Mail Restricted Delivery \$ _____

☐ Adult Signature Required \$ _____

☐ Adult Signature Restricted Delivery \$ _____

Postage \$ _____

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

Postmark Here **11 2017**

USPS

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

9590 9402 2942 7094 6373 40

2. **7017 1450 0000 8377 7636**

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)

ERIK KUMAR

C. Date of Delivery

8.14.17

- 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™
☐ Insured Mail Restricted Delivery (over \$500) ☐ Signature Confirmation Restricted Delivery

Domestic Return to Sender

7017 1450 0000 8377 7643

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

White Falcon 16 State Com
23H and 24H Offset
Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.85

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ _____

☐ Certified Mail Restricted Delivery \$ _____

☐ Adult Signature Required \$ _____

☐ Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Amerdev New Mexico, LLCs
5707 Southwest Parkway
Building 1, Ste. 275
Austin, TX 78735

Postmark Here **AUG 11 2017**

USPS

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for Instructions

7017 1450 0000 8377 7650

U.S. Postal Service
CERTIFIED MAIL White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

For delivery information, visit 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 Post \$
 Sent To
 Street and
 City, State

OneEnergy Partners Operating,
 LLC
 2929 Allen Parkway, Ste. 200
 Houston, TX 77019

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7017 1450 0000 8377 7506

U.S. Postal Service
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813 NM 8

For delivery information, visit 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 Post \$
 Sent To
 Street and
 City, State

Chisos Minerals, LLC
 1111 Bagby St., Ste. 2150
 Houston, TX 77002

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Chisos Minerals, LLC
 1111 Bagby St., Ste. 2150
 Houston, TX 77002

9590 9402 2942 7094 6373 71

2. Article
 7017 1450 0000 8377 7506
 (over \$500)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☒ Addressee

B. Received by (Printed Name)
 Meryl Carrigan

C. Date of Delivery
 8/15/17

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
☐ 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

7016 1370 0000 0804 1343

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15807

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

OFFICIAL USE

31 AUG 11 2017

Postmark Here

USPS

Barry B. Thompson
 1856 Bugtussle Land
 West, TX 76691

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

COMPLETE THIS SECTION

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

Barry B. Thompson
 1856 Bugtussle Land
 West, TX 76691

9590 9402 2942 7094 6373 88

7016 1370 0000 0804 1343

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
 4. Priority Mail Express®
 5. Registered Mail™
 6. Registered Mail Restricted Delivery
 7. Return Receipt for Merchandise
 8. Signature Confirmation
 9. Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0804 1350

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

31 AUG 11 2017

Postmark Here

USPS

G. Dan Thompson
 12107 Lueders Land
 Dallas, TX 75230

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

COMPLETE THIS SECTION

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

G. Dan Thompson
 12107 Lueders Land
 Dallas, TX 75230

9590 9402 2942 7094 6372 34

7016 1370 0000 0804 1350

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
 4. Priority Mail Express®
 5. Registered Mail™
 6. Registered Mail Restricted Delivery
 7. Return Receipt for Merchandise
 8. Signature Confirmation
 9. Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0804 1367

U.S. Postal Service **White Falcon 16 State Com**
CERTIFIED MAIL 23H and 24H Offset
 Domestic Mail Only
 Case No. 65813M 878

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 \$

Sent To
 Street and
 City, State,

Dr. Guy J. Nations
 6th & Hampshire St.
 Quincy, IL

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7016 1370 0000 0804 1374

U.S. Postal Service **White Falcon 16 State Com**
CERTIFIED MAIL 23H and 24H Offset
 Domestic Mail Only
 Case No. 65813M 878

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 \$

Sent To
 Street and
 City, State,

Barbara Medlin
 4819 E. Libby St.
 Scottsdale, AZ 85254

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 2. Print your name and address on the reverse so that we can return this card to you.
 3. Attach this card to the back of the mailpiece, at the top.

1. Address Addressed to:
 Barbara Medlin
 4819 E. Libby St.
 Scottsdale, AZ 85254

2. ZIP+4® 4 6372 58

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☒ Addressee

B. Received by (Printed Name)
 B. Medlin

C. Date of Delivery
 8/15/17

D. Is delivery address different from item 1? ☒ Yes
 If YES, enter delivery address below: ☐ No
 405 Kentmere Ln.
 Claver, SC 29710

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

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

7016 1370 0000 0804 1404

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

For delivery information, visit **OFFICIAL USE**

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 1584

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

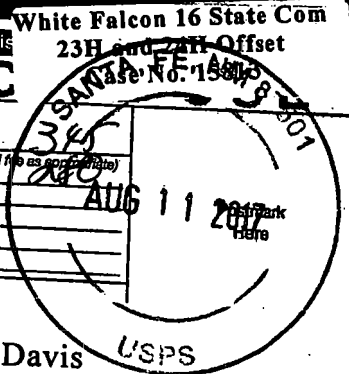
Postage \$
 Total Po \$

Sent To
 Street at
 City, State

George M. Davis
 209 Melody Lane
 Gainesville, TX 76240

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED



7016 1370 0000 0804 1411

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

For delivery information, visit **OFFICIAL USE**

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 1584

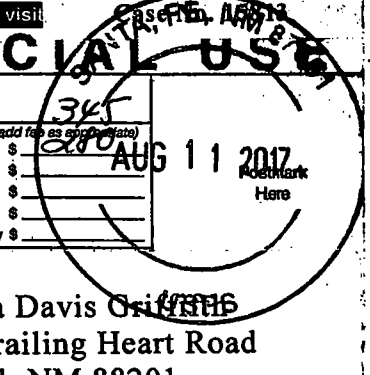
Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage \$
 Total Postage \$

Sent To
 Street and
 City, State

Georgia Davis Griffith
 3302 Trailing Heart Road
 Roswell, NM 88201

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions



COMPLETE THIS SECTION ON DELIVERY

1. 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.

Georgia Davis Griffith
 3302 Trailing Heart Road
 Roswell, NM 88201

9590 9402 2942 7094 6374 32

2. Address to which return card should be sent (if different from address above)

7016 1370 0000 0804 1411

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

COMPLETE THIS SECTION ON DELIVERY

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

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

3. Service Type
☐ 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

7016 1370 0000 0804 1428

U.S. Postal Service[®]
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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 Post
 \$

Sent To
 Donna Davis Hammack
Street and
 2911 Sable Crossing
City, State,
 San Antonio, TX 78232

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

7016 1370 0000 0804 1435

U.S. Postal Service[®]
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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
 \$

Sent To
 Terry Davis Holt
Street and Ap
 122 Vintage Drives
City, State, Zi
 Corinth, TX 76210

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

7016 3010 0742 1041

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

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

Postage \$
 Total Postage \$

Sent To
 Street and A/c
 City, State, ZIP

Allen Clay Davis
 P. O. Box 962
 Ardmore, OK 73402

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

COMPLETE THIS SECTION

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

1. Article Addressed to:
 Allen Clay Davis
 P. O. Box 962
 Ardmore, OK 73402

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Allen Clay Davis* ☐ Agent ☒ Addressee

B. Received by (Printed Name)
 Allen Clay Davis

C. Date of Delivery
 8-14-17

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

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

Article Number (Transfer from carrier label)
 9590 9402 2942 7094 6374 63
 7016 3010 0001 0742 1041

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

7016 3010 0001 0742 1041

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

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

Postage \$
 Total Postage \$

Sent To
 Street and A/c
 City, State, ZIP

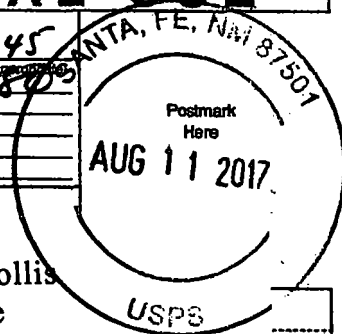
James M. Davis
 924 E. Bryan
 Kermit, TX 79745

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

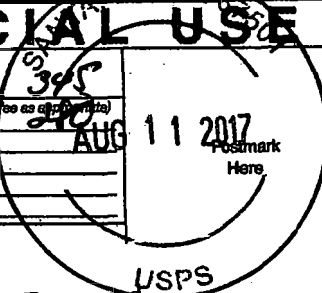
7016 3010 0001 0742 1027

U.S. Postal Service™	
CERTIFIED MAIL®	
Domestic Mail Only	
White Falcon 16 State Com 23H and 24H Offset Case No. 15813	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee	\$ 3.45
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$ 2.80
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$
Sent To William K. Hollis 1610 Heritage Mission, TX 78572	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions	



7016 3010 0001 0742 2406

U.S. Postal Service™	
CERTIFIED MAIL®	
Domestic Mail Only	
White Falcon 16 State Com 23H and 24H Offset Case No. 15813	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee	\$ 3.45
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$ 2.80
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage	\$
Sent To Karen Freck Rogerud 7931 Presidio Boerne, TX 78015	
City, State, ZIP+4®	
PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions	



RETURNED

0642 2420 0001 0742 2390

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

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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
 \$

Sent To
 Michael Freck
 P. O. Box 5121
 Sam Rayburn, TX 75951

Street and
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:
 Michael Freck
 P. O. Box 5121
 Sam Rayburn, TX 75951

2. Article Number
 9590 9402 2763 6351 3728 45

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

A. Signature
 X *Michael Freck*

B. Received by (Printed Name)
 Michael Freck

C. Date of Delivery
 8/15/17

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

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

7016 3010 0001 0742 0976

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

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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
 \$

Sent To
 Robert Freck
 6020 Manila
 El Paso, TX 79924

Street and Apt
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 3010 0001 0742 0969

U.S. Postal ServiceTM
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15883

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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 \$

Sent To
 Street and A
 City, State, ZIP+4[®]

Shawn Freck
 22621 South 2121th St.
 Queen Creek, AZ 85242

PS Form 3800, April 2015 PSN 7530-02-000-904 See Reverse for Instructions

7016 3010 0001 0742 0952

U.S. Postal ServiceTM
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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 \$

Sent To
 Street and A
 City, State, ZIP+4[®]

Joseph Mark Gregory
 8905 Random Rd.
 Fort Worth, TX 76179

PS Form 3800, April 2015 PSN 7530-02-000-904 See Reverse for Instructions

COMPLETE THIS SECTION

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X [Signature]
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 [Signature]
 Date of Delivery 8/11/17

C. 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

2. An
 7016 3010 0001 0742 0952

PS Form 3811, July 2015 PSN 7630-02-000-9053 Domestic Return Receipt

7016 3010 0001 0742 0945

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

White Falcon 16 State Com
23H and 24H Offset
Case No. 15813

For delivery information, visit our website at usps.com

OFFICIAL USE

Certified Mail Fee \$ 3.95

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **The Cobb Family Trust**
1202 Cherrywood Court
Allen, TX 75002

Street and A
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:

The Cobb Family Trust
1202 Cherrywood Court
Allen, TX 75002

9590 9402 2763 6351 3728 07

2. Article Number (Transfer from service label)
7016 3010 0001 0742 0945

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Name] C. Date of Delivery 8-15-17

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

3. Service Type

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

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

9590 9402 2763 6351 3734 46

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

White Falcon 16 State Com
23H and 24H Offset
Case No. 15813

For delivery information, visit our website at usps.com

OFFICIAL USE

Certified Mail Fee \$ 3.95

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **Pamela Madera, Trustee of The Madera Trust, U/A 7-20-2016**
3 Rayos De Luz
Placitas, NM 87043

Street and A
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:

Pamela Madera, Trustee of The Madera Trust, U/A 7-20-2016
3 Rayos De Luz
Placitas, NM 87043

9590 9402 2763 6351 3734 46

2. Article Number (Transfer from service label)
7016 3010 0001 0742 0938

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Madera C. Date of Delivery 8/17/17

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

3. Service Type

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

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

7016 3010 0001 0742 1522

U.S. Postal ServiceTM
CERTIFIED MAIL[®]
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset,
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Post \$

Sent To

Street and

City, State

Energen Resources Corporation
 605 Richard Arrington, Jr.
 Boulevard North
 Birmingham AL 35203-2707

PS Form 3800, April 2015 PSN 7530-02-000-9045 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature Brenda Armstrong ☐ Agent ☐ Addressee

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

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

1. Article Addressed to

Energen Resources Corporation
 605 Richard Arrington, Jr.
 Boulevard North
 Birmingham AL 35203-2707

9590 9402 2763 6351 3734 39

2. Article 7016 3010 0001 0742 1522

3. Service Type ☐ Priority Mail Express[®] ☐ Registered Mail[™]
☐ Adult Signature ☐ Registered Mail Restricted Delivery
☐ Adult Signature Restricted Delivery ☐ Certified Mail[®]
☐ 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

7016 3010 0001 0742 1133

U.S. Postal ServiceTM
CERTIFIED MAIL[®]
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Post \$

Sent To

Street and

City, State

Norma Baird Loving
 2009 Crockett Court
 Irving, TX 75038

PS Form 3800, April 2015 PSN 7530-02-000-9045 See Reverse for Instructions

7016 3010 0001 0742 1126

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Court
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee to postage)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **Weldon R Baird**
 2009 Crockett Court
 Irving, TX 75038

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Weldon R Baird
 2009 Crockett Court
 Irving, TX 75038

9590 9402 2763 6351 3734 15

2. A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Baird
 C. Date of Delivery 8-14-17

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

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

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

7016 3010 0001 0742 1119

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Court
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee to postage)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **Richard Lyons Moore and Michael Scott, Trustees**
 under the Last Will and Testament
 of Stephen Scott Moore, deceased
 P. O. Box 51570
 Midland, TX 79710

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Richard Lyons Moore and Michael Scott, Trustees
 under the Last Will and Testament
 of Stephen Scott Moore, deceased
 P. O. Box 51570
 Midland, TX 79710

9590 9402 2942 7094 6373 95

2. A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) Richard Lyons Moore
 C. Date of Delivery 8/14/17

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

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

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

7016 3010 0001 0742 1102

U.S. Postal Service[™]
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813
 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 \$

Sent To
 Street
 City, State

Santo Petroleum, LLC
 P. O. Box 1020
 Artesia, NM 88211-1020

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

COMPLETE THIS SECTION

1. 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 Number (Transfer from sender's label)
 9590 9402 2942 7094 6363 12

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

4. Signature
☒ Agent
☐ Addressee

5. Received by (Printed Name)
 Ruben

6. Date of Delivery
 8/14/17

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

8. Signature Confirmation[™]
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery[™]

Domestic Return Receipt

7016 3010 0001 0742 1096

U.S. Postal Service[™]
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813
 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 \$

Sent To
 Street
 City, State

OneEnergy Partners Operating, LLC
 2029 Allen Parkway, Ste. 200
 Houston, TX 77019

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

U.S. Postal Service™

CERTIFIED MAIL®

Domestic Mail Only

White Falcon 16 State Com

23H and 24H Offset

Case No: 15613

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 Post

\$

Sent To

Street and

City, State

Dan M. Leonard, Trustee of the
DML Revocable Trust dated
January 10, 2007
P. O. Box 3422
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-100

See Reverse for Instructions

U.S. Postal Service™

CERTIFIED MAIL®

Domestic Mail Only

White Falcon 16 State Com

23H and 24H Offset

Case No: 15613

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 Post

\$

Sent To

Street and

City, State

LML Properties, LLC
P. O. Box 3194
Boulder, CO 80307

PS Form 3800, April 2015 PSN 7530-02-000-100

See Reverse for Instructions

UNDER 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:

LML Properties, LLC
P. O. Box 3194
Boulder, CO 80307

9590 9402 2942 7094 6365 10

2. Article Number (Transfer from sender label)

7016 3010 0001 0742 1072

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

LISA L. DUKES

C. Date of Delivery

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

P.O. Box 3194

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Signature Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 3010 0001 0742 1065

U.S. Postal Service[®]
CERTIFIED MAIL[®] White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813
 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 \$
 Sent To
 Street and A/
 City, State, ZIP+4[®]

Jack's Peak, LLC USPS
 P. O. Box 294928
 Kerrville, TX 78029

PS Form 3800, April 2015 PSN 7530-02-000-9054 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:

Jack's Peak, LLC
 P.O. Box 294928
 Kerrville, TX 78029

9590 9402 2942 7094 6365 03

2. Article Addressed to:
 7016 3010 0001 0742 1065

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Robert K. Leonard* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
Robert K. Leonard 8/11/17
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☐ Adult Signature ☐ Priority Mail Express[®]
☐ Adult Signature Restricted Delivery ☐ Registered Mail[™]
☐ Certified Mail[®] ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery
☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7016 3010 0001 0742 1058

U.S. Postal Service[®]
CERTIFIED MAIL[®] White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813
 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 \$
 Sent To
 Street and A/
 City, State, ZIP+4[®]

Leonard Legacy Royalty, LLC
 P. O. Box 3422
 Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9054 See Reverse for Instructions

7017 1450 0000 8377 7797

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

For delivery information, visit our website at 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 \$
 Sent To
 Street and Apt. #
 City, State, ZIP+

New Mexico Oil Corporation
 P. O. Box 1714
 Roswell, NM 88202

PS Form 3800, April 2015 PSN 7530-02-000-8083 See Reverse for Instructions

- 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:

New Mexico Oil Corporation
 O. Box 1714
 Roswell, NM 88202

9590 9402 2763 6351 3733 92

7017 1450 0000 8377 7797

PS Form 3811, July 2015 PSN 7530-02-000-8083

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Vanessa Sutton

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Vanessa Sutton

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

7017 1450 0000 8377 7803

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

For delivery information, visit our website at 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 Post \$
 Sent To
 Street and
 City, State,

Schelro, LTD.
 P. O. Box 62490
 San Angelo, TX 76906

PS Form 3800, April 2015 PSN 7530-02-000-8083 See Reverse for Instructions

- 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:

Schelro, LTD.
 P. O. Box 62490
 San Angelo, TX 76906

9590 9402 2763 6351 3728 76

2. Article Number (Transfer from service label)

7017 1450 0000 8377 7803

PS Form 3811, July 2015 PSN 7530-02-000-8083

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Arriel mendez

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Arriel mendez

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

Domestic Return Receipt

7017 1450 0000 8377 7810

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only
 For delivery information, visit www.usps.com

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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 \$

Sent To Amerdev New Mexico, LLC
 5707 Southwest Parkway
 Building 1, Ste. 275
 Austin, TX 78735

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7017 1450 0000 8377 7667

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only
 For delivery information, visit our website at www.usps.com

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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 \$

Sent To Energex, LLC
 4425 98th Street, Ste., 200
 Lubbock, TX 79424

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SEE DESK 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:
 Energex, LLC
 4425 98th Street, Ste., 200
 Lubbock, TX 79424

9590 9402 2763 6351 3728 52

7017 1450 0000 8377 7667

PS Form 3811, July 2016 PSN 7530-02-000-9053

2. Signature
 X
 B. Received by (Printed Name)
 C. Date of Delivery
 AUG 17 2017

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 2016 PSN 7530-02-000-9053

7017 1450 0000 8377 7674

U.S. Postal Service™
CERTIFIED MAIL White Falcon 16 State Com
Domestic Mail Only 23H and 24H Offset
Case No. 15813
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 \$
Sent To MRC Permian Co.
5400 LBJ Freeway, Ste. 1500
Dallas, TX 75240
City, State, ZIP

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER, COMPLETE THIS SECTION

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

1. Article Number 9590 9402 2942 7094 6364 11

2. Article Number 7017 1450 0000 8377 7674

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Signature ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 8/14/17

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

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collection Delivery ☐ Signature Confirmation™
☐ Insured Mail Restricted Delivery (over \$500) ☐ Signature Confirmation Restricted Delivery

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

7017 1450 0000 8377 7681

U.S. Postal Service™
CERTIFIED MAIL White Falcon 16 State Com
Domestic Mail Only 23H and 24H Offset
Case No. 15813
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 \$
Sent To Harold M. Hall, Jr.
1211 Popets Way
Crosby, TX 77532
City, State, ZIP

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7017 1450 0000 8377 7698

U.S. Postal ServiceTM
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813

For delivery information, visit 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 \$
 Sent To
 Street and Apt. No.
 City, State, ZIP+4[®]

Donnie Hall
 1211 Poppets Way
 Crosby, TX 77532

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Donnie Hall
 1211 Poppets Way
 Crosby, TX 77532

9590 9402 2942 7094 6363 98

2. 7017 1450 0000 8377 7698

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise[®]
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

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

7017 1450 0000 8377 7704

U.S. Postal ServiceTM
CERTIFIED MAIL White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813

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 \$
 Sent To
 Street and Apt. No.
 City, State, ZIP+4[®]

Mike Hall, a/k/a
 Michael H. Hall
 P. O. Box 2883
 Big Spring, TX 79721

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mike Hall, a/k/a
 Michael H. Hall
 P.O. Box 2883
 Big Spring, TX 79721

9590 9402 2942 7094 6363 81

2. 7017 1450 0000 8377 7704

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express[®]
☐ Registered MailTM
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise[®]
☐ Signature ConfirmationTM
☐ Signature Confirmation Restricted Delivery

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

7017 1450 0000 8377 7711

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

White Falcon 16 State Com.
 23H and 24H Offset
 Case No. 15813

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 Post

\$

Sent To

Street and

City, State,

George H. Hall
 3261 Birch Ave.
 Grapevine, TX 76051

Postmark

AUG 11 2017

USPS

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

George H. Hall
 3261 Birch Ave.
 Grapevine, TX 76051

9590 9402 2942 7094 6363 74

2. Article Number (Manufacturer's number label)

7017 1450 0000 8377 7711

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Howard Hall

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)

Domestic Return Receipt

7017 1450 0000 8377 7720

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

White Falcon 16 State Com.
 23H and 24H Offset
 Case No. 15813

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 Post

\$

Sent To

Street and

City, State,

Bert Madera
 524 Antelope Ridge
 Jal, NM 88252

USPS

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

See Reverse for Instructions

RETURNED

7017 1450 0000 8377 7872

U.S. Postal Service®
CERTIFIED MAIL® White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813
 For delivery information, visit 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 For \$
 Sent To \$
 Street \$
 City, State, ZIP+4® \$

Sara Lee Madera Langford
 5310 Fairway Drive WUSPS
 Fayetteville, PA 17222-9230

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

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:
 Sara Lee Madera Langford
 5310 Fairway Drive W.
 Fayetteville, PA 17222-9230

2. Article Number (Transfer from service label)
 9590 9402 2942 7094 6363 50
 7017 1450 0000 8377 7872

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

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

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

7017 1450 0000 8377 7865

U.S. Postal Service®
CERTIFIED MAIL® White Falcon 16 State Com
 Domestic Mail Only 23H and 24H Offset
 Case No. 15813
 For delivery information, visit 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 \$
 Sent \$
 Street \$
 City, State, ZIP+4® \$

Mildred M. McCull
 1484 Hamblen Road
 Kingwood, TX 77339

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

RETURNED

7017 1450 0000 8377 7858

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.70

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage
 \$

Sent To
 Eleanor P. Brown, Trustee
 Of Trust "A" of the Scott
 R. Brown Revocable Trust
 Dated 11-27-1996
 1040 Crestview Circle
 Farmington, NM 87401

Street and
 City, State, ZIP+4®

PS Form 3800, April 2013 See Reverse for Instructions

7017 1450 0000 8377 7841

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813

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

OFFICIAL USE

Certified Mail Fee
 \$ 3.45

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

☒ Return Receipt (hardcopy) \$ 2.70

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage
 \$

Sent To
 EOG Y Resources Inc.
 5509 Champions Drive
 Midland, TX 79706

Street and A
 City, State, ZIP+4®

PS Form 3800, April 2013 See Reverse for Instructions

7017 1450 0000 8377 7834

U.S. Postal Service

CERTIFIED MAIL

Domestic Mail Only

White Falcon 16 State Com

23H and 24H Offset

Case No. 15813

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

\$

Sent

Street

City, State, ZIP+4

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

PS Form 3800, April 2015 PSN 7537-02-000-9001

See Reverse for Instructions

7017 1450 0000 8377 7827

U.S. Postal Service

CERTIFIED MAIL

Domestic Mail Only

White Falcon 16 State Com

23H and 24H Offset

Case No. 15813

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

\$

Sent To

Street and A

City, State, ZIP+4

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

PS Form 3800, April 2015 PSN 7537-02-000-9001

See Reverse for Instructions

7017 1450 0000 8377 7759

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Court
 23H and 24H Offset
 Case No. 15813

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
 \$

Sent To
 Street
 City, State

EOG Y Resources Inc
 105 S. 4th Street
 Artesia, NM 88210

Postmark Here
 AUG 1 2017

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

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:

EOG Y Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

9590 9402 2942 7094 6364 73

2. Article Number (Member form only)
 7017 1450 0000 8377 7759

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)

SDAMS

C. Date of Delivery

8/1/17

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

Delivery Restricted Delivery
 Restricted Delivery
 (over \$500)

7017 1450 0000 8377 7766

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Court
 23H and 24H Offset
 Case No. 15813

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
 \$

Sent To
 Street
 City, State

EOG A Resources Inc
 105 S. 4th Street
 Artesia, NM 88210

Postmark Here
 AUG 1 2017

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

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:

EOG A Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

9590 9402 2942 7094 6364 66

2. Article Number (Member form only)
 7017 1450 0000 8377 7766

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)

SDAMS

C. Date of Delivery

8/1/17

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

Delivery Restricted Delivery
 Restricted Delivery
 (over \$500)

Domestic Return Receipt

7017 1450 0000 8377 7773

U.S. Postal Service White Falcon 16 State Com
CERTIFIED MAIL 23H and 24H Offset
Domestic Mail Only Case No. 15813

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

OFFICIAL USE

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

Postage \$
Total \$

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

City, State, ZIP+4

PS Form 3800, April 2015 See Reverse for Instructions

7017 1450 0000 8377 7780

U.S. Postal Service White Falcon 16 State Com
CERTIFIED MAIL 23H and 24H Offset
Domestic Mail Only Case No. 15813

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

OFFICIAL USE

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

Postage \$
Total \$

Fuel Products, Inc.
P.O. Box 3098
Midland, TX 79702SPS

City, State, ZIP+4

PS Form 3800, April 2015 See Reverse for Instructions

7017 1450 0000 8462 9804

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only
 White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813
 For delivery information, visit 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 \$
 Sent To
 Street &
 City, Sta

Gahr Energy Company, Inc.
 P.O. Box 1889
 Midland, TX 79702

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

7017 1450 0000 8462 9811

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only
 White Falcon 16 State Com
 23H and 24H Offset
 Case No. 15813
 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 \$
 Sent To
 Street &
 City, Sta

S.N.S. Oil & Gas Properties, Inc.
 P.O. Box 2234
 Ardmore, OK 73402

PS Form 3800, April 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.

1. Article Addressed to:

S.N.S. Oil & Gas Properties, Inc.
 P.O. Box 2234
 Ardmore, OK 73402

9590 9402 2942 7094 6364 28

2. Article Number (Transfer from carrier label)

7017 1450 0000 8462 9811

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

COMPLETE THIS SECTION ON DELIVERY

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

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

3. Service Type
- ☐ Adult Signature
 - ☐ Adult Signature Restricted Delivery
 - ☒ Certified Mail®
 - ☐ Certified Mail Restricted Delivery
 - ☐ Collect on Delivery
 - ☐ Delivery Restricted Delivery
 - ☐ Restricted Delivery (over \$500)
 - ☐ Money Mail®
 - ☐ Registered Mail®
 - ☐ Registered Mail Restricted Delivery
 - ☐ Return Receipt for Merchandise
 - ☐ Signature Confirmation®
 - ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7017 1450 0000 8462 9828

U.S. Postal Service
CERTIFIED MAIL
 White Falcon 16 State Com
 23H and 24H Offset
 Domestic Mail Only
 Case No. 15813
 For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45
 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
 \$ 2.00
 Total Postage
 \$ 5.45
 Sent To
 Street and/A
 City, State, Z

COG Acreage LP
 One Concho Center
 600 W. Illinois Ave.
 Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:
 COG Acreage LP
 One Concho Center
 600 W. Illinois Ave.
 Midland, TX 79701

2. Article Number (Transfer from back of item)
 9590 9402 2942 7094 6366 71

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Insured Mail Restricted Delivery (over \$500)

A. Signature
 X *J. Monroe*
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 J. MONROE

C. Date of Delivery
 8-14-17

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

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

7017 1450 0000 8462 9835

U.S. Postal Service
CERTIFIED MAIL
 White Falcon 16 State Com
 23H and 24H Offset
 Domestic Mail Only
 Case No. 15813
 For delivery information, visit usps.com

OFFICIAL USE

Certified Mail Fee
 \$ 3.45
 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
 \$ 1.20
 Total Postage
 \$ 4.65
 Sent To
 Street and/A
 City, State, Z

Apache Corporation
 303 Veterans Airpark, Ste.
 1000
 Midland, TX 79705

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:
 Apache Corporation
 303 Veterans Airpark, Ste.
 1000
 Midland, TX 79705

2. Article Number
 9590 9402 2942 7094 6366 64

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Insured Mail Restricted Delivery (over \$500)

A. Signature
 X *April Willis*
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 April Willis

C. Date of Delivery
 8/15/17

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

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

7017 1450 0000 8462 9842

U.S. Postal Service
CERTIFIED MAIL
 Domestic Mail Only

White Falcon 16 State Com.
 23H and 24H Offset
 Case No. 15813

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 at
 \$

Sent To
 Street and Apt. N
 City, State, ZIP+4

Chisos, Ltd.
 670 Dona Ana Road SW
 Deming, NM 88030

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Number (Transfer from service label)
 9590 9402 2942 7094 6368 24
 7017 1450 0000 8462 9842

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 B. Sandoz

C. Date of Delivery
 8/1/17

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

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

HOLLAND & HART



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

August 11, 2017

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.**

White Falcon 16 State Com No. 23H Well

White Falcon 16 State Com No. 24H Well

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on August 31, 2017. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices, located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

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

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

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

Denver Dallas Fort Worth Houston Kansas City Los Angeles Miami Minneapolis New York City Phoenix Portland San Francisco Seattle Tampa Washington, D.C.

HOLLAND & HART ^{LLP}



Jordan L. Kessler

Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

August 11, 2017

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
White Falcon 16 Federal Com No. 23H Well
White Falcon 16 Federal Com No. 24H Well**

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

This application has been set for hearing before a Division Examiner at 8:15 AM on August 31, 2017. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

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

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart ^{LLP}

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

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

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

**White Falcon 16 Fed Com 21H 22H - Pooling Notice List:
Case No. 15812**

EOG Y Resources Inc.
5509 Champions Drive
Midland, TX 79706

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG Y Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG A Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

Fuel Products, Inc.
P.O. Box 3098
Midland, TX 79702

Gahr Energy Company
PO Box 1889
Midland, TX 79702

S.N.S. Oil & Gas Properties, Inc.
P.O. Box 2234
Ardmore, OK 73402

V-F Petroleum, Inc.
P.O. Box 1889
Midland, TX 79702

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

Apache Corporation
303 Veterans Airpark, Ste. 1000
Midland, TX 79705

Estate of Elbert E. Medlin, deceased
4819 E Libby Lane
Scottsdale, AZ 85254

Estate of Elbert E. Medlin, deceased
c/o Shamrock Royalty, LLC
200 W. Hwy 6, Ste 320
Woodway, TX 76712

Estate of Jamie Ann Billington, deceased
c/o Jerry Billington
P.O. Box 1994
Amarillo, TX 79105

Estate of Ora Mae Davis, deceased
c/o James Davis
P.O. Box 4251
Midland, TX 79704

Estate of Ora Mae Davis, deceased
c/o Gary G. Davis
404 Circleview Dr. S.
Hurst, TX 76054

Estate of Ora Mae Davis, deceased
c/o Charlotte S. E. Garza
324 Heneretta Drive
Hurst, TX 76054-2242

Estate of Ora Mae Davis, deceased
c/o Lee & Judy Davis Revocable Trust
1625 9th Ave SE
St Cloud, MN 56304

Estate of Ora Mae Davis, deceased
c/o George M. Davis
209 Melody Lane
Gainesville, TX 76240

Estate of Beulah M. Baird, deceased
2009 Crockett Ct
Irving, TX 75038

Norma Baird Loving, Trustee of the Beulah M. Baird Trust dated July 6, 1990
2009 Crockett Ct
Irving, TX 75038

Weldon Baird, Trustee of the Beulah M. Baird Trust dated July 6, 1990
709 McCoy Drive
Irving, TX 75062

7017 1450 0000 8462 9088

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

For delivery information, visit **White Falcon 16 Fed Com**
1H 22H Pooling Notice
 List Case No. 15892

OFFICIAL

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage \$

Total Postage \$

Sent To **EOG Y Resources Inc.**
5509 Champions Drive
Midland, TX 79706

Street Address

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-01-000-9001 See Reverse for Instructions

Postmark Here **NOV 1 2017**

7017 1450 0000 8462 9071

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

For delivery information, visit **White Falcon 16 Fed Com**
1H 22H Pooling Notice
 List Case No. 15812

OFFICIAL

Certified Mail Fee \$ 3.45

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

☒ Return Receipt (hardcopy)	\$ <u>2.80</u>
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage \$

Total Postage \$

Sent To **EOG A Resources, Inc.**
5509 Champions Drive
Midland, TX 79706

Street Address

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-01-000-9001 See Reverse for Instructions

Postmark Here **NOV 1 2017**

7017 1450 0000 8462 9064

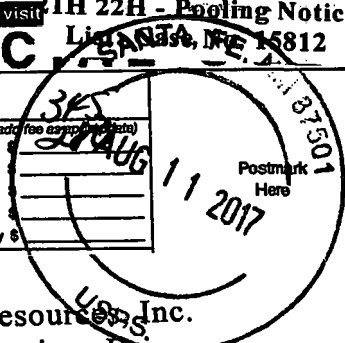
U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **White Falcon 16 Fed Com**
1H 22H - Pooling Notice
OFFICE List Case No. 15812

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 \$

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9033



7017 1450 0000 8462 9057

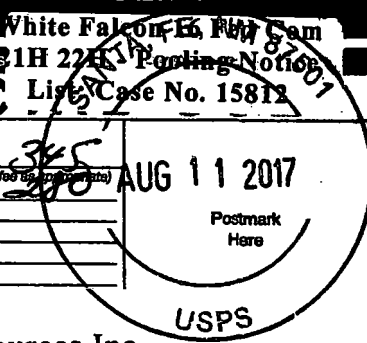
U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **White Falcon 16 Fed Com**
1H 22H - Pooling Notice
OFFICE List Case No. 15812

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 \$

EOG Y Resources Inc.
105 S. 4th Street
Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9033



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:

EOG Y Resources Inc.
105 S. 4th Street
Artesia, NM 88210

9590 9402 2942 7094 6369 92

2. Article Number (Transfer from service label)

7017 1450 0000 8462 9057

PS Form 3811, July 2015 PSN 7530-02-000-9033

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

JOHNS

C. Date of Delivery

8/11/17

- 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

Domestic Return Receipt

7017 1450 0000 8462 9040

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

White Falcon 16 Fed Co
1H 22H - Pooling Notice
List Case No. 1582

For delivery information, visit **OFFICIAL**

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 \$

EOG A Resources Inc.
105 S. 4th Street
Artesia, NM 88210

USPS

PS Form 3800, April 2015

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.

EOG A Resources Inc.
105 S. 4th Street
Artesia, NM 88210

9590 9402 2942 7094 6370 05

7017 1450 0000 8462 9040

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

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

7017 1450 0000 8462 9033

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

White Falcon 16 Fed Co
1H 22H - Pooling Notice
List Case No. 1582

For delivery information, visit **OFFICIAL**

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 \$

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

USPS

PS Form 3800, April 2015

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.

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

9590 9402 2942 7094 6355 37

7017 1450 0000 8462 9033

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

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

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

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

7017 1450 0000 8462 9026

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only White Falcon 16 Fed Com
 For delivery information, visit **1H 22H - Pooling Notice**
OFFICIAL List Case No. 15812
 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 \$
 Postmark Here
 USPS
 Post
 \$
 Total Fuel Products, Inc.
 \$ P.O. Box 3098
 Ser. Midland, TX 79702
 Str
 City
 PS Form 3800, April 2015 PSN 7530-01-000-9047 See Reverse for Instructions

7017 1450 0000 8462 9019

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only White Falcon 16 Fed Com
 For delivery information, visit **1H 22H - Pooling Notice**
OFFICIAL List Case No. 15812
 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 \$
 Postmark Here
 USPS
 Post
 \$
 Total Gahr Energy Company
 \$ PO Box 1889
 Ser. Midland, TX 79702
 Str
 City
 PS Form 3800, April 2015 PSN 7530-01-000-9047 See Reverse for Instructions

7017 1450 0000 8462 9002

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

White Falcon 16 Fed Com
 1H 22H - Pooling Notice
 List: Case No. FE 15912

For delivery information, visit **OFFICIAL MAIL**

Certified Mail Fee \$ 3.50

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

☐ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postmark AUG 11 4:59 PM

S.N.S. Oil & Gas Properties, Inc.
 P.O. Box 2234
 Ardmore, OK 73402

USPS

PS Form 3800, April 2015 PSN 7530-02-000-9002 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.

S.N.S. Oil & Gas Properties, Inc.
 P.O. Box 2234
 Ardmore, OK 73402

9590 9402 2942 7094 6355 68

2. Article Number (Transfer from sender label)

7017 1450 0000 8462 9002

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) SESON C. Date of Delivery AUG 14 2017

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

3. Service Type

☒ Priority Mail Express[®] ☐ Registered Mail[™]

☐ Adult Signature ☐ Registered Mail Restricted Delivery

☐ Adult Signature Restricted Delivery ☐ Certified Mail[®] ☐ Return Receipt for Merchandise

☐ Certified Mail[®] ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation[™]

☐ Collect on Delivery ☐ Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

☐ Restricted Delivery (over \$500)



7017 1450 0000 8462 9194

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

White Falcon 16 Fed Com
 1H 22H - Pooling Notice
 List: Case No. FE 15912

For delivery information, visit **OFFICIAL MAIL**

Certified Mail Fee \$ 3.50

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

☐ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postmark AUG 11 2017

V-F Petroleum, Inc.
 P.O. Box 1889
 Midland, TX 79702

USPS

PS Form 3800, April 2015 PSN 7530-02-000-9002 See Reverse for Instructions

2017 1450 0000 2948 9187

U.S. Postal Service

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit [usps.com](#)

OFFICE OF THE POSTMASTER GENERAL

White Falcon 16 Fed Com

1H-22HF-E-Pooling Notice

List: Case No. 08-8812

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee amount appropriate)	
☒ Return Receipt (hardcopy)	\$ 3.45
☐ Return Receipt (electronic)	\$ 2.40
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark Here

Post Office

To:

From:

City:

State:

Zip+4:

PS Form 3800, April 2009. See usps.com for details.

- 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 _____, if space permits.

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

9590 9402 2942 7094 6356 12

7017 1450 0000 8462 9187

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

A. Signature 		☒ Agent ☐ Addressee	
B. Received by (Printed Name) S. Jacobsen		C. Date of Delivery 8/14/17	
D. Is delivery address different from item 7? If YES, enter delivery address below:		☒ Yes ☐ 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

487

~~Restricted Delivery~~ ~~Restricted Delivery~~

Domestic Return Regime

- 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.

Apache Corporation
303 Veterans Airpark, Ste.
1000
Midland, TX 79705

9590 9402 2942 7094 6356 29

7017 1450 0000 8462 9170

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

A. Signature X <i>April Willis</i>		☐ Agent ☒ Addressee
B. Received by (Printed Name) <i>April Willis</i>	C. Date of Delivery <i>8/15/17</i>	
D. Is delivery address different from item 1? If YES, enter delivery address below:		☐ Yes ☒ 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

Domestic Return Recalculat

7017 1450 0000 8462 9163

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

White Falcon 16 Fed Com
For delivery information, visit **1H 22H - Posting Notice**
List: Case No. 15812

OFFICIAL

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 \$
Sent: Estate of Elbert E. Medlin, deceased
4819 E Libby Lane
Scottsdale, AZ 85254
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7017 1450 0000 8462 9156

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

White Falcon 16 Fed Com
For delivery information, visit **1H 22H - Posting Notice**
List: Case No. 15812

OFFICIAL

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 \$
Sent: Estate of Elbert E. Medlin, deceased
c/o Shamrock Royalty, LLC
200 W. Hwy 6, Ste 320
Woodway, TX 76712
City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Estate of Elbert E. Medlin, deceased
c/o Shamrock Royalty, LLC
200 W. Hwy 6, Ste 320
Woodway, TX 76712

9590 9402 2942 7094 6356 43

COMPLETE THIS SECTION ON DELIVERY

Signature ☒ Agent
X ☐ Addressee

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

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

7017 1450 0000 8462 9149

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only White Falcon 16 Fed Com
For delivery information, visit www.usps.com or call 1-800-275-8777
OFFICIAL List: Case No. 15812

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 \$
Sent \$
Street \$
City, State, ZIP+4[®]

Estate of Jamie Ann Billington,
deceased
c/o Jerry Billington
P.O. Box 1994
Amarillo, TX 79105

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RETURNED

7017 1450 0000 8462 9132

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only White Falcon 16 Fed Com
For delivery information, visit www.usps.com or call 1-800-275-8777
OFFICIAL List: Case No. 15812

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 \$
Sent \$
Street \$
City, State, ZIP+4[®]

Estate of Ora Mae Davis,
deceased
c/o James Davis
P.O. Box 4251
Midland, TX 79704

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

Estate of Ora Mae Davis,
deceased
c/o James Davis
P.O. Box 4251
Midland, TX 79704

9590 9402 2942 7094 6365 72

2. Article Number (Transfer from service label)
7017 1450 0000 8462 9132

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]*

B. Received by (Printed Name)
JAMES DAVIS

C. Date of Delivery
AUG 11 2017

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

Domestic Return Receipt

7017 1450 0000 8462 9125

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only White Falcon 16 Fed Com
 For delivery information, visit **1H 22H Pooling**
OFFICIAL List: Case No. 15812
 Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.40
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total \$
 Sent to Estate of Ora Mae Davis, deceased
 c/o Gary G. Davis
 404 Circleview Dr. S.
 Hurst, TX 76054
 City, St. ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Back for Instructions

AUG 11 2017
 Postmark Here

7017 1450 0000 8462 9118

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only White Falcon 16 Fed Com
 For delivery information, visit **21H 22H Pooling**
OFFICIAL List: Case No. 15812
 Certified Mail Fee \$ 3.45
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.40
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
 Postage \$
 Total \$
 Sent to Estate of Ora Mae Davis, deceased
 c/o Charlotte S. E. Garza
 324 Heneretta Drive
 Hurst, TX 76054-2242
 City, St. ZIP+4®
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Back for Instructions

AUG 11 2017
 Postmark Here
 USPS

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 Estate of Ora Mae Davis,
 deceased
 c/o Charlotte S. E. Garza
 324 Heneretta Drive
 Hurst, TX 76054-2242

9590 9402 2942 7094 6365 58

2. Article Number (Transfer from barcode label)

7017 1450 0000 8462 9118

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☒ Addressee
 B. Received by (Printed Name) Charlotte S. E. Garza
 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 (over \$500)

Domestic Return Receipt

7017 1450 0000 8462 9101

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

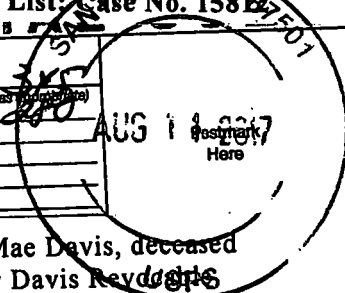
White Falcon 16 Fed Com
 1H 22H - Pooling Notice
 List: Case No. 15812

For delivery information, visit **OFFICE**

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 \$
 Sent To
 Street
 City, State, ZIP+4

Estate of Ora Mae Davis, deceased
 c/o Lee & Judy Davis Revocable
 Trust
 1625 9th Ave SE
 St Cloud, MN 56304

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to

Estate of Ora Mae Davis, deceased
 c/o Lee & Judy Davis Revocable
 Trust
 1625 9th Ave SE
 St Cloud, MN 56304

9590 9402 2942 7094 6365 41

2. Article Number (Transfer from card or label)

7017 1450 0000 8462 9101

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Leland E Davis Agent Addressee

B. Received by (Printed Name)

Leland E Davis

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature
☐ 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

Domestic Return Receipt

7017 1450 0000 8462 9200

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

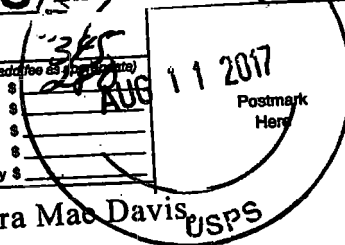
White Falcon 16 Fed Com
 1H 22H - Pooling Notice
 List: Case No. 15812

For delivery information, visit **OFFICE**

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 \$
 Sent To
 Street
 City, State, ZIP+4

Estate of Ora Mae Davis,
 deceased
 c/o George M. Davis
 209 Melody Lane
 Gainesville, TX 76240

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions



RETURNED

7017 1450 0000 8462 9217

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 For delivery information, visit **usps.com**
OFFICIAL **White Falcon 16 Fed Com**
1H 22H **Postmark Notice**
List: Case No. 1581207
 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 \$
 Sent to **Estate of Beulah M. Baird, deceased**
 Street **2009 Crockett Ct**
 City **Irving, TX 75038**
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

7017 1450 0000 8462 9224

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only **White Falcon 16 Fed Com**
 For delivery information, visit **usps.com**
OFFICIAL **1H 22H** **Postmark Notice**
List: Case No. 1581207
 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 \$
 Sent to **Norma Baird Loving, Trustee of the Beulah M. Baird Trust**
 Street **dated July 6, 1990**
 City **2009 Crockett Ct**
Irving, TX 75038
 PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for instructions

SENDER - COMPLETE THIS SECTION
 Complete items 1, 2, and 3.
 Print your name and address on the reverse so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.
 Article Addressed to:
Estate of Beulah M. Baird, deceased
2009 Crockett Ct
Irving, TX 75038
9590 9402 2942 7094 6370 29
 Article Number (Transfer from service label)
7017 1450 0000 8462 9217
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY
 A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name)
 C. Date of Delivery **8-14-17**
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ 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:
Norma Baird Loving, Trustee of the Beulah M. Baird Trust
dated July 6, 1990
2009 Crockett Ct
Irving, TX 75038
9590 9402 2942 7094 6370 36
 Article Number (Transfer from service label)
7017 1450 0000 8462 9224
PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY
 A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name)
 C. Date of Delivery **8-14-17**
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:
 3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery
☐ Restricted Delivery

7017 1450 0000 8462 9231

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

For delivery information, visit usps.com

OFFICE **Case No. 15812**

Certified Mail Fee \$ 3.50

Extra Services & Fees (check box, add fee)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total \$ 3.50

Sent 11 11 2017

Street 709 McCoy Drive

City Irving, TX 75062

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.

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

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

1. Weldon Baird, Trustee of the Beulah M. Baird Trust dated July 6, 1990
 709 McCoy Drive
 Irving, TX 75062

9590 9402 2942 7094 6370 43

7017 1450 0000 8462 9231

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

X Baird

B. Received by (Printed Name) Beulah M. Baird

C. Date of Delivery 7/13/17

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Adult Signature ☐ Priority Mail Express[®]

☐ Adult Signature Restricted Delivery ☐ Registered Mail[™]

☐ Certified Mail[®] ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation[™]

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

**White Falcon 16 Fed Com 21H 22H - Offset Notice List
Case No. 15812:**

EOG Y Resources Inc.
5509 Champions Drive
Midland, TX 79706

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG M Resources, Inc.
5509 Champions Drive
Midland, TX 79706

EOG Y Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG A Resources Inc.
105 S. 4th Street
Artesia, NM 88210

EOG M Resources Inc.
105 S. 4th Street
Artesia, NM 88210

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

Occidental Permian Limited Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

Occidental Permian Limited Partnership
PO BOX 841803
Dallas, TX 75284-1803

Devon Energy Production Company, L.P.
P.O. BOX 842485
Dallas, TX 75284-2485

Chevron U.S.A. Inc.
1400 Smith St., 41102
Houston, TX 77002

COG Acreage LP
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

Energen Resources Corporation
605 Richard Arrington Jr. Blvd North
Birmingham, AL 35203

Ohio State University
281 W. Lane Ave
Columbus, OH 43210

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

Apache Corporation
303 Veterans Airpark, Ste. 1000
Midland, TX 79705

Fuel Products, Inc.
P.O. Box 3098
Midland, TX 79702

Gahr Energy Company
PO Box 1889
Midland, TX 79702

S.N.S. Oil & Gas Properties, Inc.
P.O. Box 2234
Ardmore, OK 73402

7017 1450 0000 8463 0718

White Falcon 16 Fed Com
1H 22H - Offset Notice
List: Case No. 15812

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 \$

EOG Y Resources Inc.
5509 Champions Drive
Midland, TX 79706

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

5690 6948 0000 8463 0695

White Falcon 16 Fed Com
1H 22H - Offset Notice
List: Case No. 15812

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 \$

EOG A Resources, Inc.
5509 Champions Drive
Midland, TX 79706

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

7017 1450 0000 8463 0725

White Falcon 16 Fed Com
1H 22H - Offset Notice
List: Case No. 15812

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 \$

Sent \$

Street

City, State

EOG M Resources, Inc.
 5509 Champions Drive
 Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9001 See Reverse for Instructions

7017 1450 0000 8463 0701

U.S. Postal Service
White Falcon 16 Fed Com
1H 22H - Offset Notice
List: Case No. 15812

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 \$

Sent \$

Street

City, State

EOG Y Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9001 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:

EOG Y Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

9590 9402 2830 7069 1827 03

2. Article Number: 7017 1450 0000 8463 0701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X  ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
 E. Davis 8/11/17

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

3. Service Type
☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☐ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7017 1450 0000 8463 0732

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT

White Falcon 16 Fed Com
 H 22H - Offset Notice
 List: Case No. 15812

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total \$ 3.45

Sent to
 Street
 City, S

EOG A Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

Postmark Here
 USPS

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

7017 1450 0000 8463 0732

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT

White Falcon 16 Fed Com
 H 22H - Offset Notice
 List: Case No. 15812

OFFICIAL USE

Certified Mail Fee \$ 3.45

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

☐ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

To
 \$
 \$
 \$

EOG M Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

Postmark Here
 USPS

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

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:

EOG M Resources Inc.
 105 S. 4th Street
 Artesia, NM 88210

9590 9402 2950 7094 2952 66

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0732

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [Signature]

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

EDMIS

C. Date of Delivery

8/14/17

- 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

Domestic Return Receipt

7017 1450 0000 8463 0749

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

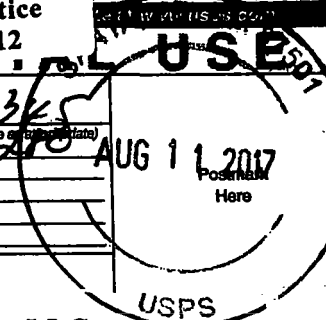
White Falcon 16 Fed Com
H 22H - Offset Notice
List: Case No. 15812

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
\$
Sent
\$
By
City

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701



- 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:

COG Operating LLC
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

9590 9402 2950 7094 2957 85

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0749

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)

Erika Rubalcaba

C. Date of Delivery

8.14.17

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

7017 1450 0000 8463 0688

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

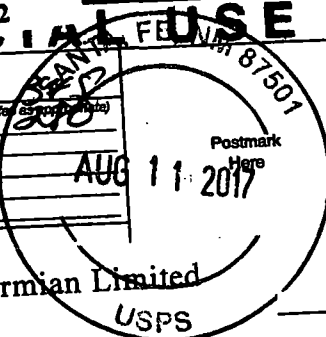
White Falcon 16 Fed Com
H 22H - Offset Notice
List: Case No. 15812

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
\$
Sent
\$
By
City

Occidental Permian Limited
Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046



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

See Reverse for Instructions

7017 1450 0000 8463 0862

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 White Falcon 16 Fed Com
 21H 22H - Offset Notice
 List: Case No. 15812

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.50
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total \$

Postmark Here
 AUG 11 2017

Occidental Permian Limited
 Partnership
 PO BOX 841803
 Dallas, TX 75284-1803

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

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:
 Occidental Permian Limited
 Partnership
 PO BOX 841803
 Dallas, TX 75284-1803

2. Article Number (Transfer from service label)
 7017 1450 0000 8463 0862

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ Agent
☐ Addressee

B. Received by (Printed Name)
 [Signature]

C. Date of Delivery
 AUG 14 2017

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

Domestic Return Receipt

7017 1450 0000 8463 0862

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 White Falcon 16 Fed Com
 21H 22H - Offset Notice
 List: Case No. 15812

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.50
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total \$

Postmark Here
 AUG 11 2017

Devon Energy Production
 Company, L.P.
 P.O. BOX 842485
 Dallas, TX 75284-2485

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

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

White Falcon 16 Fed Com
21H 22H - Offset Notice

List: Case No. 15812

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 \$

Ser.

Str.

City

Chevron U.S.A. Inc.
1400 Smith St., 41102
Houston, TX 77002

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chevron U.S.A. Inc.
1400 Smith St., 41102
Houston, TX 77002

9590 9402 2950 7094 2957 47

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0848

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

☐ 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:

COG Acreage LP
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

9590 9402 2950 7094 2950 99

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0831

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

☐ Restricted Delivery

Domestic Return Receipt

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

White Falcon 16 Fed Com
21H 22H - Offset Notice

List: Case No. 15812

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 \$

Ser.

Str.

City

COG Acreage LP
One Concho Center
600 W. Illinois Ave.
Midland, TX 79701

PS

Instructions

7017 1450 0000 8463 0800

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

White Falcon 16 Fed Com

21H 22H - Offset Notice

List: Case No. 15812

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

\$
Sent

\$
Street

\$
City

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

AUG 11

Postmark
Here

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

See Reverse for

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:

Chisos, Ltd.
670 Dona Ana Road SW
Deming, NM 88030

9590 9402 2950 7094 2950 68

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0800

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Signature

B. Received by (Printed Name)

B. JACOBSEN

☐ Agent

☐ Addressee

C. Date of Delivery

8/11/17

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

☐ 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

7017 1450 0000 8463 0794

U.S. Postal Service
CERTIFIED MAIL® RECEIPT

White Falcon 16 Fed Com

21H 22H - Offset Notice

List: Case No. 15812

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

\$
Sent

\$
Street

\$
City

Apache Corporation
303 Veterans Airpark, Ste.
1000
Midland, TX 79705

AUG 11 2017

Postmark
Here

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

See Reverse for

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:

Apache Corporation
303 Veterans Airpark, Ste.
1000
Midland, TX 79705

9590 9402 2950 7094 2950 51

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0794

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Signature

B. Received by (Printed Name)

April Willis

☐ Agent

☐ Addressee

C. Date of Delivery

8/15/17

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

☐ 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

7017 1450 0000 0547 2107

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
White Falcon 16 Fed Com
21H 22H - Offset Notice
List: Case No. 15812
www.usps.com

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.50
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total \$

Sent To
Street
City, St

Fuel Products, Inc.
P.O. Box 3098
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9001 See Reverse for Instructions

0220 2948 0000 0547 2107

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
White Falcon 16 Fed Com
21H 22H - Offset Notice
List: Case No. 15812
www.usps.com

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 3.50
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
Total \$

Sent To
Street
City, St

Gahr Energy Company
PO Box 1889
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9001 See Reverse for Instructions

7017 1450 0000 8463 0671

U.S. Postal Service™
 White Falcon 16 Fed Com
 1H 22H - Offset Notice
 List: Case no. 15812

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

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee)

- ☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage

Total

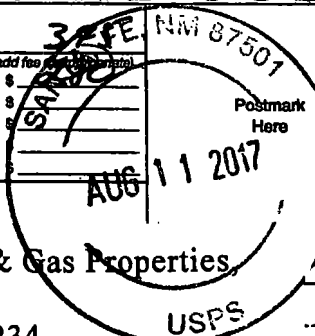
\$

Sem

Str

City

S.N.S. Oil & Gas Properties,
 Inc.
 P.O. Box 2234
 Ardmore, OK 73402



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:

S.N.S. Oil & Gas Properties,
 Inc.
 P.O. Box 2234
 Ardmore, OK 73402

9590 9402 2950 7094 2950 20

2. Article Number (Transfer from service label)

7017 1450 0000 8463 0671

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

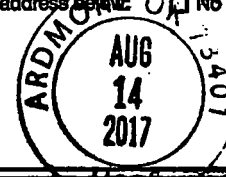
☐ Agent

☐ 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

PS Form 3811, July 2015 PSN 7630-02-000-9053

Domestic Return Receipt

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
August 15, 2017
and ending with the issue dated
August 15, 2017.



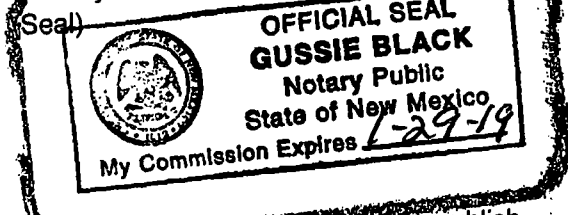
Publisher

Sworn and subscribed to before me this
15th day of August 2017.



Business Manager

My commission expires
January 29, 2019



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

LEGAL

LEGAL NOTICE
AUGUST 15, 2017

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

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on August 31, 2017, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-478-3458 or through the New Mexico Relay Network, 1-800-859-1779 by August 21, 2017. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:
All named parties and persons
having any right, title, interest
or claim in the following cases
and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

To: EOG Y Resources, Inc.; EOG A Resources, Inc.; EOG M Resources, Inc.; Energen Resources Corporation; Fuel Products, Inc.; Gahr Energy Company, Inc.; S.N.S. Oil & Gas Properties, Inc.; V-F Petroleum, Inc.; Chleas, Ltd.; Apache Corporation; Estate of Elbert E. Medlin, deceased; Shamrock Royalty, LLC; Estate of Jamie Ann Billington, deceased; Jerry Billington, his heirs and devisees; Estate of Ora Mae Davis, deceased; James Davis, his heirs and devisees; Gary Davis, his heirs and devisees; Charlotte S. E. Garza, her heirs and devisees; Lee & Judy Davis Revocable Trust; George M. Davis, his heirs and devisees; Estate of Beulah M. Baird, deceased; Beulah M. Baird Trust dated July 6, 1990; Norma Baird Loving, her heirs and devisees; Weldon Baird; his heirs and devisees.

Case No. 15812: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order (1) creating a non-standard 320-acre, more or less, spacing and proration unit comprised of the E/2 W/2 of Section 16 and the E/2 W/2 of Section 21, Township 25 South, Range 35 East, NMPM, Lea County, New Mexico; and (2) pooling all uncommitted interests in the Wolfcamp formation underlying this acreage. Said non-standard unit is to be dedicated to applicant's two proposed initial wells: the proposed White Falcon 16 Federal Com No. 21H Well and the proposed White Falcon 16 Federal Com No. 22H Well, which will be simultaneously drilled and completed. The proposed initial wells will be horizontally drilled from a surface location in the NE/4 NW/4 (Unit C) of Section 16 to a standard bottom hole location in the SE/4 SW/4 (Unit N) of Section 21. The completed interval for each well will remain within the 330-foot offset as required by the Statewide rules for oil wells. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of COG Operating LLC as operator of the well and a 200% charge for risk involved in drilling said well. Said area is located approximately 11 miles northwest of Jal, New Mexico.
#31993

67100754

00197966

HOLLAND & HART LLC
PO BOX 2208
SANTA FE,, NM 87504-2208

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 11
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

Affidavit of Publication

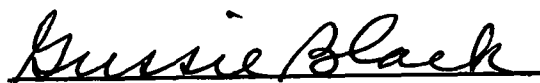
STATE OF NEW MEXICO
COUNTY OF LEA

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).

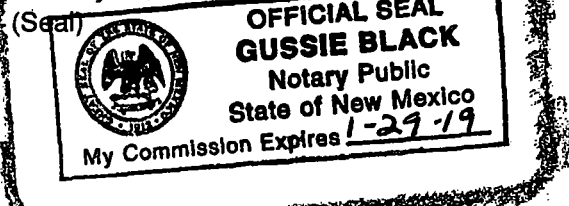
Beginning with the issue dated
August 16, 2017
and ending with the issue dated
August 16, 2017.


Publisher

Sworn and subscribed to before me this
16th day of August 2017.


Business Manager

My commission expires
January 29, 2019



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

AUGUST 16, 2017

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

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on August 31, 2017, in the Oil Conservation Division-Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-478-3458 or through the New Mexico Relay Network, 1-800-659-1779 by August 21, 2017. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:
All named parties and persons
having any right, title, interest
or claim in the following cases
and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

To: EOG Y Resources, Inc.; EOG A Resources, Inc.; EOG M Resources, Inc.; Energen Resources Corporation; Fuel Products, Inc.; Gahr Energy Company, Inc.; S.N.S. Oil & Gas Properties, Inc.; V-F Petroleum, Inc.; Chisos, Ltd.; Ohio State University; Apache Corporation; Estate of Elbert E. Medlin, deceased; Shamrock Royalty, LLC; Estate of Jamie Ann Billington, deceased; Jerry Billington, his heirs and devisees; Estate of Ora Mae Davis, deceased; James Davis, his heirs and devisees; Gary Davis, his heirs and devisees; Charlotte S. E. Garza, her heirs and devisees; Lee & Judy Davis Revocable Trust; George M. Davis, his heirs and devisees; Estate of Beulah M. Baird, deceased; Beulah M. Baird Trust dated July 6, 1980; Norma Baird Loving, her heirs and devisees; Weldon Baird, his heirs and devisees; Estate of Barry B. Thompson, deceased; Thompson Family Trust created under the Last Will and Testament of Barry B. Thompson, dated August 29, 2002; Sandra Thompson, her heirs and devisees; Estate of Stephen Scott Moore, deceased; Richard Lyons Moore, his heirs and devisees; Michael Harrison Moore, his heirs and devisees; Kevin Moore SSMTT GST Exempt Trust; Ryan Moore SSMTT GST Exempt Trust; Kevin Moore SSMTT GST Nonexempt Trust; Ryan Moore SSMTT GST Nonexempt Trust; Kevin Moore SSMTT Nonexempt Trust; Ryan Moore SSMTT Nonexempt Trust; Meridian 102 LP.

Case No. 15813: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order (1) creating a non-standard 320-acre, more or less, spacing and proration unit comprised of the W/2 W/2 of Section 16 and the W/2 W/2 of Section 21, Township 25 South, Range 35 East, NMPM, Lea County, New Mexico; and (2) pooling all uncommitted interests in the Wolfcamp formation underlying this acreage. Said non-standard unit is to be dedicated to applicant's two proposed initial wells: the proposed White Falcon 16 State Com No. 23H Well and the proposed White Falcon 16 State Com No. 24H Well, which will be simultaneously drilled and completed. The proposed initial wells will be horizontally drilled from a surface location in the NW/4 NW/4 (Unit D) of Section 16 to a standard bottom hole location in the SW/4 SW/4 (Unit M) of Section 21. The completed interval for each well will remain within the 330-foot offset as required by the Statewide rules for oil wells. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of COG Operating LLC as operator of the well and a 200% charge for risk involved in drilling said well. Said area is located approximately 11 miles northwest of Jal, New Mexico.
#31994

67100754

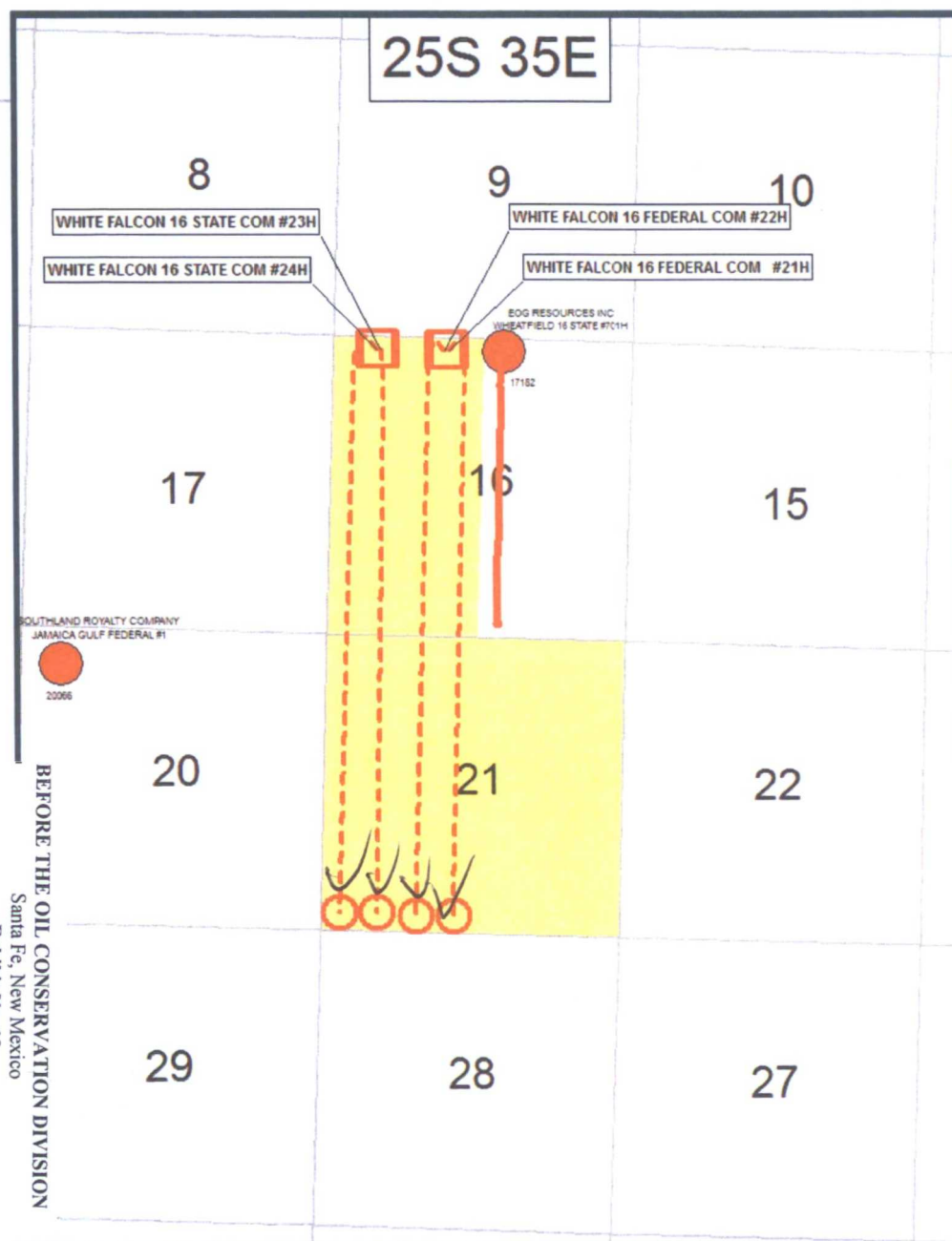
00198069

HOLLAND & HART LLC
PO BOX 2208
SANTA FE, NM 87504-2208

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 12
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

Wolfcamp Pool

White Falcon 16 Federal #21H, #22H
White Falcon 16 State Com #23H, 24H



Map Legend

SHL □

BHL ○

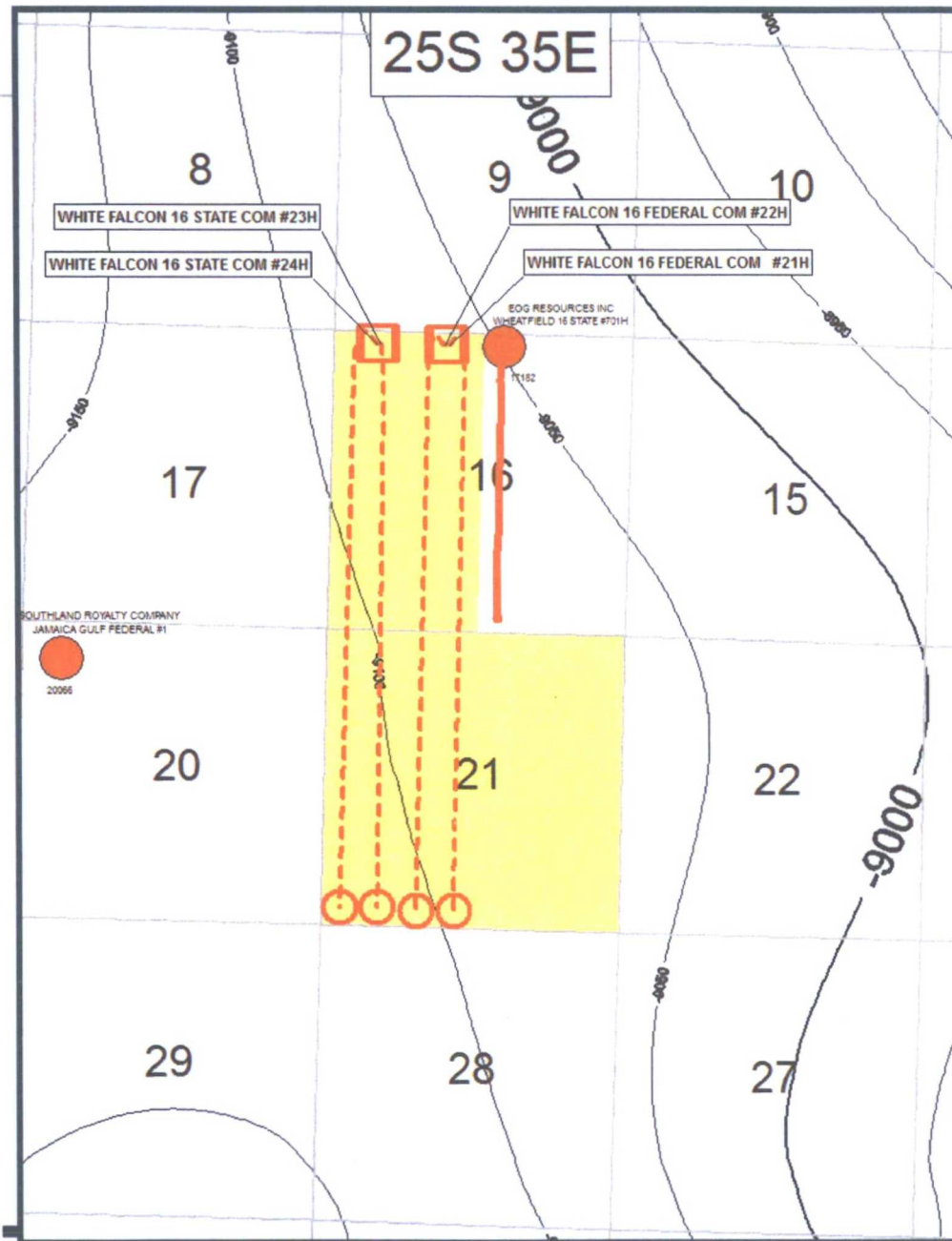


COG – Wolfcamp Horizontal Location

Producing Wolfcamp Wells

COG Acreage

Wolfcamp Pool Wolfcamp Structure Map



Map Legend

SHL □

COG - Wolfcamp Horizontal Location

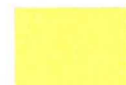
BHL ○



Producing Wolfcamp Wells



Wolfcamp Structure
CI: 50'

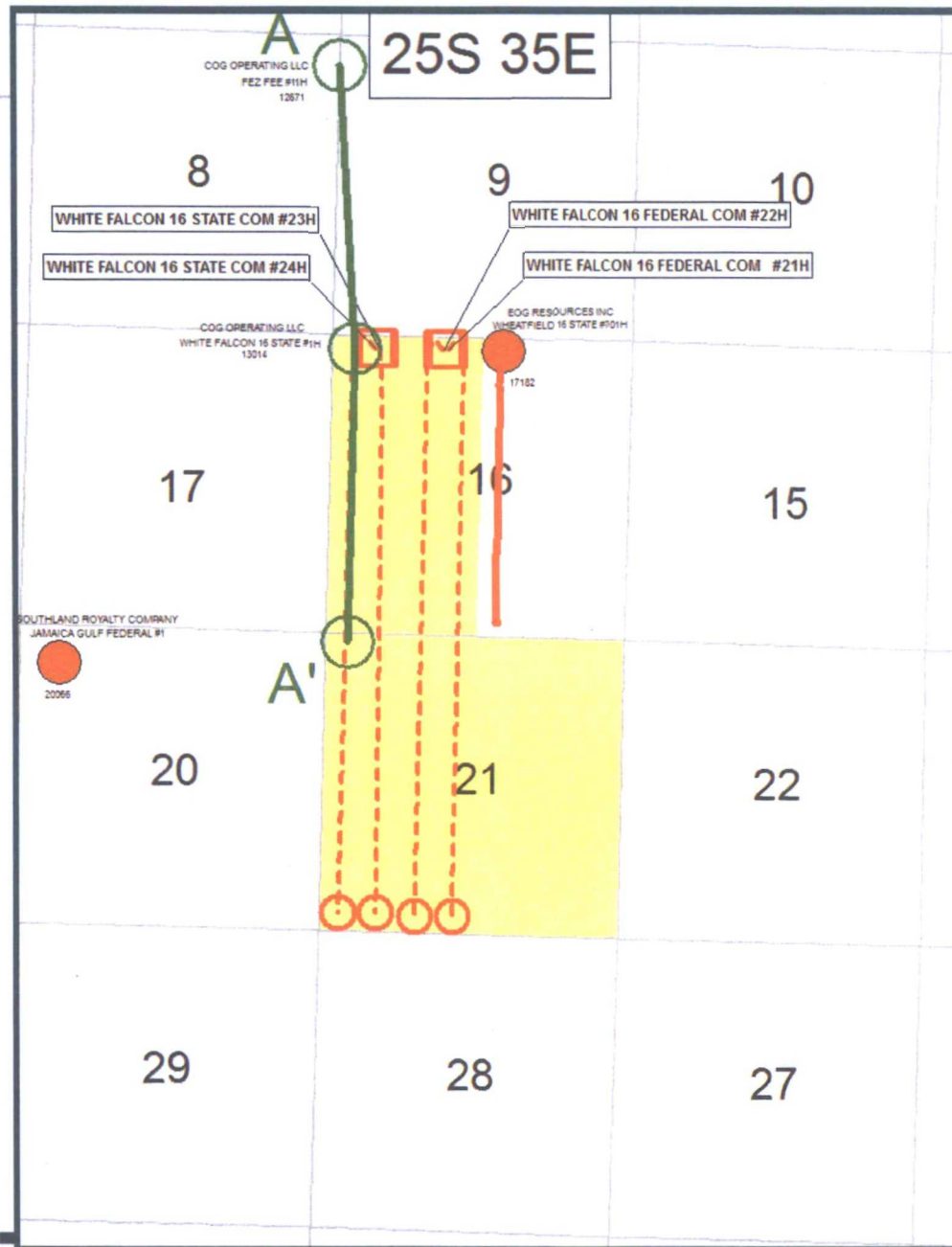


COG Acreage



BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 14
Submitted by: COG OPERATING, LLC
Hearing Date: August 31, 2017

Wolfcamp Pool Cross Section Map



Map Legend

SHL □

COG – Wolfcamp Horizontal Location

BHL ○

●

Producing Wolfcamp Wells

○

Cross Section Line

■

COG Acreage



CONCHO

BEFORE THE OIL CONSERVATION DIVISION

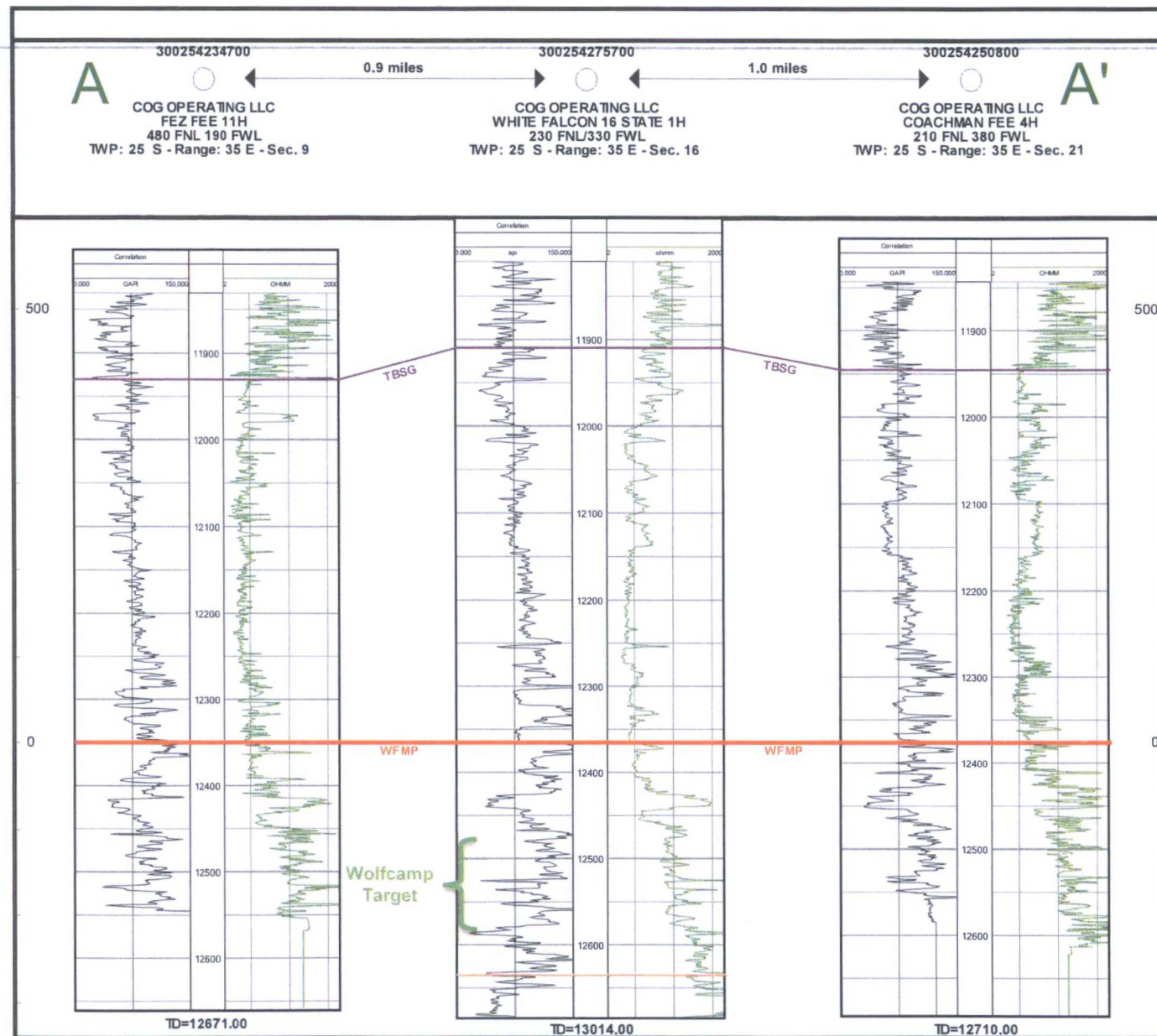
Santa Fe, New Mexico

Exhibit No. 15

Submitted by: COG OPERATING, LLC

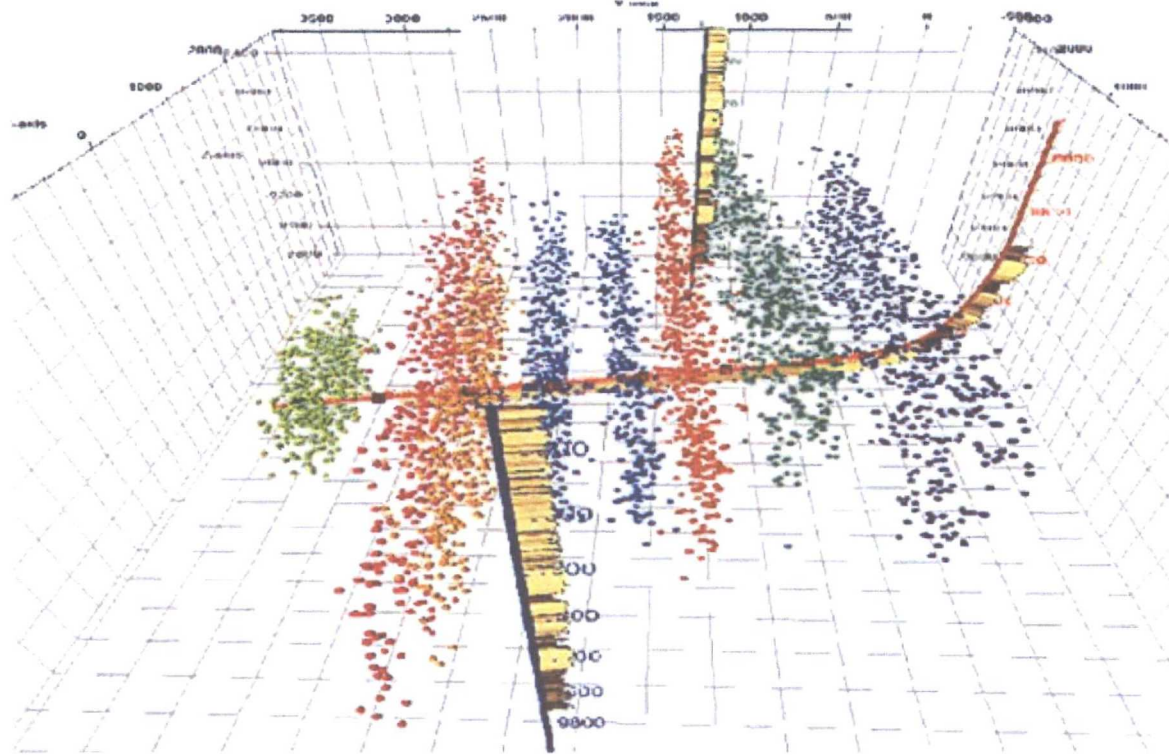
Hearing Date: August 31, 2017

Stratigraphic Cross Section A – A'



BEFORE THE OIL CONSERVATION DIVISION
 Santa Fe, New Mexico
 Exhibit No. 16
 Submitted by: COG OPERATING, LLC
 Hearing Date: August 31, 2017

EXAMPLE OF TYPICAL FRAC DISTRIBUTION IN VIRGIN ROCK



BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico

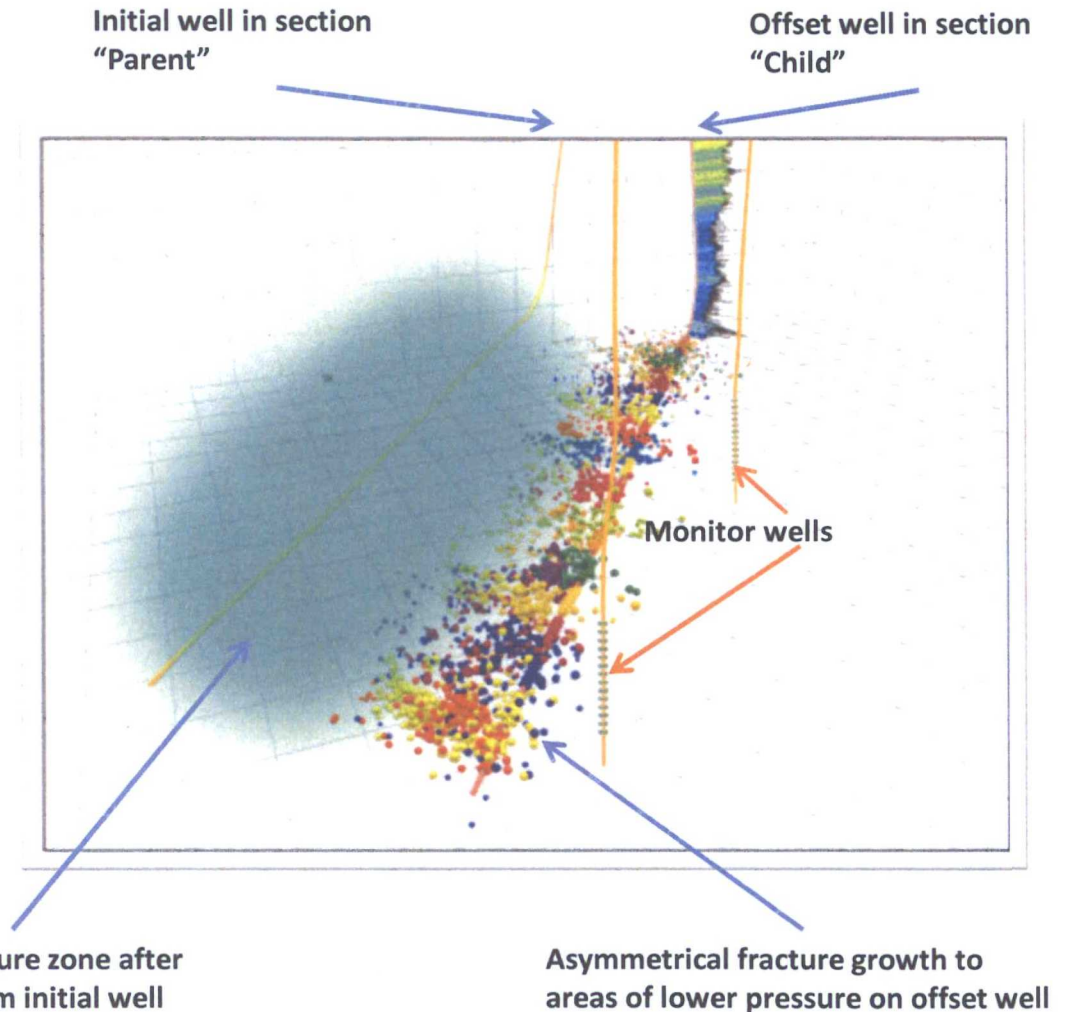
Exhibit No. 17

Submitted by: COG OPERATING, LLC

Hearing Date: August 31, 2017

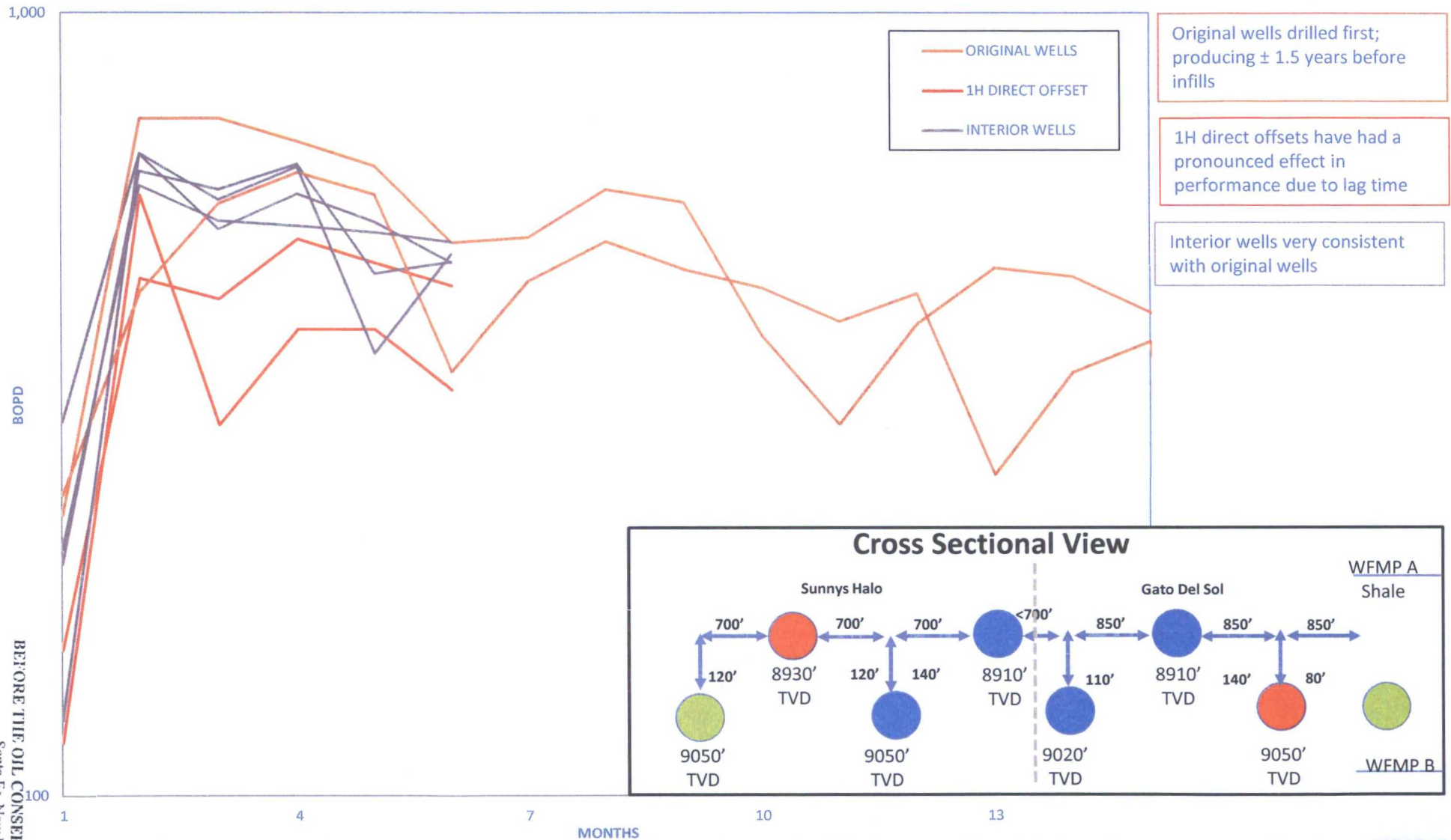
FRAC DISTRIBUTION WHEN OFFSETTING OLDER WELL

- I. First well in section contacts virgin rock
- II. Lengthy production creates pressure sink in reservoir
- III. Offset well is completed within same formation and section
- IV. Offset well produces asymmetrical fracture growth due to depleted pressure zone.
- V. Reduced well performance for offset well



Sunny S Halo & Gato Del Sol Leases

Cimarex Energy; WFMP A



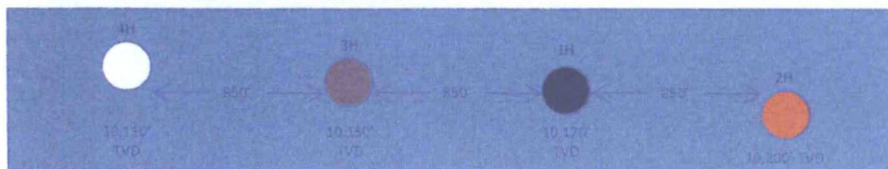
1.5-YR TIME LAG BETWEEN PARENT AND CHILD WELL COMPLETION



CONCHO

Prewit Omaha Lease

Cimarex Energy; WFMP D



BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico

Exhibit No. 20

Submitted by: COG OPERATING, LLC

Hearing Date: August 31, 2017



CONCHO

NO TIME LAG BETWEEN COMPLETIONS