

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

**APPLICATION OF MEWBOURNE OIL  
COMPANY FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO**

**Case No. 21115**

**MEWBOURNE OIL COMPANY'S  
HEARING EXHIBITS**

Compulsory Pooling Application Checklist

Application

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Exhibit A	Self-Affirmed Statement of Lee Scarborough
A-1	Form C-102
A-2	Plat of Tracts
A-3	Mewbourne Tract Interests
A-4	List and Schematic of Tract Ownership
A-5	List of Pooled Parties
A-6	List of Unlocatable Parties
A-7	Well Proposal Letter
A-8	Summary of Follow-Up Contacts
A-9	Exhibit A to Joint Operating Agreement
A-10	Proposed Notice of Hearing
A-11	Hearing Notice Letter and Return Receipts
A-12	Affidavit of Publication
A-13	Authorization for Expenditures

Exhibit B      Self-Affirmed Statement of Charles Crosby

B-1      Regional Location Map

B-2      Structure Map

B-3      Gross Isopach Map

B-4      Cross Section

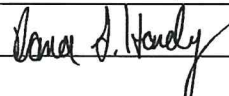
B-5      Production Table

B-6      Well Planning Report

<b>APPLICATION CHECKLIST (pdf)</b>	
<b>BE SUPPORTED BY SIGNED AFFIDAVITS</b>	
<b>Case:</b>	<b>21115</b>
<b>Date</b>	<b>April 9, 2020</b>
Applicant	Mewbourne Oil Company
Designated Operator & OGRID (affiliation if applicable)	Mewbourne Oil Company/14744
Applicant's Counsel:	Dana S. Hardy - Hinkle Shanor LLP
Case Title:	Application Of Mewbourne Oil Company For Compulsory Pooling, Eddy County, New Mexico
Entries of Appearance/Intervenors:	None
Well Family	Glock 17/16 B3EH Fed Com #1H
<b>Formation/Pool</b>	
Formation Name(s) or Vertical Extent:	Bone Spring Formation, Exhibit A
Primary Product (Oil or Gas):	Oil, Exhibit A
Pooling this vertical extent:	Entire Bone Spring Formation, Exhibit A
Pool Name and Pool Code:	Getty BSPG - 27470, Exhibit A
Well Location Setback Rules:	Statewide Horizontal Well Rules, Exhibit A
Spacing Unit Size:	Quarter-Quarter Section/40 Acres, Exhibit A
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal, Exhibit A
Size (Acres)	320 Acres, Exhibit A
Building Blocks:	Quarter Quarter Section/40 Acres, Exhibit A
Orientation:	West-East, Exhibit A
Description: TRS/County	S/2N/2 Sec. 17; S/2N/2 Sec. 16-T20S-R29E, Eddy, Exhibit A
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes, Exhibit A
<b>Other Situations</b>	
Depth Severance: Y/N. If yes, description	N/A
Proximity Tracts: If yes, description	N/A
Proximity Defining Well: if yes, description	N/A
Applicant's Ownership in Each Tract	See Exhibit A-3
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

Well #1	Glock 17/16 B3EH Fed Com #1H (API# 30-015-xxxx)SHL: 2090' FSL, 230' FWL-(Unit L)-17; BHL: 2200' FNL, 100' FEL-(Unit H)-16, Standard, Exhibit A
Well #2	
Horizontal Well First and Last Take Points	1st Take Pt: 2200' FNL, 100' FWL-17; Last Take Pt: 2200' FNL, 100' FEL-16, Exhibit A
Completion Target (Formation, TVD and MD)	Bone Spring Formation; TVD: 9,153'; TMD: 19,412', Exhibit A
<b>AFE Capex and Operating Costs</b>	
Drilling Supervision/Month \$	\$8000, Exhibit A
Production Supervision/Month \$	\$800, Exhibit A
Justification for Supervision Costs	Exhibit A
Requested Risk Charge	Cost Plus 200%, Exhibit A
<b>Notice of Hearing</b>	
Proposed Notice of Hearing	Exhibit A-10
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit A-11
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit A-12
<b>Ownership Determination</b>	
Land Ownership Schematic of the Spacing Unit	Exhibit A-4
Tract List (including lease numbers and owners)	Exhibit A-4
Pooled Parties (including ownership type)	Exhibit A-5
Unlocatable Parties to be Pooled	Exhibit A-6
Ownership Depth Severance (including percentage above & below)	None
<b>Joinder</b>	
Sample Copy of Proposal Letter	Exhibit A-7
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-9
Chronology of Contact with Non-Joined Working Interests	Exhibit A-8
Overhead Rates In Proposal Letter	\$8000/\$800, Exhibit A-7



Cost Estimate to Drill and Complete	Exhibit A-13
Cost Estimate to Equip Well	Exhibit A-13
Cost Estimate for Production Facilities	Exhibit A-13
<b>Geology</b>	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit B-6
Gunbarrel/Lateral Trajectory Schematic	Exhibit B-6
Well Orientation (with rationale)	Laydown. Exhibit B
Target Formation	Bone Spring, Exhibit B
HSU Cross Section	Exhibit B-4
Depth Severance Discussion	Exhibit B
<b>Forms, Figures and Tables</b>	
C-102	Exhibit A-1
Tracts	Exhibit A-2
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-4
General Location Map (including basin)	Exhibit B-1
Well Bore Location Map	Exhibit B-6
Structure Contour Map - Subsea Depth	Exhibit B-2
Cross Section Location Map (including wells)	Exhibit B-3
Cross Section (including Landing Zone)	Exhibit B-4
<b>Additional Information</b>	
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>	
<b>Printed Name</b> (Attorney or Party Representative):	Dana S. Hardy
<b>Signed Name</b> (Attorney or Party Representative):	
<b>Date:</b>	4/9/2020

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

**APPLICATION OF MEWBOURNE OIL  
COMPANY FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO**

Case No. 21115

**APPLICATION**

Pursuant to NMSA § 70-2-17, Mewbourne Oil Company ("Mewbourne") applies for an order pooling all uncommitted mineral interests in the Bone Spring formation in a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico. In support of its application, Mewbourne states:

1. Mewbourne (OGRID No. 14744) is a working interest owner in the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16 and has the right to drill a well thereon.
2. The horizontal spacing unit will be dedicated to the Glock 17/16 B3EH Fed Com #1H well, which will be horizontally drilled from a surface location in Unit L in Section 17 to a bottom hole location in Unit H in Section 16, Township 20 South, Range 29 East.
3. The completed interval for the well will be orthodox.
4. Mewbourne has undertaken diligent, good-faith efforts to obtain voluntary agreements from all mineral interest owners to participate in the drilling of the well but has been unable to obtain voluntary agreements from all of the mineral interest owners.
5. The pooling of all uncommitted mineral interests in the Bone Spring formation underlying the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16 will avoid the drilling of unnecessary wells, prevent waste, and protect correlative rights.

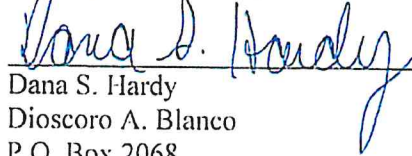
6. In order to allow Mewbourne to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted mineral interests in the horizontal spacing unit should be pooled.

WHEREFORE, Mewbourne requests that this application be set for hearing on March 5, 2020 and that, after notice and hearing, the Division enter an order:

- A. Pooling all uncommitted mineral interests in the Bone Spring formation underlying the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16;
- B. Designating Mewbourne as the operator of the Glock 17/16 B3EH Fed Com #1H well;
- C. Authorizing Mewbourne to recover its costs of drilling, equipping, and completing the Glock 17/16 B3EH Fed Com #1H well and allocating the costs among the well's working interest owners;
- D. Approving the actual operating charges and costs of supervision during drilling and after completion, together with a provision for adjusting the rates pursuant to the COPAS accounting procedure; and
- E. Imposing a 200% penalty for the risk assumed by Mewbourne in drilling and completing the Glock 17/16 B3EH Fed Com #1H well against any mineral interest owner who does not voluntarily participate in the drilling of the well.

Respectfully submitted,

HINKLE SHANOR LLP

A handwritten signature in blue ink, appearing to read "Dana S. Hardy", is written over a horizontal line.

Dana S. Hardy

Dioscoro A. Blanco

P.O. Box 2068

Santa Fe, NM 87504-2068

Phone: (505) 982-4554

Facsimile: (505) 982-8623

[dhardy@hinklelawfirm.com](mailto:dhardy@hinklelawfirm.com)

[dblanco@hinklelawfirm.com](mailto:dblanco@hinklelawfirm.com)

*Counsel for Mewbourne Oil Company*

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

**APPLICATION OF MEWBOURNE OIL  
COMPANY FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO**

**Case No. 21115**

**SELF-AFFIRMED STATEMENT OF  
LEE SCARBOROUGH**

1. I am over 18 years of age and am competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein.

2. I am a landman for Mewbourne Oil Company ("Mewbourne"). I have had direct involvement with Mewbourne's development of the 320-acre, more or less, standard horizontal spacing unit ("HSU") that is the subject of Mewbourne's application in this case.

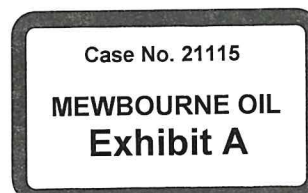
3. I have previously testified before the Division, and my qualifications as an expert in petroleum land matters were accepted.

**A. Proposed Wells and HSU**

4. The proposed HSU is comprised of the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico

5. Mewbourne seeks to pool all uncommitted interests in the Bone Spring formation underlying the HSU.

6. The HSU will be dedicated to the Glock 17/16 B3EH Fed Com #1H well, which will be horizontally drilled from a surface location 2090' FSL and 230' FWL (Unit L) in Section 17 to a bottom hole location 2200' FNL and 100' FEL (Unit H) in Section 16, Township 20 South, Range 29 East.





7. The first take point for the Glock 17/16 B3EH Fed Com #1H well is 2200' FNL and 100' FWL in Section 17, and the last take point is 2200' FNL and 100' FEL in Section 16. The target interval in the Bone Spring Formation is 9,153' TVD and 19,412' TMD.

8. The proposed well will be completed from West to East, and the completed interval of the well will be orthodox.

9. The proposed well is located in the Getty BSPG Pool, Code 27470. The primary product in the pool is oil. With respect to well setback requirements, this pool is subject to the statewide horizontal well rules set out in NMAC 19.15.16.15. Spacing in this pool is based on quarter-quarter sections, and the HSU is constructed based on quarter-quarter sections.

10. The C-102 for the proposed well is attached as Exhibit A-1.

## **B. Ownership Determination**

11. A plat of the tracts included in the HSU is attached as Exhibit A-2. Mewbourne's ownership interest in each tract included in the HSU is attached as Exhibit A-3. A list of the tract ownership is attached hereto as Exhibit A-4.

12. A list of the parties to be pooled, including ownership type, is attached as Exhibit A-5. A list of the unlocatable parties to be pooled is attached as Exhibit A-6.

13. There is no depth severance in the Bone Spring formation in the proposed HSU.

14. Mewbourne has the right to pool any overriding royalty owners in the HSU.

## **C. Joinder**

15. I sent well proposal letters to the uncommitted interests on October 16, 2019. Subsequently, I had follow-up communications with the locatable interests. A sample of my well proposal letter is attached as Exhibit A-7. A summary of my follow-up contacts with the locatable uncommitted interests are attached as Exhibit A-8.

16. A list of interest owners (Exhibit A to Joint Operating Agreement) is attached as Exhibit A-9.

17. 89.069% of the working interests are committed to the proposed well.

18. In my opinion, Mewbourne has made a good faith effort to obtain the voluntary joinder of uncommitted interests in the proposed well.

#### **D. Notice of Hearing**

19. Mewbourne's proposed notice of hearing is attached as Exhibit A-10.

20. Notice of Mewbourne's application and the Division hearing was provided to the uncommitted interests by certified mail at least 20 days prior to the hearing date. A sample of the notice letter and the associated green cards are attached as Exhibit A-11.

21. Notice of Mewbourne's application and the Division hearing was published more than ten business days prior to the hearing date. The affidavit of publication is attached as Exhibit A-12.

#### **E. Drilling and Operating Costs**

22. The AFEs for the proposed well are attached hereto as Exhibit A-13. The estimated cost of the well is fair and reasonable and is comparable to the cost of other wells of similar depth and length drilled in Eddy County.

23. Mewbourne requests overhead and administrative rates of \$8,000 per month while the well is being drilled and \$800 per month while the well is producing. These rates are fair and are comparable to the rates charged by Mewbourne and by other operators in the vicinity. They are also the rates set forth in the Joint Operating Agreement for the HSU. Mewbourne further requests that the rates be adjusted periodically in accordance with the COPAS Accounting Procedure.

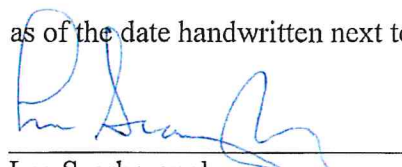
24. Mewbourne requests that it be designated the operator of the well.

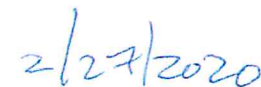
25. Mewbourne also requests that a 200% risk charge be assessed against the uncommitted interests if they are non-consenting working interest owners.

26. The exhibits attached hereto were either prepared by me or under my supervision, or were compiled from company business records.

27. In my opinion, the granting of Mewbourne's application would serve the interests of conservation and the prevention of waste.

28. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 27 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

  
\_\_\_\_\_  
Lee Scarborough

  
\_\_\_\_\_  
Date

MEWBOURNE OIL  
Exhibit A-1

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
District II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-102

Revised August 1, 2011


Submit one copy to appropriate  
District Office

☐ AMENDED REPORT

## WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code		3 Pool Name					
4 Property Code		5 Property Name <b>GLOCK 17/16 B3EH FED COM</b>						6 Well Number <b>1H</b>	
7 GRID NO.		8 Operator Name <b>MEWBOURNE OIL COMPANY</b>						9 Elevation <b>3280'</b>	
10 Surface Location									
UL or lot no. <b>L</b>	Section <b>17</b>	Township <b>20S</b>	Range <b>29E</b>	Lot Idn	Feet from the <b>2090</b>	North/South line <b>SOUTH</b>	Feet from the <b>230</b>	East/West line <b>WEST</b>	County <b>EDDY</b>
11 Bottom Hole Location If Different From Surface									
UL or lot no. <b>H</b>	Section <b>16</b>	Township <b>20S</b>	Range <b>29E</b>	Lot Idn	Feet from the <b>2200</b>	North/South line <b>NORTH</b>	Feet from the <b>100</b>	East/West line <b>EAST</b>	County <b>EDDY</b>
12 Dedicated Acres		13 Joint or Infill		14 Consolidation Code		15 Order No.			

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

<p>16</p> <p><b>CORNER DATA</b> NAD 83 GRID - NM EAST</p> <p>A: FOUND BRASS CAP "1916" N: 569804.9 - E: 611437.8</p> <p>B: FOUND BRASS CAP "1916" N: 575088.6 - E: 611425.3</p> <p>C: FOUND BRASS CAP "1916" N: 575086.5 - E: 614071.1</p> <p>D: FOUND BRASS CAP "1916" N: 575085.0 - E: 616714.9</p> <p>E: FOUND BRASS CAP "1916" N: 575095.2 - E: 619357.5</p> <p>F: FOUND BRASS CAP "1916" N: 575105.3 - E: 621999.3</p> <p>G: FOUND BRASS CAP "1916" N: 572462.9 - E: 622006.1</p> <p>H: FOUND BRASS CAP "1916" N: 569820.2 - E: 622012.4</p> <p>I: FOUND BRASS CAP "1916" N: 569809.9 - E: 619369.9</p> <p>J: FOUND BRASS CAP "1916" N: 569798.5 - E: 616727.8</p> <p>K: FOUND BRASS CAP "1916" N: 569801.9 - E: 614082.2</p> <p>L: FOUND BRASS CAP "1916" N: 572443.7 - E: 616721.6</p>		<p>17 OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or 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 a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p>Signature _____ Date _____</p> <p>Printed Name _____</p> <p>E-mail Address _____</p>	
<p>18 SURVEYOR CERTIFICATION</p> <p>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.</p> <p><b>9-09-2019</b> Date of Survey</p> <p>Signature and Seal of Professional Surveyor: </p> <p><b>19680</b> Certificate Number</p>		<p>19</p> <p><b>GEODETTIC DATA</b> NAD 83 GRID - NM EAST</p> <p><b>SURFACE LOCATION</b> N: 571894.1 - E: 611662.8 LAT: 32.5719846° N LONG: 104.1050404° W</p> <p><b>BOTTOM HOLE</b> N: 572905.4 - E: 621905.0 LAT: 32.5746997° N LONG: 104.0717841° W</p> <p>B.H. 100'</p>	

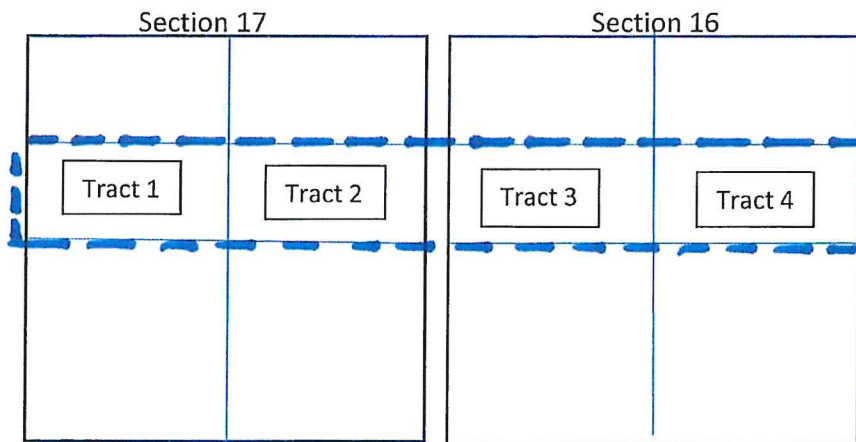
Job No: LS19090887

LAND PLAT

COUNTY OF EDDY, STATE OF NEW MEXICO

TOWNSHIP 20 SOUTH, RANGE 29 EAST

GLOCK 17/16 B3EH FED COM #1H



Tract 1: S/2NW/4 – 17 – NMNM 01165

Tract 2: S/2NE/4 – 17 – NMNM 01165

Tract 3: S/2NW/4 – 16 – NMNM 0554771

Tract 4: S/2NE/4 – 16 – NMNM 0554771

Case No. 21115

**MEWBOURNE OIL**

**Exhibit A-2**



EXHIBIT 1

Applicant's Ownership in Each Tract

Case:

Well: Glock 17/16 B3EH Fed Com #1H (API# pending)

Tract 1: S/2NW/4, Section 17: 87.5%

Tract 2: S/2NE/4, Section 17: 2.422%

Tract 3: S/2NW/4, Section 16: 43.75%

Tract 4: S/2NE/4, Section 16: 60.9375%

Case No. 21115

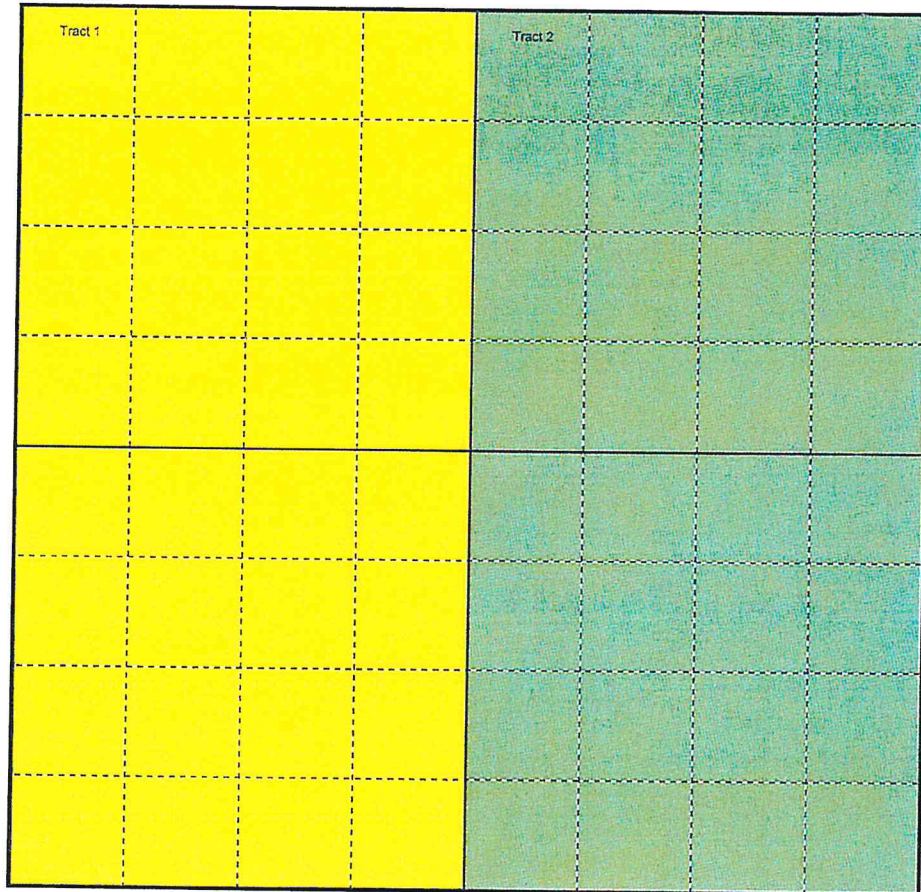
MEWBOURNE OIL

**Exhibit A-3**

## SECTION PLAT

SECTION 17, TOWNSHIP 20 SOUTH, RANGE 29 EAST

COUNTY OF EDDY, STATE OF NEW MEXICO



Tract 1: W2 – NM 01165

Mewbourne Oil Company  
Great Western Drilling Ltd.  
Davoil, Inc.  
Brooks Oil & Gas Interests, Ltd.

Tract 2: E2 – NM 01165

Yates Petroleum Corporation  
Abo Petroleum Corporation  
Myco Industries, Inc.  
OXY Y-1 Company  
John A. Yates  
Sharbro Energy, LLC  
Axis Energy, LLC  
Wildcat Energy, LLC  
Westway Petro  
Marigold LLLP  
Santo Legado LLLP  
Tulipan LLC  
Estate of E. Trompeter  
William Evert Andrau Trust No. 2  
Mewbourne Oil Company  
Helene B. Hewett/Barbara A Powell Trust No. 2  
Siegler Family Trust No. 2  
Homer Tutton  
S. K. Clay U/TRT 6-21-78

Case No. 21115

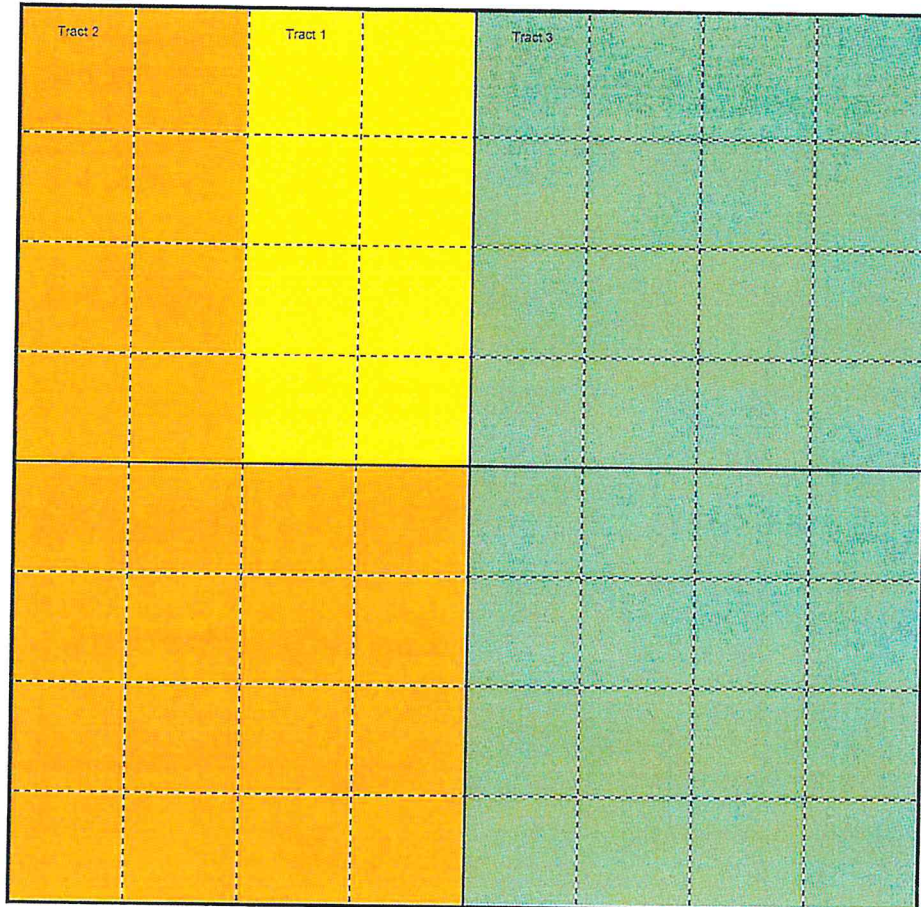
**MEWBOURNE OIL**  
**Exhibit A-4**

W. P. Kendall U/TRT 6-21-78  
William Jacobs  
Andrew E. McMacMahon  
Greenstar Resources, LLC  
Robert L. Beavers, Inc.  
Russell S. Sampson  
Ivor J. Silver  
Patricia A. McMillian  
Lewis F. Holmes  
Alex M. Roter  
Ann S. Ragsdale  
Anthony Hawe  
Arthur A. Ostmann  
Arturo G. Sterling  
Charles C. Albright Trust  
Don Friedman  
Dorothy Hinchliff  
First State Bank  
George M. Oringdulph, et al  
Gilbert T. Kanegawa  
Glenn E. Duke  
Harry Bersner  
Harry E. Poll  
Harry L. Green, Sr.  
Henry C. Landers  
James Roby Clopton, Inc.  
Janet S. Joslin  
John Steinman  
Larry M. Pickett  
Leroy H. Simpkins, Jr.  
Leroy L. Burnette  
Lillian Kamph, Trustee  
John L. Steffan  
Louesther Zwick Trust IV  
M. D. Williams, et al  
Mark J. Sandler  
Neil W. Schilke  
Norton S. Waldfogel  
Robert M. Varn  
Steven R. Lindersmith  
Thomas Geimer  
T. Grover Swift, Jr.  
Jackie D. Willis  
Warren N. Rosenquist  
Whitney Karis Wilson  
William Bondeson  
William P. McCormick  
William R. Manclark  
William W. Fetner  
William Evert Andrau Trust No. 1  
Helene B. Hewett/Barbara A. Powell Trust No. 1  
Siegler Family Trust No. 1  
Sandra Houppermans

# SECTION PLAT

SECTION 16, TOWNSHIP 20 SOUTH, RANGE 29 EAST

COUNTY OF EDDY, STATE OF NEW MEXICO



Tract 1: E2NW – NM 0554771  
Brooks Oil & Gas Interests, Ltd.  
Great Western Drilling Ltd.  
Davoil, Inc.  
Fasken Land and Minerals, Ltd.  
McCombs Energy, L.L.C.  
Jeffrey M. Johnston, etux Sandra K.  
Michael A. Short  
Dorothy Ann Fletcher Throckmorton  
Estate of Boyd Laughlin  
Josephine Laughlin Living Trust  
Khody Land & Minerals Company  
Mewbourne Oil Company

Tract 2: SW, W2NW – NM 0554771  
Brooks Oil & Gas Interests, Ltd.  
Great Western Drilling Ltd.  
Davoil, Inc.  
Fasken Land and Minerals, Ltd.  
McCombs Energy, L.L.C.  
Jeffrey M. Johnston, etux Sandra K.  
Michael A. Short  
Dorothy Ann Fletcher Throckmorton  
Estate of Boyd Laughlin  
Josephine Laughlin Living Trust  
Khody Land & Minerals Company  
Mewbourne Oil Company

Tract 3: E2 – NM 0554771

Brooks Oil & Gas Interests, Ltd.

Great Western Drilling Ltd.

Davol, Inc.

Fasken Land and Minerals, Ltd.

McCombs Energy, L.L.C.

Jeffrey M. Johnston, et ux Sandra K.

Michael A. Short

Dorothy Ann Fletcher Throckmorton

Mewbourne Oil Company



	GLOCK 17/16 - POOLED PARTIES	TYPE INTEREST
	Andrew E. MacMahon	Operating Rights
	Anthony Hawe	Operating Rights
	Charles C. Albright Trust	Operating Rights
	E. Trompeter Estate	Operating Rights
	Homer C. Tutton	Operating Rights
	Ivor J. Silver	Operating Rights
	Jackie D. Willis	Operating Rights
	Michael H. Steinman	Operating Rights
	Robert Steinman	Operating Rights
	Judith Borger	Operating Rights
	Lillian Kamph, Trustee of Trust 454F	Operating Rights
	Neil W. Schilke	Operating Rights
	Sandra H. Starratt	Operating Rights
	SK Clay U/TRT 6-21-78	Operating Rights
	T Grover Swift, Jr., dec'd	Operating Rights
	Warren N. Rosenquist	Operating Rights
	Whitney Wilson Jones	Operating Rights
	William Bondeson	Operating Rights
	WP Kendall U/TRT 6-21-78	Operating Rights
	St. Devote LLC	Operating Rights
	Clampett's Tea, L.L.C.	Operating Rights
	J. Bodean, LLC	Operating Rights
	William P. McCormick	Operating Rights
	Sand Dollar	Operating Rights
	Jeffery M. Johnston	Operating Rights
	Michael Short	Operating Rights
	Siegler Brothers Capital LLC	Operating Rights
	Karelyn Siegler c/o Wells Fargo Bank, N.A.	Operating Rights

Case No. 21115

MEWBOURNE OIL

**Exhibit A-5**

GLOCK 17/16 – UNLOCATABLE PARTIES

Alex M. Roter
Ann S. Ragsdale
Arturo G. Sterling
Don Friedman
Dorothy Hinchliff
First State Bank
George M. Oringdulph & H.E. Oringdulph, dec'd
Gilbert t. Kanegawa
Glenn E. Duke
Harry Bersner
Harry F. Poll
Harry L. Green, Sr.
Henry C. Landers
John L. Steffan
Lewis F. Holmes
Mark J. Sandler
MD Williams & DL Plant
Norton S. Waldfogel
Patricia A. McMillian
Robert M. Varn
Steven R. Lindesmith
Thomas Geimer
Westway Pet
Wm W. Fetner
Wm. Jacobs
LaDoca, LLC
Leroy H. Simkins
Helene B. Hewett/Barbara A Powell Trust 1
Helene B. Hewett/Barbara A Powell Trust 2
Janet S. Joslin
Leroy L. Burnette
Louesther Zwick Trust IV

Case No. 21115

MEWBOURNE OIL

Exhibit A-6

# MEWBOURNE OIL COMPANY

500 West Texas, Suite 1020  
Midland, Texas 79701  
Phone (432) 682-3715  
Fax (432) 685-4170

October 16, 2019

Certified Mail

TO: WORKING INTEREST OWNERS

Re: Proposed Horizontal Tests  
Section 16 and 17, Township 20 South, Range 29 East  
Eddy County, New Mexico  
**Glock 17/16 Prospect**

Ladies and Gentlemen:

Mewbourne Oil Company, as Operator, hereby proposes to drill the following listed wells under our Glock 17/16 Prospect:

1) Glock 17/16 B3MP Fed Com #1H – APD Pending Approval  
Surface Location: 1,300' FSL, 230' FWL, Section 17  
Bottom Hole Location: 1,310' FSL, 100' FEL, Section 16  
Proposed Total Vertical Depth: 9,183'  
Proposed Total Measured Depth: 19,348'  
Formation: Bone Spring (S/2S/2)  
Estimated Spud: February 2020

2) Glock 17/16 W0MP Fed Com #1H – APD Pending Approval  
Surface Location: 1,270' FSL, 230' FWL, Section 17  
Bottom Hole Location: 440' FSL, 100' FEL, Section 16  
Proposed Total Vertical Depth: 9,428'  
Proposed Total Measured Depth: 19,610'  
Formation: Wolfcamp (S/2)  
Estimated Spud: March 2020

3) Glock 17/16 W0LI Fed Com #1H – APD Pending Approval  
Surface Location: 2,060' FSL, 230' FWL, Section 17  
Bottom Hole Location: 2,200' FSL, 100' FEL, Section 16  
Proposed Total Vertical Depth: 9,428'  
Proposed Total Measured Depth: 19,610'  
Formation: Wolfcamp (S/2)  
Estimated Spud: April 2020

4) Glock 17/16 B3EH Fed Com #1H – APD Pending Approval  
Surface Location: 2,090' FSL, 230' FWL, Section 17  
Bottom Hole Location: 2,200' FNL, 100' FEL, Section 16  
Proposed Total Vertical Depth: 9,153'  
Proposed Total Measured Depth: 19,412'  
Formation: Bone Spring (S/2N/2)  
Estimated Spud: May 2020

Case No. 21115

**MEWBOURNE OIL**  
**Exhibit A-7**

**Summary of Communications**  
Glock 17/16 B3EH Fed Com #1H

Andrew E. MacMahon

- 1) Mailed well proposal via Certified Mail October 16, 2019.

Anthony Hawe

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

Charles C. Albright Trust

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 23, 2019.

Dorothy Hinchliff

- 1) Mailed well proposal via Certified Mail October 16, 2019.

E. Trompter Estate

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

Homer C. Tutton

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 26, 2019.

Ivor J. Silver

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 22, 2019.
- 3) Will not participate – October 23, 2019.

Jackie D. Willis

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

Michael H. Steinman

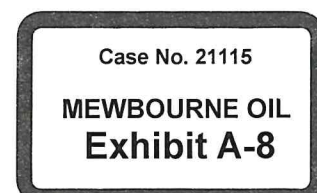
- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 19, 2019.

Robert Steinman

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 29, 2019.

Judith Borger

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.





Larry M. Pickett

- 1) Mailed well proposal via Certified Mail October 16, 2019.

Trust 454F

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

Neil W. Schilke

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 19, 2019.

Sandra H. Starratt

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 24, 2019.

SK Clay Trust

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 25, 2019.

T. Grover Swift, Jr.

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 18, 2019.

Warren N. Rosenquist

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

Whitney Wilson Jones

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 18, 2019.

William Bondeson

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 19, 2019.

St. Devote LLC

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

Clampett's Tea, L.L.C.

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 21, 2019.

J. Bodean, LLC

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 30, 2019.

William P. McCormick



- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 15, 2019.

Sand Dollar Petroleum

- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 17, 2019.
- 3) Returned AFE (only) on October 30, 2019.

Jeffery M. Johnston

- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 17, 2019.
- 3) Returned AFE (only) on October 30, 2019.

Michael Short

- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 15, 2019.
- 3) Returned AFE (only) on October 30, 2019.

Siegler Brothers Capital LLC

- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 18, 2019.

Karelyn Siegler

- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 15, 2019.

WP Kendall

- 1) Mailed well proposal via Certified Mail October 16, 2019.
- 2) Received well proposal on October 22, 2019.

WPX Energy Permian, LLC

- 1) Mailed well proposal via Certified Mail October 11, 2019.
- 2) Received well proposal on October 15, 2019.
- 3) Email – WPX-MOC – January 15, 2020 – JOA inquiry
- 4) Email – MOC-WPX – January 16, 2020 – JOA attached
- 5) Email – WPX-MOC – January 16, 2020 – confirmed receipt
- 6) Email – WPX-MOC – January 29, 2020
- 7) Email – MOC-WPX – January 29, 2020
- 8) Email – MOC-WPX – February 28, 2020 – waiting on decision
- 9) Email – WPX-MOC – March 2, 2020 – working JOA edits
- 10) Email – MOC-WPX – March 2, 2020 – edits made
- 11) Email – WPX-MOC – March 3, 2020 – edits received
- 12) Email – WPX-MOC – March 5, 2020 – edits approved
- 13) Email – WPX-MOC – March 25, 2020 – status
- 14) Email – MOC-WPX – March 25, 2020 – status update delivered

## EXHIBIT "A"

Attached to and made a part of that certain Operating Agreement dated February 1, 2019, by and between MEWBOURNE OIL COMPANY as Operator and Marathon Oil Permian LLC, et al, as Non-Operators.

### 1. LANDS SUBJECT TO THIS AGREEMENT:

#### CONTRACT AREA A:

Township 20 South, Range 29 East, N.M.P.M., Eddy County, New Mexico

Section 16: All,

Section 17: All,

containing 1,280.00 acres, more or less.

#### DEPTH RESTRICTIONS AND EXCLUSIONS:

This Agreement covers all depths from the top of the Third Bone Spring sand, defined as the stratigraphic equivalent of 8,880', as referenced in the Gatling 16 Federal #1 well (API# 30-015-35004), located in Section 16, Township 20 South, Range 29 East, Eddy County, New Mexico to the base of the Bone Spring formation, defined as the stratigraphic equivalent of 9,275', as referenced in the Gatling 16 Federal #1 well (API# 30-015-35004), located in Section 16, Township 20 South, Range 29 East, Eddy County, New Mexico.

#### CONTRACT AREA B:

Township 20 South, Range 29 East, N.M.P.M., Eddy County, New Mexico

Section 16: All,

Section 17: All,

containing 1,280.00 acres, more or less.

#### DEPTH RESTRICTIONS AND EXCLUSIONS:

This Agreement covers all depths from the base of the Bone Spring sand, defined as the stratigraphic equivalent of 9,275', as referenced in the Gatling 16 Federal #1 well (API# 30-015-35004), located in Section 16, Township 20 South, Range 29 East, Eddy County, New Mexico to the base of the Wolfcamp formation, defined as the stratigraphic equivalent of 10,071', as referenced in the Gatling 16 Federal #1 well (API# 30-015-35004), located in Section 16, Township 20 South, Range 29 East, Eddy County, New Mexico.

### 2. ADDRESSES OF THE PARTIES:

Mewbourne Oil Company  
500 West Texas, Suite 1020  
Midland, Texas 79701  
Attn: Land Department  
Phone: (432) 682-3715

AmericaWest Resources, LLC  
P.O. Box 3383  
Midland, Texas 79702  
Phone: (432) 683-6789

WPX Energy Permian, LLC  
3500 One Williams Center MD35  
Tulsa, Oklahoma 74172  
Attn: Mr. Tanner Tepe  
Phone: (539) 573-3576

Axis Energy Corporation  
121 West 3<sup>rd</sup> Street  
Roswell, New Mexico 88201  
Phone: (575) 622-4182

McCombs Exploration, LLC  
750 East Mulberry Avenue, #403  
San Antonio, Texas 78212-6013  
Attn: Mr. Gary V. Woods  
Phone: (210) 821-6523

Brooks Oil & Gas Interests, Ltd.  
2926 Viale Seravezza  
Santa Fe, New Mexico 87505  
Attn: Mr. David K. Brooks  
Phone: (505) 476-3415

Great Western Drilling, Ltd.  
P.O. Box 1659  
Midland, Texas 79702  
Attn: Mr. F. Carter Muire  
Phone: (432) 682-5241

Wildcat Energy, LLC  
Post Office Box 13323  
Odessa, Texas 79768  
Phone: (432) 563-8130

Case No. 21115

**MEWBOURNE OIL  
Exhibit A-9**

Vladin, LLC  
105 South Fourth Street  
Artesia, New Mexico 88210-2177  
Phone: (575) 736-4000)

William R. Manclark  
313 East Bay Front  
Balboa Island, California 92662

Davoil, Inc.  
P.O. Box 122269  
Fort Worth, Texas 76121-2269  
Phone: (817) 737-6678

Sharbro Energy, LLC  
327 West Main  
Artesia, New Mexico 88210  
Attn: Ms. Elizabeth Baker  
Phone: (575) 736-6606

James Roby Clopton, Inc.  
POB 3601  
McAllen, Texas 78504

Russell S. Sampson  
14534 Glendale Avenue SE  
Prior Lake, Minnesota 55372-1407  
Phone: (612) 865-5501

Greenstar Resources, L.L.C.  
Roger L. Beavers, Inc.  
POB 721930  
Norman, Oklahoma 73070-8472  
Attn: Mr. Roger L. Beavers  
Phone: (405) 310-3369

3. PERCENTAGES OF THE PARTIES:

**Working Interest Owner**

Mewbourne Oil Company  
AmericaWest Resources, LLC  
WPX Energy Permian, LLC  
Davoil, Inc.  
McCombs Exploration, LLC  
Sharbro Energy, LLC  
Santo Legado, LLC  
Brooks Oil & Gas Interests, Ltd.  
Great Western Drilling, Ltd.  
Axis Energy Corporation  
Wildcat Energy, LLC  
Vladin, LLC  
Greenstar Resources, L.L.C.  
Roger L. Beavers, Inc.  
James Roby Clopton, Inc.  
William R. Manclark  
Russell S. Sampson

Contract Area A (1)  
Uncommitted Working Interest:  
21.501515%

Contract Area B (2)  
Uncommitted Working Interest:  
53.144370%

The above listed interests [(1) & (2)] are representative of 100% of the working interest made up of lands covered by this Agreement and being controlled by the parties to this Agreement. Should the spacing unit for a particular well drilled under the terms of this Agreement include some or all of the interests listed above as Uncommitted Working Interest, the interests of the parties to this Agreement will be adjusted to account for the uncommitted interests.

4. OIL AND GAS LEASES SUBJECT TO THIS AGREEMENT:

Lease Serial No.: NMNM 0554771.  
Dated: September 1, 1964.  
Lessor: United States of America.  
Lessee: Jennie Beth Edwards.  
Recorded: Unrecorded in Eddy County.  
Lands: Township 20 South, Range 29 East, N.M.P.M., Eddy County, New Mexico  
Section 16: All,  
containing 640.00 acres, more or less.

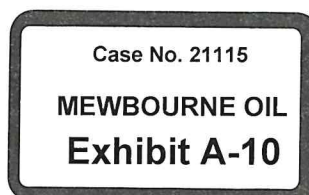
Lease Serial No.: NMNM 01165.  
Dated: July 1, 1950.  
Lessor: United States of America.  
Lessee: S. P. Yates, as Executor of the Estate of Martin Yates, Jr., Deceased.  
Recorded: Unrecorded in Eddy County.  
Lands: Township 20 South, Range 29 East, N.M.P.M., Eddy County, New Mexico  
Section 17: All,  
containing 640.00 acres, more or less.

5. BURDENS ON PRODUCTION:

Burdens of record as of the effective date of this Agreement.

End of Exhibit "A"

**Case No. \_\_\_\_\_: Application of Mewbourne Oil Company for compulsory pooling, Eddy County, New Mexico.** Applicant seeks an order pooling all uncommitted mineral interests in the Bone Spring formation in a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to the Glock 17/16 B3EH Fed Com #1H well, which will be horizontally drilled from a surface location in Unit L in Section 17 to a bottom hole location in Unit H in Section 16, Township 20 South, Range 29 East. The completed interval for the well will be orthodox. Also to be considered will be the costs of drilling and completing the well and the allocation of the costs, the designation of Mewbourne Oil Company as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The well is located approximately thirteen (13) miles northeast of Carlsbad, New Mexico.







## HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

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

WRITER

Dana S. Hardy, Partner  
dhardy@hinklelawfirm.com

February 10, 2020

### VIA CERTIFIED MAIL

Alex M. Roter  
2 Westbury Drive  
St. Charles, MO 63301

Re: Mewbourne Oil Company NMOCD Applications

Dear Mr. Roter:

Case No. 21115  
**MEWBOURNE OIL**  
**Exhibit A-11**

Enclosed are copies of three applications for compulsory pooling that Mewbourne Oil Company ("Mewbourne") has filed with the New Mexico Oil Conservation Division ("the Division"). The applications request the following.

1. In Case No. 21114, Mewbourne requests an order pooling all uncommitted mineral interests in the Wolfcamp formation in a 640-acre, more or less, standard horizontal spacing unit comprised of the S/2 of Section 17 and the S/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to the Glock 17/16 WOLI Fed Com #1H and Glock 17/16 WOMP Fed Com #1H wells.

2. In Case No. 21115, Mewbourne requests an order pooling all uncommitted mineral interests in the Bone Spring formation in a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to the Glock 17/16 B3EH Fed Com #1H well.

3. In Case No. 21116, Mewbourne requests an order pooling all uncommitted mineral interests in the Bone Spring formation in a 640-acre, more or less, proximity tract horizontal spacing unit comprised of the S/2 of Section 17 and the S/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to the Glock 17/16 B3MP Fed Com #1H well.

These matters are scheduled for hearing at 8:15 a.m. on Thursday, March 5, 2020 in Porter Hall at the Division's offices located at 1220 South St. 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 Mewbourne's applications, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record, you will be precluded from contesting the matters at a later date.

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

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

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

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

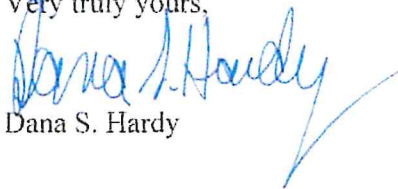
February 10, 2020

Page 2

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in these matters must be filed no later than Thursday, February 27, 2020. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,



Dana S. Hardy

Enclosure

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY													
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> T. Porter <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>													
<p>1. Article Addressed to:            Alex M. Roter            2 Westbury Drive            St. Charles, MO 63301</p>		<p>B. Received by (Printed Name)            T. Porter</p>	<p>C. Date of Delivery            2/13/20</p>												
<p>2. Article Number (Transfer from service label)            7019 2280 0001 9628 2469</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No            If YES, enter delivery address below:</p>													
<p>Barcode: 9590 9402 5554 9249 4876 57</p>		<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														

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 P.O. Box 130090  
 Houston, TX 77219-0090

City, State, ZIP+4®

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

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☐ Return Receipt (electronic) \$  
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☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Postage and Fees \$

Sent To: Ann S. Ragsdale  
 111 E. 80th  
 New York City, NY 10021

City, State, ZIP+4®



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☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_  
 Postage  
 \$ \_\_\_\_\_  
 Total Postage and Fees  
 \$ \_\_\_\_\_

Postmark  
 Here

Sent To Arturo G. Sterling  
 425 E. 58th, #35-B  
 Street and Apt. No. New York City, NY 10022  
 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:

Charles C. Albright Trust  
 729 West 16th St., #B-8  
 Costa Mesa, CA 92627



9590 9402 5554 9249 4876 02

2. Article Number (Transfer from service label)

7019 2280 0001 9628 6726

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below: ☐ No

3. Service Type

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

- ☐ 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:

Clampett's Tea, LLC  
 0113 Abram Creek Dr.  
 Eagle, CO 81631

no street pt



9590 9402 5554 9249 4886 85

2. Article Number (Transfer from service label)

7019 2280 0001 9628 7266

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below: ☐ No

3. Service Type

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

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

Restricted Delivery

Domestic Return Receipt



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>E. May</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:            Don Friedman            3219 South Gregg Court            Denver, CO 80210</p>		<p>B. Received by (Printed Name) _____ C. Date of Delivery <u>7/14</u></p>	
<p>2. Article Number (Transfer from service label)            7019 2280 0001 9628 6733</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>			
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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OFFICIAL USE

Certified Mail Fee \$ \_\_\_\_\_

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

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

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

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

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

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

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

Total Postage and Fees \$ \_\_\_\_\_

Sent To \_\_\_\_\_

Street and Apt. No., or \_\_\_\_\_

City, State, ZIP+4® \_\_\_\_\_

Postmark Here

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

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:            E. Trompeter Estate            c/o Robin Trompeter            6026 NW 31<sup>st</sup> Way            Boca Raton, FL 33496</p>		<p>B. Received by (Printed Name) _____ C. Date of Delivery <u>2/13</u></p>	
<p>2. Article Number (Transfer from service label)            7019 2280 0001 9628 6757</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™  <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>			
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	



7019 2280 0001 9628 6764

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**OFFICIAL USE**

Certified Mail Fee  
\$ \_\_\_\_\_

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

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

**Total Postage and Fees**  
\$ \_\_\_\_\_

Sent To  
First State Bank  
P.O. Box 98  
Rockwall, TX 75087

Street and Apt. No., or  
City, State, ZIP+4®

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

7019 2280 0001 9628 6955

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**OFFICIAL USE**

Certified Mail Fee  
\$ \_\_\_\_\_

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

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

**Total Postage and Fees**  
\$ \_\_\_\_\_

Sent To  
George M. Oringdulph  
2605 Park Avenue  
Alamosa CO 81101

Street and Apt. No., or  
City, State, ZIP+4®

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

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Say Kanegawa</i></p> <p>C. Date of Delivery <i>MAR 02 2020</i></p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p><b>RECEIVED</b> <b>MAR 02 2020</b></p>	
1. Article Addressed to: Gilbert T. Kanegawa 99-155 Moanava Rd Aiea, HI 96701		3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	
2. Article Number (Transfer from service label) 7019 2280 0001 9628 6771		<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	

7019 2280 0001 9628 6788

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**OFFICIAL USE**

Certified Mail Fee

\$

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

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

Postmark  
Here

Postage

\$

Total Postage and Fees

\$

Sent To

Glenn E. Duke

3240 San Mateo St.

Street and Apt. No.,

Clearwater, FL 33759-3630

City, State, ZIP+4®

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

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7019 2280 0001 9628 6795

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**OFFICIAL USE**

Certified Mail Fee

\$

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

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

Postmark  
Here

Postage

\$

Total Postage and Fees

\$

Sent To

Harry Bersner

P.O. Box 721

Street and Apt. No.,

San Francisco, CA 94101

City, State, ZIP+4®

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7019 2280 0001 9628 6801

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**OFFICIAL USE**

Certified Mail Fee

\$

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

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

Postmark  
Here

Postage

\$

Total Postage and Fees

\$

Sent To

Harry F. Poll

610 Brookline Place

Street and Apt. No., or PO Box

Fullerton, CA 92635

City, State, ZIP+4®

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7019 2280 0001 9628 6818

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Harry L. Green, Sr.
Street and Apt. No., or P.O.	109 B. Virginia St.
City, State, ZIP+4®	Hannibal, MO 63401
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7019 2280 0001 9628 6948

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For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	H.E. Oringdolph Estate
Street and Apt. No., or P.O.	2605 Park Avenue
City, State, ZIP+4®	Alamosa, CO 81101
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

7019 2280 0001 9628 6962

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Henry C. Landers
Street and Apt. No., or P.O.	1003 East Street
City, State, ZIP+4®	Redding, CA 96001
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

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Certified Mail Fee

\$

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

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery

\$

Postage

\$

Total Postage and Fees

\$

Sent To

Homer C. Turrón

Street and Apt. N

6510 FM 3012

City, State, ZIP+4®

Wharton, TX 77488

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**OFFICIAL USE**

Certified Mail Fee

\$

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

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery

\$

Postage

\$

Total Postage and Fees

\$

Sent To

Ivor J. Silver

Street and Apt.

1 Southampton Place

City, State, ZIP

Lafayette, CA 94549

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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:

J. Bodean, LLC  
529 North 4<sup>th</sup> St.  
San Jose, CA 95112



9590 9402 5554 9249 4886 61

2. Article Number (Transfer from service label)

7019 2280 0001 9628 7280

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

2/13

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Restricted Delivery





SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Jackie D. Willis</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:            Jackie D. Willis            P.O. Box 367            Snyder, TX 73566</p>		<p>B. Received by (Printed Name)  <i>Jackie Willis</i></p>	<p>C. Date of Delivery  <i>2/13/20</i></p>
<p>2. Article Number (Transfer from service label)            7019 2280 0001 9628 6993</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type  <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Sandra Johnston</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:            Jeffery M. Johnston            P.O. Box 1324            Midland, TX 79702</p>		<p>B. Received by (Printed Name)  <i>Sandra Johnston</i></p>	<p>C. Date of Delivery  <i>2/18/20</i></p>
<p>2. Article Number (Transfer from service label)            7019 2280 0001 9628 7327</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type  <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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<b>OFFICIAL USE</b>	
Certified Mail Fee \$	<p>Postmark Here</p>
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To John L. Steffan	
Street and Apt. No., c	824 Riverview Dr.
City, State, ZIP+4®	Plymouth, WI 53073
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">Judith Borger 4020 Meadow Dr. Conrwall, PA 17016</p> <div style="text-align: center;">             9590 9402 5554 9249 4880 05         </div> <p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7019 2280 0001 9628 7037</p>	<p>A. Signature <i>[Signature]</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i></p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table> <p style="text-align: center;">Restricted Delivery</p>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
PS Form 3811, July 2015 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span>													

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">Karelyn Siegler c/o Wells Fargo Bank, N.A. P.O. Box 41779 Austin, TX 79704</p> <div style="text-align: center;">             9590 9402 5554 9249 4885 93         </div> <p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7018 2290 0000 3428 1942</p>	<p>A. Signature <i>[Signature]</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Seretha Gress</i></p> <p>C. Date of Delivery <i>2-14-20</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table> <p style="text-align: center;">Restricted Delivery</p>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
PS Form 3811, July 2015 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span>													

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">LaDoca, LLC P.O. Box 631449 Houston, TX 77263</p> <div style="text-align: center;">             9590 9402 5554 9249 4886 78         </div> <p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7019 2280 0001 9628 7273</p>	<p>A. Signature <i>[Signature]</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery <i>Rec'd 2-20-20</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table> <p style="text-align: center;">Restricted Delivery</p>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
PS Form 3811, July 2015 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span>													



7019 2280 0001 9628 7044

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

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; 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

Larry M. Pickett

Street and Apt. No., or

860 W. Hickory Point Rd

City, State, ZIP+4®

Decatur, IL 62526

Postmark  
Here

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:

Leroy H. Simkins  
7 Indian Creek Rd  
Augusta, GA 30909



9590 9402 5554 9249 4886 47

2. Article Number (Transfer from service label)

7019 2280 0001 9628 7297

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Jaal Simkins

☐ Agent☐ Addressee

B. Received by (Printed Name)

SARAH SIMKINS

C. Date of Delivery

19 FEB 20

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

7019 2280 0001 9628 7051

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

Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee

\$

Extra Services &amp; 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

Lewis F. Holmes

Street and Apt. No.

1109 SC Highway 191

City, State, ZIP+4®

Trenton, SC 29847

Postmark  
Here

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

See Reverse for Instructions

7019 2280 0001 9628 7068

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Lillian Kamph
Street and Apt. No.,	1320 E. Ocean Front
City, State, ZIP+4®	Balboa, CA 92661
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

FEB 10 2020

Postmark  
Here

L 009

7019 2280 0001 9628 7075

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Mark J. Sandler
Street and Apt. No.,	16 West Road
City, State, ZIP+4®	Short Hills, ND 07078
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark  
Here

7019 2280 0001 9628 7082

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	MD Williams & DL Plant
Street and Apt. No., or 1	500 Laurel St.
City, State, ZIP+4®	Baton Rouge, LA 70801
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

Postmark  
Here



## SENDER: COMPLETE THIS SECTION

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

## 1. Article Addressed to:

Michael H. Steinman  
16358 E. Jacklin Dr.  
Fountain Hills, AZ 85268



9590 9402 5554 9249 4880 29

Article Number (Transfer from service label)

7019 2280 0001 9628 7013

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  
If YES, enter delivery address below: ☐ No

## 3. Service Type

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

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

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

## 1. Article Addressed to:

Michael Short  
1309 Brighton Place  
Midland, TX 79705



9590 9402 5554 9249 4886 16

2. Article Number (Transfer from service label)

7019 2280 0001 9628 7334

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  
If YES, enter delivery address below: ☐ No

## 3. Service Type

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

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

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

## 1. Article Addressed to:

Neil W. Schilke  
1820 N. Nye Ave.  
Freemont, NE 68025



9590 9402 5554 9249 4879 47

2. Article Number (Transfer from service label)

7019 2280 0001 9628 7099

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  
If YES, enter delivery address below: ☐ No

## 3. Service Type

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

Domestic Return Receipt



7019 2280 0001 9628 7105

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Norton S. Waldfogel	
Street and Apt. No., 16 Brown Rd	
City, State, ZIP+4® Swampscott, MA 01907	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

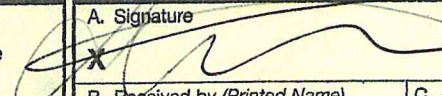
7019 2280 0001 9628 7112

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Patricia A. McMillian	
Street and Apt. No., or PO Box No. 1104 Constant Spring Rd	
City, State, ZIP+4® Austin, TX 78746	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

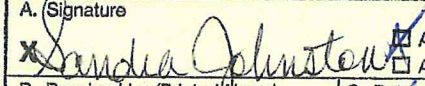
7019 2280 0001 9628 7129

<b>U.S. Postal Service™</b> <b>CERTIFIED MAIL® RECEIPT</b> <i>Domestic Mail Only</i>	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
<b>OFFICIAL USE</b>	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$	
<input type="checkbox"/> Return Receipt (electronic) \$	
<input type="checkbox"/> Certified Mail Restricted Delivery \$	
<input type="checkbox"/> Adult Signature Required \$	
<input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and Fees \$	
Sent To Robert M. Varn	
Street and Apt. No., or 3059 Farmington Ln	
City, State, ZIP+4® Atlanta, GA 30399	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY															
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>															
<p>1. Article Addressed to:</p> <p>Robert Steinman 424 Sunset Dr. Edwardsville, IL 62025</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>															
<p>2. Article Number (Transfer from service label)</p> <p>7019 2280 0001 9628 7020</p>		<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise																
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Insured Mail																	

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

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY													
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p>													
<p>1. Article Addressed to:</p> <p>Sand Dollar P.O. Box 1324 Midland, TX 79702</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>													
<p>2. Article Number (Transfer from service label)</p> <p>7019 2280 0001 9628 7310</p>		<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														

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

7019 2280 0001 9628 7136

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	Sandra H. Starratt
Street and Apt. No	886 Chesnut St.
City, State, ZIP+4®	San Jose, CA 95110

Postmark Here

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">Siegler Brothers Capital LLC 7 Windermere Lane Houston, TX 77063</p> <div style="text-align: center;">             9590 9402 5554 9249 4886 09         </div>	<p>A. Signature <b>X</b> </p> <p style="text-align: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  2/13/20</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7018 2290 0000 3428 1935</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery             </div> <div> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery             </div> </div> <p style="text-align: right;"><input type="checkbox"/> Restricted Delivery</p>

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">SK Clay U/TRT c/o. Northern Bank Trust 700 Bickell Ave. Miami, FL 33131</p> <div style="text-align: center;">             9590 9402 5554 9249 4888 21         </div>	<p>A. Signature <b>X</b> </p> <p style="text-align: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  2-13-20</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7019 2280 0001 9628 7143</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery             </div> <div> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery             </div> </div> <p style="text-align: right;"><input type="checkbox"/> Restricted Delivery</p>

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="text-align: center;">St. Devote LLC 919 Milam St., #2475 Houston, TX 77002</p> <div style="text-align: center;">             9590 9402 5554 9249 4886 92         </div>	<p>A. Signature <b>X</b> </p> <p style="text-align: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  2-13-20</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7019 2280 0001 9628 7259</p>	<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery             </div> <div> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery             </div> </div> <p style="text-align: right;"><input type="checkbox"/> Restricted Delivery</p>

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



7019 2280 0001 9628 7150

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*Domestic Mail Only*

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**OFFICIAL USE**

Certified Mail Fee  
\$

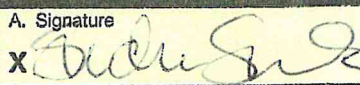
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage  
\$

Total Postage and Fees  
\$

Sent To Steven R. Lindesmith  
Street and Apt. No., P.O. Box 3476  
City, State, ZIP+4® Anaheim, CA 92803

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY														
<ul style="list-style-type: none"><li>■ Complete items 1, 2, and 3.</li><li>■ Print your name and address on the reverse so that we can return the card to you.</li><li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul>	<p>A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Sandra Sanchez</u> C. Date of Delivery <u>2/13/20</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>														
<p>1. Article Addressed to:</p> <p>Estate of T. Grover Swift, Jr. c/o Juliasue Swift 749 N. Main St. Fort Worth, TX 76164</p> <p>9590 9402 5554 9249 4888 07</p>	<p>3. Service Type</p> <table border="0"><tr><td><input type="checkbox"/> Adult Signature</td><td><input type="checkbox"/> Priority Mail Express®</td></tr><tr><td><input type="checkbox"/> Adult Signature Restricted Delivery</td><td><input type="checkbox"/> Registered Mail™</td></tr><tr><td><input type="checkbox"/> Certified Mail®</td><td><input type="checkbox"/> Registered Mail Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Certified Mail Restricted Delivery</td><td><input type="checkbox"/> Return Receipt for Merchandise</td></tr><tr><td><input type="checkbox"/> Collect on Delivery</td><td><input type="checkbox"/> Signature Confirmation™</td></tr><tr><td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td><td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td></tr><tr><td><input type="checkbox"/> Insured Mail</td><td></td></tr></table> <p>Restricted Delivery</p>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Insured Mail															
<p>2. Article Number (Transfer from service label)</p> <p>7019 2280 0001 9628 7167</p>															

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

7019 2280 0001 9628 7174

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Certified Mail Fee  
\$

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

Postage  
\$

Total Postage and Fees  
\$

Sent To Thomas Geimer  
Street and Apt. No., 7877 E. Mississippi, #1207  
City, State, ZIP+4® Denver, CO 80231

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

7019 2280 0001 9628 7181

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

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OFFICIAL USE

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

Postmark  
Here

Postage  
\$  
Total Postage and Fees

Sent To Warren N. Rosenquist  
35 Fagan Dr.  
Street and Apt. Hillsborough, CA 94010  
City, State, ZIP+4®

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

7019 2280 0001 9628 7198

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

Domestic Mail Only

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OFFICIAL USE

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

Postmark  
Here

Postage  
\$  
Total Postage and Fees

Sent To Westway Pet  
6400 N. Ctrl Expswy, #308  
Street and Apt. No., o Dallas, TX 75206  
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:

Whitney Wilson Jones  
601 Bailey Ave.  
Fort Worth, TX 76107



9590 9402 5554 9249 4887 60

## 2. Article Number (Transfer from service label)

7019 2280 0001 9628 7204

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

*Karla Martin* ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)



*Karla Martin* C. Date of Delivery *2-13-20*

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



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:  <div style="text-align: center;"> <b>William Bondeson</b>  <b>913 Leland Ridge Rd</b>  <b>Columbia, MO 65203</b> </div> </p> <div style="text-align: center; margin-top: 20px;">   <b>9590 9402 5554 9249 4887 39</b> </div> <p>2. Article Number (Transfer from service label)  <div style="text-align: center; border: 1px solid black; padding: 2px;"> <b>7019 2280 0001 9628 7211</b> </div> </p>	<p>A. Signature  <div style="display: flex; justify-content: space-between;"> <span><b>X</b> </span> <span><input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</span> </div> </p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <div style="display: flex; justify-content: space-between;"> <span><b>WM Bondeson</b></span> <span><b>2-18-20</b></span> </div> </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>		
<p>3. Service Type</p> <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery </td> <td style="vertical-align: top;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </td> </tr> </table>		<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		

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

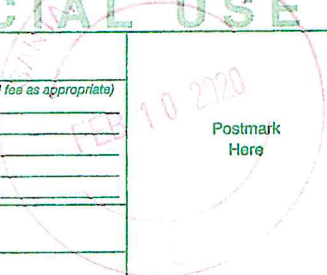
**7019 2280 0001 9628 7235**

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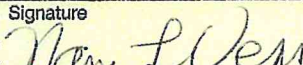
For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	
William Jacobs	
Street and Apt. No., or P.O. Box	
300 Revere Rd	
City, State, ZIP+4®	
Columbus, OH 04321	

  
Postmark  
Here

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:  <div style="text-align: center;"> <b>William P. McCormick</b>  <b>P.O. Box 57887</b>  <b>Bend, OR 97708</b> </div> </p> <div style="text-align: center; margin-top: 20px;">   <b>9590 9402 5554 9249 4887 46</b> </div> <p>2. Article Number (Transfer from service label)  <div style="text-align: center; border: 1px solid black; padding: 2px;"> <b>7019 2280 0001 9628 7303</b> </div> </p>	<p>A. Signature  <div style="display: flex; justify-content: space-between;"> <span><b>X</b> </span> <span><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> </div> </p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span>  <div style="display: flex; justify-content: space-between;"> <span><b>Nancy L. Vermin</b></span> <span><b>2-13-2020</b></span> </div> </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>		
<p>3. Service Type</p> <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Insured Mail  <input type="checkbox"/> Insured Mail Restricted Delivery </td> <td style="vertical-align: top;"> <input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery </td> </tr> </table>		<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		

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



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**OFFICIAL USE**

Certified Mail Fee

\$

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

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

Postage

\$

Total Postage and Fees

\$

Sent To

William W. Fetner

Street and Apt. No., or

10 S. Broadway

City, State, ZIP+4®

St. Louis, MO 63102

Postmark  
Here

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:

WP Kendall Trust  
c/o Northern Bank Trust  
700 Bickell Ave.  
Miami, FL 33131



9590 9402 5554 9249 4887 08

2. Article Number (Transfer from mailpiece)

7019 2280 0001 9628 7242

**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? If YES, enter delivery address below:

☐ Yes

☐ No

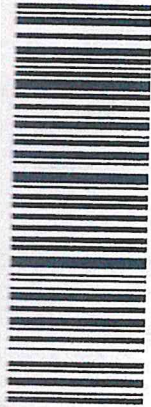
3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery  
☐ Restricted Delivery (over \$500)
- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

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

Domestic Return Receipt





7019 2260 0001 9628 2490

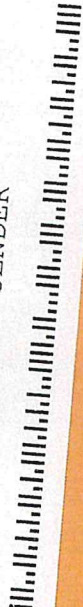
-R-T-S-

84068-RFS-1N

03/04/20

RETURN TO SENDER  
UNCLAIMED  
UNABLE TO FORWARD  
RETURN TO SENDER

\* R F S \*



-  ☐ Not Deliverable As Addressed
- ☐ Unable To Forward
- ☐ Insufficient Address
- ☐ Moved, Left No Address
- ☒ Unclaimed ☐ Refused
- ☐ Attempted - Not Known
- ☐ No Such Street ☐ Number
- ☐ Vacant ☐ Illegible
- ☐ No Mail Receptacle
- ☐ Box Closed - No Order
- ☐ Returned For Better Address
- ☐ Postage Due

Wlo  
4/12

2/11/2  
6/2/2

FROM HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068 • 218 MONTEZUMA  
SANTA FE, NEW MEXICO 87504



TO

Anthony Hawe  
2724 American  
Par.

Return to Sender  
RETURN TO SENDER



KEY RETURN ZIP CODE™ US 88



# Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

## Affidavit of Publication

Ad # 0004052983

This is not an invoice

HINKLE SHANOR LLP  
POBOX 10

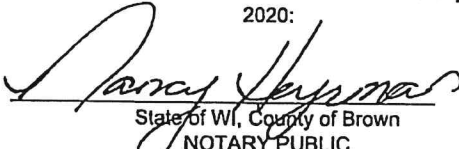
ROSWELL, NM 88202-0010

I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof on the date as follows, to wit:

February 12, 2020

  
Legal Clerk

Subscribed and sworn before me this February 12,  
2020:

  
State of WI, County of Brown  
NOTARY PUBLIC  
5.15.23  
My commission expires

Ad # 0004052983  
PO #: 21115  
# of Affidavits 1

This is not an invoice

NANCY HEYRMAN  
Notary Public  
State of Wisconsin

Case No. 21115

MEWBOURNE OIL  
Exhibit A-12

This is to notify all interested parties, including Alex M. Roter, Andrew E. MacMahon, Ann S. Ragsdale, Anthony Hawe, Arturo G. Sterling, Charles C. Albright Trust, Don Friedman, Dorothy Hinchliff, E. Trompeter Estate c/o Robin Trompeter, First State Bank c/o Alston R. Colbert, George M. Oringdulph c/o Rob Oringdulph, the Estate of H.E. Oringdulph c/o Rob Oringdulph, Gilbert T. Kanegawa, Glenn E. Duke, Harry Bersner, Harry F. Poll, Harry L. Green, Sr., Henry C. Landers, Homer C. Tutton, Ivor J. Silver, Jackie D. Willis, John L. Steffan c/o Lloyd Steffan, Michael H. Steinman, Robert Steinman, Judith Borger, Larry M. Pickett, Lewis F. Holmes, Lillian Kamph, Trustee of Trust 454F c/o Marcia F. Kamph, Trustee, Mark J. Sandler, MD Williams & DL Plant, Neil W. Schilke, Norton S. Waldfogel, Patricia A. McMillian, Robert M. Varn, Sandra H. Starratt c/o RLS, Inc., SK Clay U/TRT 6-21-78 c/o Northern Bank Trust, Steven R. Lindesmith c/o JW Flammer Co., the Estate of T. Grover Swift, Jr. c/o Juliusue Swift, Thomas Geimer, Warren N. Rosenquist, Westway Pet c/o Benjamin H. Read, Whitney Wilson Jones, William Bondeson, William W. Fetner c/o Lawton Byrne, William Jacobs, WVP Kendall U/TRT 6-21-78 c/o Northern Bank Trust, St. Devote LLC, Clampett's Tea, LLC, LaDoca, LLC, J. Bodean, LLC, Leroy H. Simkins, Helene B. Hewett/Barbara A. Powell Trust 1, Helene B. Hewett/Barbara A. Powell Trust 2, Janet S. Joslin, Leroy L. Burnette, Louesther Zwick Trust IV, William P. McCormick, Sand Dollar, Jeffery M. Johnston, Michael Short, Siegler Brothers Capital LLC, Karelyn Siegler c/o Wells Fargo Bank, N.A., and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Mewbourne Oil Company (Case No. 21115) at 8:15 a.m. on March 5, 2020 in Porter Hall at 1220 South St. Francis Drive, Santa Fe, New



Mexico. Applicant seeks an order pooling all uncommitted mineral interests in the Bone Spring formation in a 320-acre, more or less, standard horizontal spacing unit comprised of the S/2 N/2 of Section 17 and the S/2 N/2 of Section 16, Township 20 South, Range 29 East in Eddy County, New Mexico. The horizontal spacing unit will be dedicated to the Glock 17/16 B3EH Fed Com #1H well, which will be horizontally drilled from a surface location in Unit L in Section 17 to a bottom hole location in Unit H in Section 16, Township 20 South, Range 29 East. The completed interval for the well will be orthodox. Also to be considered will be the costs of drilling and completing the well and the allocation of the costs, the designation of Mewbourne Oil Company as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The well is located approximately thirteen (13) miles northeast of Carlsbad, New Mexico.

*February 12, 2020*

**AUTHORIZATION FOR EXPENDITURE**

<b>Extra Expense Insurance</b> <input type="checkbox"/> I elect to be covered by Operator's Extra Expense Insurance and pay my proportionate share of the premium. Operator has secured Extra Expense Insurance covering costs of well control, clean up and redrilling as estimated in Line Item 0180-0185.	
<input type="checkbox"/> I elect to purchase my own well control insurance policy.	
If neither box is checked above, non-operating working interest owner elects to be covered by Operator's well control insurance.	
Prepared by: <u>Jacob Maxey</u>	Date: <u>9/26/2019</u>
Company Approval: <u>M. Whittall</u>	Date: <u>9/27/2019</u>
Joint Owner Interest: _____ Amount: _____	
Joint Owner Name: _____	Signature: _____

Revised: 01/31/2018

Case No. 21115

MEWBOURNE OIL  
Exhibit A-13

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

APPLICATION OF MEWBOURNE OIL  
COMPANY FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO

Case No. 21115

SELF-AFFIRMED STATEMENT OF  
CHARLES CROSBY

1. I am over 18 years of age and am competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein.
2. I am a geologist at Mewbourne Oil Company ("Mewbourne"). I am familiar with the geological matters that pertain to Mewbourne's application.
3. I have previously testified before the New Mexico Oil Conservation Division as an expert in geology, and my qualifications were accepted.
4. A general regional location map of the proposed horizontal spacing unit ("HSU") is attached as Exhibit B-1.
5. A structure map of the top of the Wolfcamp formation is attached as Exhibit B-2. The map shows that the structure dips gently to the east-southeast. It also shows a line of cross section and the HSU for the proposed Glock 17/16 B3EH Fed Com #1H well.
6. Attached as Exhibit B-3 is a gross sand isopach map of the 3rd Bone Spring Sand formation, which is the target zone for the proposed well. It shows that the sand across the HSU has an approximate thickness of 385-400'.

Case No. 21115

MEWBOURNE OIL  
**Exhibit B**



7. Attached as Exhibit B-4 is a west to east cross section. The well logs on the cross section provide a representative sample of the 3<sup>rd</sup> Bone Spring Sand formation in the area. The target zone for the proposed well is continuous across the HSU.

8. Attached as Exhibit B-5 is a table containing production data from other 3<sup>rd</sup> Bone Spring Sand wells drilled in the vicinity. The preference is for laydown wells (west to east or east to west), and the completed wells in the area (recent completions) apparently are commercial.

9. Attached as Exhibit B-6 is a Well Planning Report for the proposed well. The report includes a plot and lateral trajectory schematic of the well bore. The well's producing interval will be orthodox.

10. There are no depth severances in the Bone Spring formation in the proposed HSU.

11. Based on the information discussed above, I am able to conclude that:


- a) The HSU is justified from a geologic standpoint;
- b) There is no faulting or other geologic impediment that could adversely affect the drilling of the proposed well; and
- c) Each quarter-quarter section in the HSU will contribute more or less equally to production.

12. In my opinion, the granting of Mewbourne's application will serve the interests of conservation and the prevention of waste.

13. Exhibits B-1 through B-6 were either prepared by me or compiled from company records.

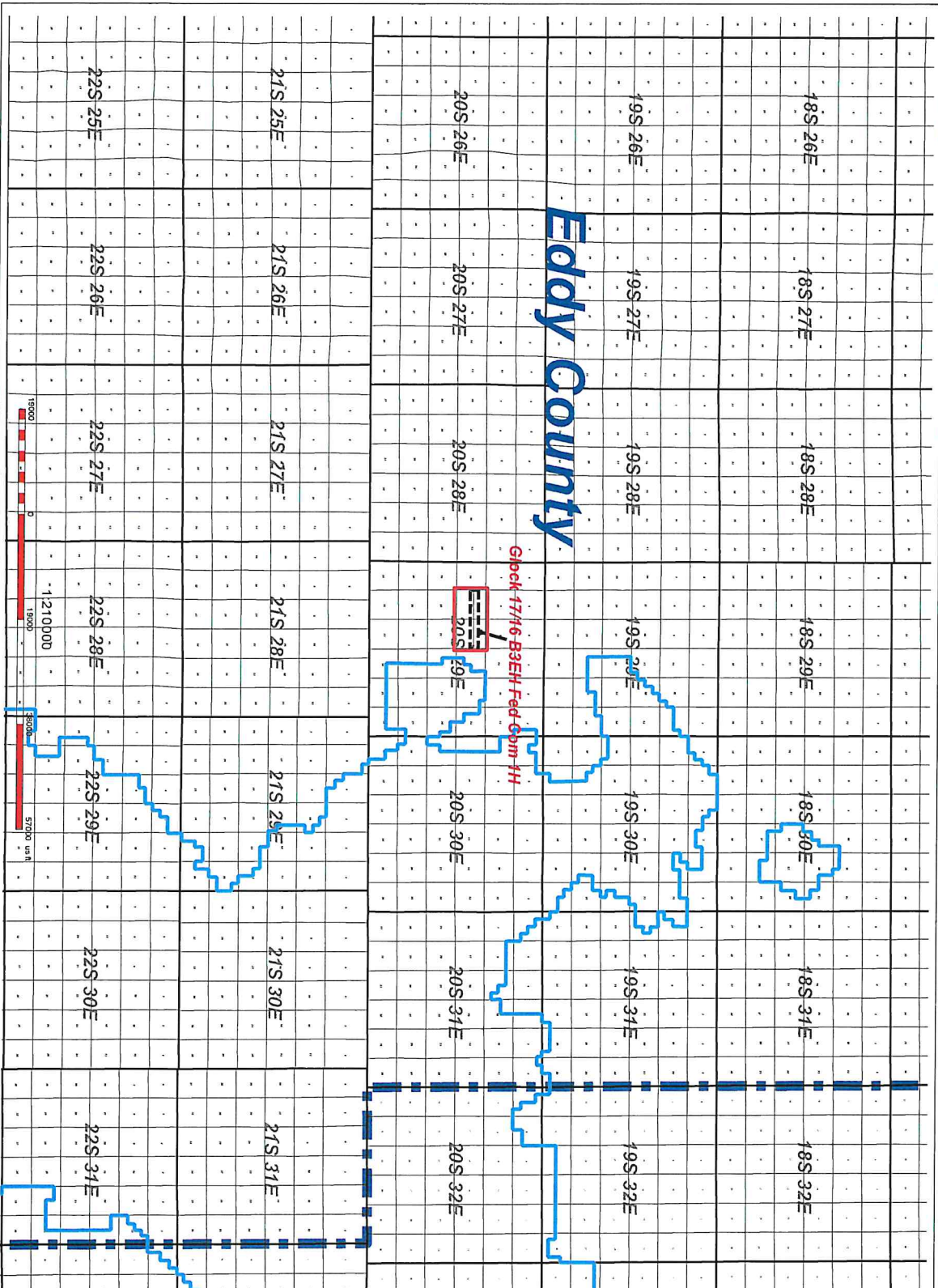
14. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 13 above is true and correct and is

made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

  
\_\_\_\_\_  
Charles Crosby

3/2/20  
Date

# Eddy County



**Mebourne Oil Company**

Regional Location Map  
 Showing the location of the  
 Top WSP Shallow (C1 100')  
 Well in the State of New Mexico

1:25,000	1:50,000	1:100,000
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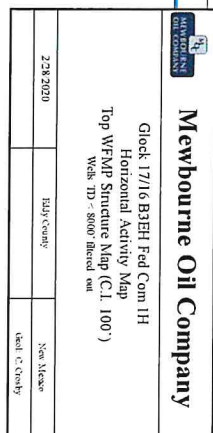
- Interstate Location
- Road Closure
- Pipeline
- Pipeline Crossing Boundary

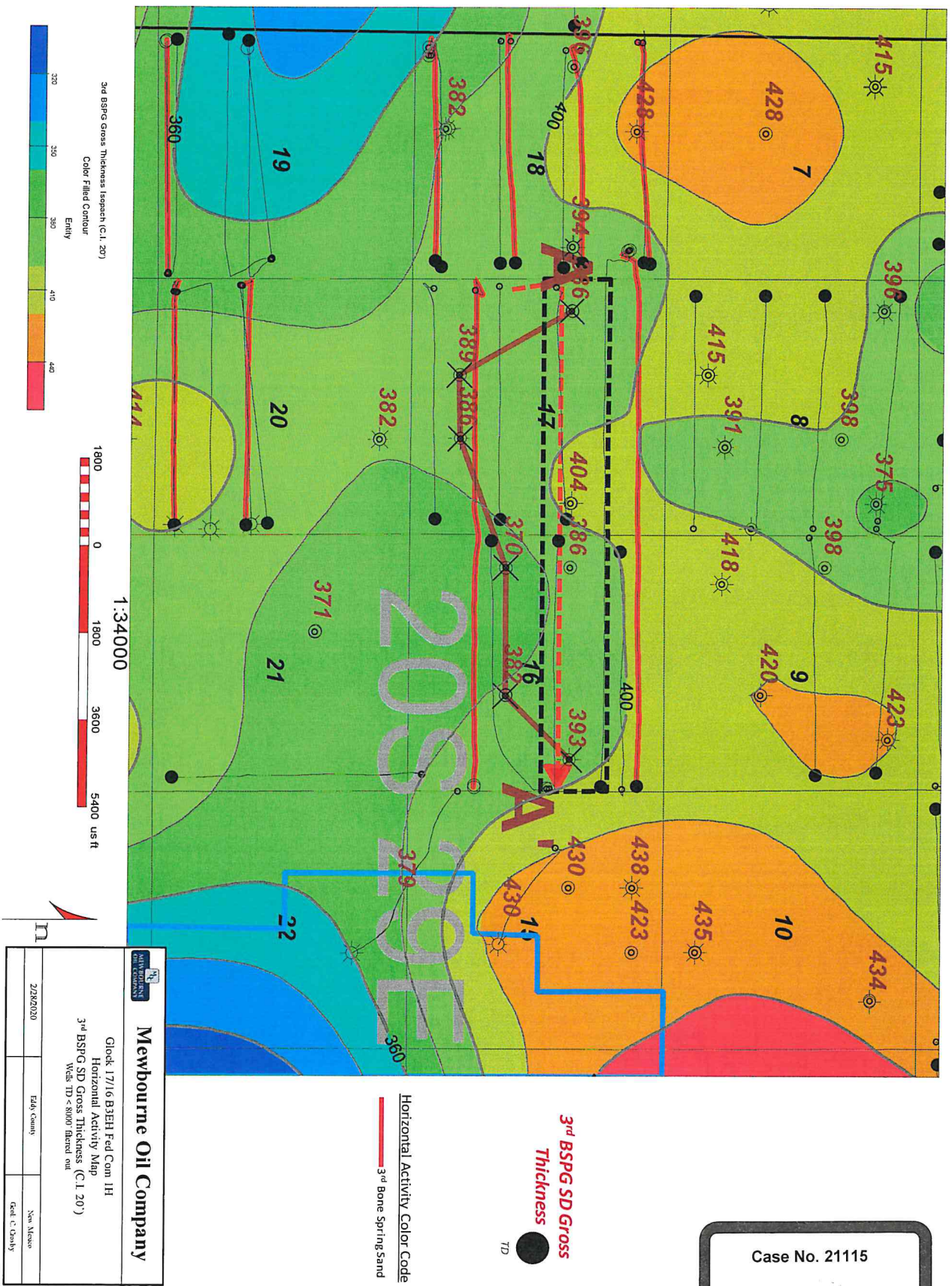
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**MEWBOURNE OIL**

**Exhibit B-1**



MEWBOURNE OIL  
Exhibit B-2



20S 20E



16H





Glock Area 3rd BSPG Sd Production Table								
Well Name	Operator	API	Location	Completion Date	Cum Oil (Mbo)	Cum Gas (Bcf)	Cum Water (Mbw)	NS/EW
Derringer 18 B3DA Federal 2H	Mewbourne	30015429690000	18D/20S/29E	9/10/2015	232.2	1.2	335.9	EW
Derringer 18 B3EH Federal 2H	Mewbourne	30015435780000	18E/20S/29E	5/24/2017	207.5	0.6	383.2	EW
Stebbins 20 Federal 134H	Matador	30015441750000	20M/20S/29E	11/8/2017	115.6	0.3	384.1	EW
Stebbins 20 Federal 133H	Matador	30015441830000	20L/20S/29E	7/14/2017	106.6	0.2	363.2	EW
Derringer 18 B3U Federal 2H	Mewbourne	30015444310000	18L/20S/29E	1/6/2018	245.2	0.6	392.8	EW
Derringer 18 B3MP Federal 2H	Mewbourne	30015448160000	18M/20S/29E	9/8/2018	160.7	0.4	313.6	EW
Glock 17/16 B3DA Federal Com 2H	Mewbourne	30015457940000	18A/20S/29E	8/31/2019	145.6	0.3	281.9	EW
Stebbins 19 Federal 137H	Matador	30015441870000	19P/20S/29E	Pending				EW
							3rd Bone Spring Sand	3rd Bone Spring Sand

# **Mewbourne Oil Company**

Eddy County, New Mexico NAD 83

Glock 17/16 B3EH Fed Com #1H

Sec 17, T20S, R29E

SHL: 2090' FSL & 230' FWL, Sec 17

BHL: 2200' FNL & 100' FEL, Sec 16

Plan: Design #1

## **Standard Planning Report**

25 September, 2019

Case No. 21115

MEWBOURNE OIL

**Exhibit B-6**

# Planning Report

<b>Database:</b>	Hobbs	<b>Local Co-ordinate Reference:</b>	Site Glock 17/16 B3EH Fed Com #1H
<b>Company:</b>	Mewbourne Oil Company	<b>TVD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Project:</b>	Eddy County, New Mexico NAD 83	<b>MD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Site:</b>	Glock 17/16 B3EH Fed Com #1H	<b>North Reference:</b>	Grid
<b>Well:</b>	Sec 17, T20S, R29E	<b>Survey Calculation Method:</b>	Minimum Curvature
<b>Wellbore:</b>	BHL: 2200' FNL & 100' FEL, Sec 16		
<b>Design:</b>	Design #1		

<b>Project</b>	Eddy County, New Mexico NAD 83		
<b>Map System:</b>	US State Plane 1983	<b>System Datum:</b>	Ground Level
<b>Geo Datum:</b>	North American Datum 1983		
<b>Map Zone:</b>	New Mexico Eastern Zone		

<b>Site</b>	Glock 17/16 B3EH Fed Com #1H			
<b>Site Position:</b>		<b>Northing:</b>	571,894.00 usft	<b>Latitude:</b> 32.5719843
<b>From:</b>	Map	<b>Easting:</b>	611,663.00 usft	<b>Longitude:</b> -104.1050398
<b>Position Uncertainty:</b>	0.0 usft	<b>Slot Radius:</b>	13-3/16 "	<b>Grid Convergence:</b> 0.12 °

<b>Well</b>	Sec 17, T20S, R29E			
<b>Well Position</b>	<b>+N/-S</b>	0.0 usft	<b>Northing:</b>	571,894.00 usft
	<b>+E/-W</b>	0.0 usft	<b>Easting:</b>	611,663.00 usft
<b>Position Uncertainty</b>	0.0 usft		<b>Wellhead Elevation:</b>	3,308.0 usft
			<b>Ground Level:</b>	3,280.0 usft

<b>Wellbore</b>	BHL: 2200' FNL & 100' FEL, Sec 16				
<b>Magnetics</b>	<b>Model Name</b>	<b>Sample Date</b>	<b>Declination (°)</b>	<b>Dip Angle (°)</b>	<b>Field Strength (nT)</b>
	IGRF2010	9/25/2019	6.83	60.21	47,918

<b>Design</b>	Design #1			
<b>Audit Notes:</b>				
<b>Version:</b>	<b>Phase:</b>	PROTOTYPE	<b>Tie On Depth:</b>	0.0
<b>Vertical Section:</b>	<b>Depth From (TVD) (usft)</b>	<b>+N/-S (usft)</b>	<b>+E/-W (usft)</b>	<b>Direction (°)</b>
	0.0	0.0	0.0	84.36

<b>Plan Sections</b>										
Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)	TFO (°)	Target
0.0	0.00	0.00	0.0	0.0	0.0	0.00	0.00	0.00	0.00	
1,350.0	0.00	0.00	1,350.0	0.0	0.0	0.00	0.00	0.00	0.00	
1,929.6	8.69	347.37	1,927.4	42.8	-9.6	1.50	1.50	0.00	347.37	
8,094.7	8.69	347.37	8,021.6	952.2	-213.4	0.00	0.00	0.00	0.00	
8,674.3	0.00	0.00	8,599.0	995.0	-223.0	1.50	-1.50	0.00	180.00	KOP: 2200' FNL & 10
9,421.5	89.56	89.91	9,077.0	995.7	251.4	11.99	11.99	0.00	89.91	
19,412.4	89.56	89.91	9,153.0	1,011.0	10,242.0	0.00	0.00	0.00	0.00	BHL: 2200' FNL & 100'



# Planning Report

<b>Database:</b>	Hobbs	<b>Local Co-ordinate Reference:</b>	Site Glock 17/16 B3EH Fed Com #1H
<b>Company:</b>	Mewbourne Oil Company	<b>TVD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Project:</b>	Eddy County, New Mexico NAD 83	<b>MD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Site:</b>	Glock 17/16 B3EH Fed Com #1H	<b>North Reference:</b>	Grid
<b>Well:</b>	Sec 17, T20S, R29E	<b>Survey Calculation Method:</b>	Minimum Curvature
<b>Wellbore:</b>	BHL: 2200' FNL & 100' FEL, Sec 16		
<b>Design:</b>	Design #1		

## Planned Survey

Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Vertical Section (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)
0.0	0.00	0.00	0.0	0.0	0.0	0.0	0.00	0.00	0.00
<b>SHL: 2090' FSL &amp; 230' FWL (Sec 17)</b>									
100.0	0.00	0.00	100.0	0.0	0.0	0.0	0.00	0.00	0.00
200.0	0.00	0.00	200.0	0.0	0.0	0.0	0.00	0.00	0.00
300.0	0.00	0.00	300.0	0.0	0.0	0.0	0.00	0.00	0.00
400.0	0.00	0.00	400.0	0.0	0.0	0.0	0.00	0.00	0.00
500.0	0.00	0.00	500.0	0.0	0.0	0.0	0.00	0.00	0.00
600.0	0.00	0.00	600.0	0.0	0.0	0.0	0.00	0.00	0.00
700.0	0.00	0.00	700.0	0.0	0.0	0.0	0.00	0.00	0.00
800.0	0.00	0.00	800.0	0.0	0.0	0.0	0.00	0.00	0.00
900.0	0.00	0.00	900.0	0.0	0.0	0.0	0.00	0.00	0.00
1,000.0	0.00	0.00	1,000.0	0.0	0.0	0.0	0.00	0.00	0.00
1,100.0	0.00	0.00	1,100.0	0.0	0.0	0.0	0.00	0.00	0.00
1,200.0	0.00	0.00	1,200.0	0.0	0.0	0.0	0.00	0.00	0.00
1,300.0	0.00	0.00	1,300.0	0.0	0.0	0.0	0.00	0.00	0.00
1,350.0	0.00	0.00	1,350.0	0.0	0.0	0.0	0.00	0.00	0.00
1,400.0	0.75	347.37	1,400.0	0.3	-0.1	0.0	1.50	1.50	0.00
1,500.0	2.25	347.37	1,500.0	2.9	-0.6	-0.4	1.50	1.50	0.00
1,600.0	3.75	347.37	1,599.8	8.0	-1.8	-1.0	1.50	1.50	0.00
1,700.0	5.25	347.37	1,699.5	15.6	-3.5	-2.0	1.50	1.50	0.00
1,800.0	6.75	347.37	1,799.0	25.8	-5.8	-3.2	1.50	1.50	0.00
1,900.0	8.25	347.37	1,898.1	38.6	-8.6	-4.8	1.50	1.50	0.00
1,929.6	8.69	347.37	1,927.4	42.8	-9.6	-5.3	1.50	1.50	0.00
2,000.0	8.69	347.37	1,997.0	53.2	-11.9	-6.6	0.00	0.00	0.00
2,100.0	8.69	347.37	2,095.8	68.0	-15.2	-8.5	0.00	0.00	0.00
2,200.0	8.69	347.37	2,194.7	82.7	-18.5	-10.3	0.00	0.00	0.00
2,300.0	8.69	347.37	2,293.5	97.5	-21.8	-12.2	0.00	0.00	0.00
2,400.0	8.69	347.37	2,392.4	112.2	-25.1	-14.0	0.00	0.00	0.00
2,500.0	8.69	347.37	2,491.2	127.0	-28.5	-15.8	0.00	0.00	0.00
2,600.0	8.69	347.37	2,590.1	141.7	-31.8	-17.7	0.00	0.00	0.00
2,700.0	8.69	347.37	2,688.9	156.5	-35.1	-19.5	0.00	0.00	0.00
2,800.0	8.69	347.37	2,787.8	171.2	-38.4	-21.4	0.00	0.00	0.00
2,900.0	8.69	347.37	2,886.6	186.0	-41.7	-23.2	0.00	0.00	0.00
3,000.0	8.69	347.37	2,985.5	200.7	-45.0	-25.0	0.00	0.00	0.00
3,100.0	8.69	347.37	3,084.3	215.5	-48.3	-26.9	0.00	0.00	0.00
3,200.0	8.69	347.37	3,183.2	230.2	-51.6	-28.7	0.00	0.00	0.00
3,300.0	8.69	347.37	3,282.0	245.0	-54.9	-30.6	0.00	0.00	0.00
3,400.0	8.69	347.37	3,380.9	259.7	-58.2	-32.4	0.00	0.00	0.00
3,500.0	8.69	347.37	3,479.7	274.5	-61.5	-34.3	0.00	0.00	0.00
3,600.0	8.69	347.37	3,578.6	289.2	-64.8	-36.1	0.00	0.00	0.00
3,700.0	8.69	347.37	3,677.4	304.0	-68.1	-37.9	0.00	0.00	0.00
3,800.0	8.69	347.37	3,776.3	318.7	-71.4	-39.8	0.00	0.00	0.00
3,900.0	8.69	347.37	3,875.1	333.5	-74.7	-41.6	0.00	0.00	0.00
4,000.0	8.69	347.37	3,974.0	348.2	-78.0	-43.5	0.00	0.00	0.00
4,100.0	8.69	347.37	4,072.8	363.0	-81.3	-45.3	0.00	0.00	0.00
4,200.0	8.69	347.37	4,171.7	377.7	-84.7	-47.1	0.00	0.00	0.00
4,300.0	8.69	347.37	4,270.5	392.5	-88.0	-49.0	0.00	0.00	0.00
4,400.0	8.69	347.37	4,369.4	407.2	-91.3	-50.8	0.00	0.00	0.00
4,500.0	8.69	347.37	4,468.2	422.0	-94.6	-52.7	0.00	0.00	0.00
4,600.0	8.69	347.37	4,567.1	436.7	-97.9	-54.5	0.00	0.00	0.00
4,700.0	8.69	347.37	4,665.9	451.5	-101.2	-56.3	0.00	0.00	0.00
4,800.0	8.69	347.37	4,764.8	466.2	-104.5	-58.2	0.00	0.00	0.00
4,900.0	8.69	347.37	4,863.6	481.0	-107.8	-60.0	0.00	0.00	0.00
5,000.0	8.69	347.37	4,962.5	495.7	-111.1	-61.9	0.00	0.00	0.00

# Planning Report

<b>Database:</b>	Hobbs	<b>Local Co-ordinate Reference:</b>	Site Glock 17/16 B3EH Fed Com #1H
<b>Company:</b>	Mewbourne Oil Company	<b>TVD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Project:</b>	Eddy County, New Mexico NAD 83	<b>MD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Site:</b>	Glock 17/16 B3EH Fed Com #1H	<b>North Reference:</b>	Grid
<b>Well:</b>	Sec 17, T20S, R29E	<b>Survey Calculation Method:</b>	Minimum Curvature
<b>Wellbore:</b>	BHL: 2200' FNL & 100' FEL, Sec 16		
<b>Design:</b>	Design #1		

## Planned Survey

Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Vertical Section (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)
5,100.0	8.69	347.37	5,061.3	510.5	-114.4	-63.7	0.00	0.00	0.00
5,200.0	8.69	347.37	5,160.2	525.2	-117.7	-65.5	0.00	0.00	0.00
5,300.0	8.69	347.37	5,259.1	540.0	-121.0	-67.4	0.00	0.00	0.00
5,400.0	8.69	347.37	5,357.9	554.7	-124.3	-69.2	0.00	0.00	0.00
5,500.0	8.69	347.37	5,456.8	569.5	-127.6	-71.1	0.00	0.00	0.00
5,600.0	8.69	347.37	5,555.6	584.2	-130.9	-72.9	0.00	0.00	0.00
5,700.0	8.69	347.37	5,654.5	599.0	-134.2	-74.8	0.00	0.00	0.00
5,800.0	8.69	347.37	5,753.3	613.7	-137.5	-76.6	0.00	0.00	0.00
5,900.0	8.69	347.37	5,852.2	628.5	-140.9	-78.4	0.00	0.00	0.00
6,000.0	8.69	347.37	5,951.0	643.2	-144.2	-80.3	0.00	0.00	0.00
6,100.0	8.69	347.37	6,049.9	658.0	-147.5	-82.1	0.00	0.00	0.00
6,200.0	8.69	347.37	6,148.7	672.7	-150.8	-84.0	0.00	0.00	0.00
6,300.0	8.69	347.37	6,247.6	687.5	-154.1	-85.8	0.00	0.00	0.00
6,400.0	8.69	347.37	6,346.4	702.2	-157.4	-87.6	0.00	0.00	0.00
6,500.0	8.69	347.37	6,445.3	717.0	-160.7	-89.5	0.00	0.00	0.00
6,600.0	8.69	347.37	6,544.1	731.7	-164.0	-91.3	0.00	0.00	0.00
6,700.0	8.69	347.37	6,643.0	746.5	-167.3	-93.2	0.00	0.00	0.00
6,800.0	8.69	347.37	6,741.8	761.2	-170.6	-95.0	0.00	0.00	0.00
6,900.0	8.69	347.37	6,840.7	776.0	-173.9	-96.8	0.00	0.00	0.00
7,000.0	8.69	347.37	6,939.5	790.7	-177.2	-98.7	0.00	0.00	0.00
7,100.0	8.69	347.37	7,038.4	805.5	-180.5	-100.5	0.00	0.00	0.00
7,200.0	8.69	347.37	7,137.2	820.2	-183.8	-102.4	0.00	0.00	0.00
7,300.0	8.69	347.37	7,236.1	835.0	-187.1	-104.2	0.00	0.00	0.00
7,400.0	8.69	347.37	7,334.9	849.7	-190.4	-106.0	0.00	0.00	0.00
7,500.0	8.69	347.37	7,433.8	864.5	-193.7	-107.9	0.00	0.00	0.00
7,600.0	8.69	347.37	7,532.6	879.2	-197.0	-109.7	0.00	0.00	0.00
7,700.0	8.69	347.37	7,631.5	894.0	-200.4	-111.6	0.00	0.00	0.00
7,800.0	8.69	347.37	7,730.3	908.7	-203.7	-113.4	0.00	0.00	0.00
7,900.0	8.69	347.37	7,829.2	923.5	-207.0	-115.3	0.00	0.00	0.00
8,000.0	8.69	347.37	7,928.0	938.2	-210.3	-117.1	0.00	0.00	0.00
8,094.7	8.69	347.37	8,021.6	952.2	-213.4	-118.8	0.00	0.00	0.00
8,100.0	8.61	347.37	8,026.9	953.0	-213.6	-118.9	1.50	-1.50	0.00
8,200.0	7.11	347.37	8,125.9	966.3	-216.6	-120.6	1.50	-1.50	0.00
8,300.0	5.61	347.37	8,225.3	977.1	-219.0	-121.9	1.50	-1.50	0.00
8,400.0	4.11	347.37	8,325.0	985.4	-220.8	-123.0	1.50	-1.50	0.00
8,500.0	2.61	347.37	8,424.8	991.1	-222.1	-123.7	1.50	-1.50	0.00
8,600.0	1.11	347.37	8,524.7	994.3	-222.8	-124.1	1.50	-1.50	0.00
8,674.3	0.00	0.00	8,599.0	995.0	-223.0	-124.2	1.50	-1.50	0.00
<b>KOP: 2200' FNL &amp; 10' FWL (Sec 17)</b>									
8,700.0	3.08	89.91	8,624.7	995.0	-222.3	-123.5	11.99	11.99	0.00
8,800.0	15.07	89.91	8,723.3	995.0	-206.6	-107.8	11.99	11.99	0.00
8,900.0	27.05	89.91	8,816.4	995.1	-170.7	-72.1	11.99	11.99	0.00
9,000.0	39.04	89.91	8,900.1	995.2	-116.3	-17.9	11.99	11.99	0.00
9,100.0	51.03	89.91	8,970.6	995.3	-45.6	52.4	11.99	11.99	0.00
9,200.0	63.01	89.91	9,025.0	995.4	38.1	135.7	11.99	11.99	0.00
9,291.4	73.97	89.91	9,058.4	995.5	123.0	220.2	11.99	11.99	0.00
<b>FTP: 2200' FNL &amp; 100' FWL (Sec 17)</b>									
9,300.0	75.00	89.91	9,060.7	995.5	131.3	228.5	11.99	11.99	0.00
9,400.0	86.99	89.91	9,076.4	995.7	229.9	326.6	11.99	11.99	0.00
9,421.5	89.56	89.91	9,077.0	995.7	251.4	348.0	11.97	11.97	0.00
<b>LP: 2200' FNL &amp; 481' FWL (Sec 17)</b>									
9,500.0	89.56	89.91	9,077.6	995.8	329.9	426.1	0.00	0.00	0.00
9,600.0	89.56	89.91	9,078.4	996.0	429.9	525.6	0.00	0.00	0.00



# Planning Report

<b>Database:</b>	Hobbs	<b>Local Co-ordinate Reference:</b>	Site Glock 17/16 B3EH Fed Com #1H
<b>Company:</b>	Mewbourne Oil Company	<b>TVD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Project:</b>	Eddy County, New Mexico NAD 83	<b>MD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Site:</b>	Glock 17/16 B3EH Fed Com #1H	<b>North Reference:</b>	Grid
<b>Well:</b>	Sec 17, T20S, R29E	<b>Survey Calculation Method:</b>	Minimum Curvature
<b>Wellbore:</b>	BHL: 2200' FNL & 100' FEL, Sec 16		
<b>Design:</b>	Design #1		

## Planned Survey

Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Vertical Section (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)
9,700.0	89.56	89.91	9,079.1	996.2	529.9	625.2	0.00	0.00	0.00
9,800.0	89.56	89.91	9,079.9	996.3	629.9	724.7	0.00	0.00	0.00
9,900.0	89.56	89.91	9,080.6	996.5	729.9	824.2	0.00	0.00	0.00
10,000.0	89.56	89.91	9,081.4	996.6	829.9	923.7	0.00	0.00	0.00
10,100.0	89.56	89.91	9,082.2	996.8	929.8	1,023.3	0.00	0.00	0.00
10,200.0	89.56	89.91	9,082.9	996.9	1,029.8	1,122.8	0.00	0.00	0.00
10,300.0	89.56	89.91	9,083.7	997.1	1,129.8	1,222.3	0.00	0.00	0.00
10,400.0	89.56	89.91	9,084.4	997.2	1,229.8	1,321.9	0.00	0.00	0.00
10,500.0	89.56	89.91	9,085.2	997.4	1,329.8	1,421.4	0.00	0.00	0.00
10,600.0	89.56	89.91	9,086.0	997.5	1,429.8	1,520.9	0.00	0.00	0.00
10,700.0	89.56	89.91	9,086.7	997.7	1,529.8	1,620.4	0.00	0.00	0.00
10,800.0	89.56	89.91	9,087.5	997.8	1,629.8	1,720.0	0.00	0.00	0.00
10,900.0	89.56	89.91	9,088.2	998.0	1,729.8	1,819.5	0.00	0.00	0.00
11,000.0	89.56	89.91	9,089.0	998.1	1,829.8	1,919.0	0.00	0.00	0.00
11,100.0	89.56	89.91	9,089.8	998.3	1,929.8	2,018.5	0.00	0.00	0.00
11,200.0	89.56	89.91	9,090.5	998.4	2,029.8	2,118.1	0.00	0.00	0.00
11,300.0	89.56	89.91	9,091.3	998.6	2,129.8	2,217.6	0.00	0.00	0.00
11,400.0	89.56	89.91	9,092.1	998.8	2,229.8	2,317.1	0.00	0.00	0.00
11,500.0	89.56	89.91	9,092.8	998.9	2,329.8	2,416.7	0.00	0.00	0.00
11,600.0	89.56	89.91	9,093.6	999.1	2,429.8	2,516.2	0.00	0.00	0.00
11,700.0	89.56	89.91	9,094.3	999.2	2,529.8	2,615.7	0.00	0.00	0.00
11,800.0	89.56	89.91	9,095.1	999.4	2,629.8	2,715.2	0.00	0.00	0.00
11,900.0	89.56	89.91	9,095.9	999.5	2,729.8	2,814.8	0.00	0.00	0.00
12,000.0	89.56	89.91	9,096.6	999.7	2,829.8	2,914.3	0.00	0.00	0.00
12,100.0	89.56	89.91	9,097.4	999.8	2,929.8	3,013.8	0.00	0.00	0.00
12,200.0	89.56	89.91	9,098.1	1,000.0	3,029.8	3,113.4	0.00	0.00	0.00
12,300.0	89.56	89.91	9,098.9	1,000.1	3,129.8	3,212.9	0.00	0.00	0.00
12,400.0	89.56	89.91	9,099.7	1,000.3	3,229.8	3,312.4	0.00	0.00	0.00
12,500.0	89.56	89.91	9,100.4	1,000.4	3,329.8	3,411.9	0.00	0.00	0.00
12,600.0	89.56	89.91	9,101.2	1,000.6	3,429.8	3,511.5	0.00	0.00	0.00
12,700.0	89.56	89.91	9,101.9	1,000.7	3,529.8	3,611.0	0.00	0.00	0.00
12,800.0	89.56	89.91	9,102.7	1,000.9	3,629.8	3,710.5	0.00	0.00	0.00
12,900.0	89.56	89.91	9,103.5	1,001.0	3,729.8	3,810.1	0.00	0.00	0.00
13,000.0	89.56	89.91	9,104.2	1,001.2	3,829.8	3,909.6	0.00	0.00	0.00
13,100.0	89.56	89.91	9,105.0	1,001.3	3,929.8	4,009.1	0.00	0.00	0.00
13,200.0	89.56	89.91	9,105.7	1,001.5	4,029.8	4,108.6	0.00	0.00	0.00
13,300.0	89.56	89.91	9,106.5	1,001.7	4,129.8	4,208.2	0.00	0.00	0.00
13,400.0	89.56	89.91	9,107.3	1,001.8	4,229.7	4,307.7	0.00	0.00	0.00
13,500.0	89.56	89.91	9,108.0	1,002.0	4,329.7	4,407.2	0.00	0.00	0.00
13,600.0	89.56	89.91	9,108.8	1,002.1	4,429.7	4,506.8	0.00	0.00	0.00
13,700.0	89.56	89.91	9,109.5	1,002.3	4,529.7	4,606.3	0.00	0.00	0.00
13,800.0	89.56	89.91	9,110.3	1,002.4	4,629.7	4,705.8	0.00	0.00	0.00
13,900.0	89.56	89.91	9,111.1	1,002.6	4,729.7	4,805.3	0.00	0.00	0.00
14,000.0	89.56	89.91	9,111.8	1,002.7	4,829.7	4,904.9	0.00	0.00	0.00
14,100.0	89.56	89.91	9,112.6	1,002.9	4,929.7	5,004.4	0.00	0.00	0.00
14,200.0	89.56	89.91	9,113.3	1,003.0	5,029.7	5,103.9	0.00	0.00	0.00
14,227.3	89.56	89.91	9,113.6	1,003.1	5,057.0	5,131.1	0.00	0.00	0.00
PPP2: 2200' FNL & 0' FWL (Sec 16)									
14,300.0	89.56	89.91	9,114.1	1,003.2	5,129.7	5,203.5	0.00	0.00	0.00
14,400.0	89.56	89.91	9,114.9	1,003.3	5,229.7	5,303.0	0.00	0.00	0.00
14,500.0	89.56	89.91	9,115.6	1,003.5	5,329.7	5,402.5	0.00	0.00	0.00
14,600.0	89.56	89.91	9,116.4	1,003.6	5,429.7	5,502.0	0.00	0.00	0.00
14,700.0	89.56	89.91	9,117.2	1,003.8	5,529.7	5,601.6	0.00	0.00	0.00



# Planning Report

<b>Database:</b>	Hobbs	<b>Local Co-ordinate Reference:</b>	Site Glock 17/16 B3EH Fed Com #1H
<b>Company:</b>	Mewbourne Oil Company	<b>TVD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Project:</b>	Eddy County, New Mexico NAD 83	<b>MD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Site:</b>	Glock 17/16 B3EH Fed Com #1H	<b>North Reference:</b>	Grid
<b>Well:</b>	Sec 17, T20S, R29E	<b>Survey Calculation Method:</b>	Minimum Curvature
<b>Wellbore:</b>	BHL: 2200' FNL & 100' FEL, Sec 16		
<b>Design:</b>	Design #1		

## Planned Survey

Measured Depth (usft)	Inclination (°)	Azimuth (°)	Vertical Depth (usft)	+N/-S (usft)	+E/-W (usft)	Vertical Section (usft)	Dogleg Rate (°/100usft)	Build Rate (°/100usft)	Turn Rate (°/100usft)
14,800.0	89.56	89.91	9,117.9	1,003.9	5,629.7	5,701.1	0.00	0.00	0.00
14,900.0	89.56	89.91	9,118.7	1,004.1	5,729.7	5,800.6	0.00	0.00	0.00
15,000.0	89.56	89.91	9,119.4	1,004.3	5,829.7	5,900.2	0.00	0.00	0.00
15,100.0	89.56	89.91	9,120.2	1,004.4	5,929.7	5,999.7	0.00	0.00	0.00
15,200.0	89.56	89.91	9,121.0	1,004.6	6,029.7	6,099.2	0.00	0.00	0.00
15,300.0	89.56	89.91	9,121.7	1,004.7	6,129.7	6,198.7	0.00	0.00	0.00
15,400.0	89.56	89.91	9,122.5	1,004.9	6,229.7	6,298.3	0.00	0.00	0.00
15,500.0	89.56	89.91	9,123.2	1,005.0	6,329.7	6,397.8	0.00	0.00	0.00
15,600.0	89.56	89.91	9,124.0	1,005.2	6,429.7	6,497.3	0.00	0.00	0.00
15,700.0	89.56	89.91	9,124.8	1,005.3	6,529.7	6,596.9	0.00	0.00	0.00
15,800.0	89.56	89.91	9,125.5	1,005.5	6,629.7	6,696.4	0.00	0.00	0.00
15,900.0	89.56	89.91	9,126.3	1,005.6	6,729.7	6,795.9	0.00	0.00	0.00
16,000.0	89.56	89.91	9,127.0	1,005.8	6,829.7	6,895.4	0.00	0.00	0.00
16,100.0	89.56	89.91	9,127.8	1,005.9	6,929.7	6,995.0	0.00	0.00	0.00
16,200.0	89.56	89.91	9,128.6	1,006.1	7,029.7	7,094.5	0.00	0.00	0.00
16,300.0	89.56	89.91	9,129.3	1,006.2	7,129.7	7,194.0	0.00	0.00	0.00
16,400.0	89.56	89.91	9,130.1	1,006.4	7,229.7	7,293.6	0.00	0.00	0.00
16,500.0	89.56	89.91	9,130.8	1,006.5	7,329.7	7,393.1	0.00	0.00	0.00
16,600.0	89.56	89.91	9,131.6	1,006.7	7,429.7	7,492.6	0.00	0.00	0.00
16,700.0	89.56	89.91	9,132.4	1,006.9	7,529.6	7,592.1	0.00	0.00	0.00
16,800.0	89.56	89.91	9,133.1	1,007.0	7,629.6	7,691.7	0.00	0.00	0.00
16,900.0	89.56	89.91	9,133.9	1,007.2	7,729.6	7,791.2	0.00	0.00	0.00
17,000.0	89.56	89.91	9,134.6	1,007.3	7,829.6	7,890.7	0.00	0.00	0.00
17,100.0	89.56	89.91	9,135.4	1,007.5	7,929.6	7,990.3	0.00	0.00	0.00
17,200.0	89.56	89.91	9,136.2	1,007.6	8,029.6	8,089.8	0.00	0.00	0.00
17,300.0	89.56	89.91	9,136.9	1,007.8	8,129.6	8,189.3	0.00	0.00	0.00
17,400.0	89.56	89.91	9,137.7	1,007.9	8,229.6	8,288.8	0.00	0.00	0.00
17,500.0	89.56	89.91	9,138.5	1,008.1	8,329.6	8,388.4	0.00	0.00	0.00
17,600.0	89.56	89.91	9,139.2	1,008.2	8,429.6	8,487.9	0.00	0.00	0.00
17,700.0	89.56	89.91	9,140.0	1,008.4	8,529.6	8,587.4	0.00	0.00	0.00
17,800.0	89.56	89.91	9,140.7	1,008.5	8,629.6	8,686.9	0.00	0.00	0.00
17,900.0	89.56	89.91	9,141.5	1,008.7	8,729.6	8,786.5	0.00	0.00	0.00
18,000.0	89.56	89.91	9,142.3	1,008.8	8,829.6	8,886.0	0.00	0.00	0.00
18,100.0	89.56	89.91	9,143.0	1,009.0	8,929.6	8,985.5	0.00	0.00	0.00
18,200.0	89.56	89.91	9,143.8	1,009.1	9,029.6	9,085.1	0.00	0.00	0.00
18,300.0	89.56	89.91	9,144.5	1,009.3	9,129.6	9,184.6	0.00	0.00	0.00
18,400.0	89.56	89.91	9,145.3	1,009.5	9,229.6	9,284.1	0.00	0.00	0.00
18,500.0	89.56	89.91	9,146.1	1,009.6	9,329.6	9,383.6	0.00	0.00	0.00
18,600.0	89.56	89.91	9,146.8	1,009.8	9,429.6	9,483.2	0.00	0.00	0.00
18,700.0	89.56	89.91	9,147.6	1,009.9	9,529.6	9,582.7	0.00	0.00	0.00
18,800.0	89.56	89.91	9,148.3	1,010.1	9,629.6	9,682.2	0.00	0.00	0.00
18,900.0	89.56	89.91	9,149.1	1,010.2	9,729.6	9,781.8	0.00	0.00	0.00
19,000.0	89.56	89.91	9,149.9	1,010.4	9,829.6	9,881.3	0.00	0.00	0.00
19,100.0	89.56	89.91	9,150.6	1,010.5	9,929.6	9,980.8	0.00	0.00	0.00
19,200.0	89.56	89.91	9,151.4	1,010.7	10,029.6	10,080.3	0.00	0.00	0.00
19,300.0	89.56	89.91	9,152.1	1,010.8	10,129.6	10,179.9	0.00	0.00	0.00
19,400.0	89.56	89.91	9,152.9	1,011.0	10,229.6	10,279.4	0.00	0.00	0.00
19,412.4	89.56	89.91	9,153.0	1,011.0	10,242.0	10,291.8	0.00	0.00	0.00

BHL: 2200' FNL & 100' FEL (Sec 16)

# Planning Report

<b>Database:</b>	Hobbs	<b>Local Co-ordinate Reference:</b>	Site Glock 17/16 B3EH Fed Com #1H
<b>Company:</b>	Mewbourne Oil Company	<b>TVD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Project:</b>	Eddy County, New Mexico NAD 83	<b>MD Reference:</b>	WELL @ 3308.0usft (Original Well Elev)
<b>Site:</b>	Glock 17/16 B3EH Fed Com #1H	<b>North Reference:</b>	Grid
<b>Well:</b>	Sec 17, T20S, R29E	<b>Survey Calculation Method:</b>	Minimum Curvature
<b>Wellbore:</b>	BHL: 2200' FNL & 100' FEL, Sec 16		
<b>Design:</b>	Design #1		

Design Targets									
Target Name - hit/miss target - Shape	Dip Angle (°)	Dip Dir. (°)	TVD (usft)	+N/-S (usft)	+E/-W (usft)	Northing (usft)	Easting (usft)	Latitude	Longitude
SHL: 2090' FSL & 230' F - plan hits target center - Point	0.00	0.00	0.0	0.0	0.0	571,894.00	611,663.00	32.5719843	-104.1050398
KOP: 2200' FNL & 10' F - plan hits target center - Point	0.00	0.00	8,599.0	995.0	-223.0	572,889.00	611,440.00	32.5747206	-104.1057568
FTP: 2200' FNL & 100' F - plan hits target center - Point	0.00	0.00	9,058.4	995.5	123.0	572,889.53	611,786.00	32.5747200	-104.1046336
LP: 2200' FNL & 481' FV - plan hits target center - Point	0.00	0.00	9,077.0	995.7	251.4	572,889.70	611,914.40	32.5747197	-104.1042167
PPP2: 2200' FNL & 0' F - plan hits target center - Point	0.00	0.00	9,113.6	1,003.1	5,057.0	572,897.08	616,720.00	32.5747106	-104.0886162
BHL: 2200' FNL & 100' F - plan hits target center - Point	0.00	0.00	9,153.0	1,011.0	10,242.0	572,905.00	621,905.00	32.5746985	-104.0717840

# Glock 17/16 B3EH Fed Com #1H

