BEFORE THE OIL CONSERVATION COMMISSION

SANTA FE, NEW MEXICO

EXHIBIT NO. 16 - CASE NO. 14981

SUBMITTED BY: OXY

HEARING DATE: MAY 9, 2013

South Hobbs Unit Working Interest Owners

Name	Street Address/PO Box	City/State/Zip Code
20 ACRES LLC	801 GARCIA STREET	SANTA FE NM 87505
ADELAIDE F COHU TRUST KEVIN J McGRAWATTN: ANTHONY KOCHEVAR C/O MINTZ & FRAADE PC	488 MADISON AVE	NEW YORK NY 10022-5001
AGHORN ENERGY ATTN: FROSTY GILLIAM JR	P O BOX 12663	ODESSA TX 79768
ANN H TAYLOR	P O BOX 3487	MIDLAND TX 79702-3487
BARBARA J DEVOSS JUNKER	P O BOX 5346	LUBOCK TX 79453-3546
BILLIE S DEVOSS	15311 E LA SALOS DRIVE	WHITTIER CA 90603-2243
BUTTRAM ENERGIES INC	2601 NW EXPRESSWAY 501 OIL CENTER WEST	OKLAHOMA CITY OK 73112-7269
C M E OIL & GAS COMPANY	P O BOX 10621	MIDLAND TX 79702-7621
CARA V UMPLEBY LOCKETT ROYALTY TRUST	5110 S YALE #400	TULSA OK 74135
CATHERINE CUSACK	2223 PAJARITO SW	ALBUQUERQUE NM 87105
CBR OIL PROPERTIES LLC	P O BOX 1518	ROSWELL NM 88202-1518
CEC TRUST FBO PARTICK EDWARD CORRIGAN PATRICK EDWARD CORRIGAN TRUSTEE	8750 N CENTRAL EXPY #510	DALLAS TX 75231
CEC TRUST FBO HUGH CORRIGAN IV	3809 SHENADOAH ST	DALLAS TX 75205
CHARTER PRIVATE EQUITY	47 HIGHLAND PARK VILLAGE #200	DALLAS TX 75205
CHRISTEN SCHUTTE SANDERS	1408 CARSON	FORT WORTH TX 76117-6107
CHRISTOPHER R CUSACK	2114 HOLMBY	LOS ANGELES CA 90025
CLIFF T MILFORD	12019 BROWNING LANE	DALLAS TX 75230-2851
COLLEEN M WALLACE NEWMAN	24 CLUB CIRCLE	SHERWOOD AR 72120
CONNIE HINMAN	1833 DEVONDALE CIRCLE	CHARLESTON WV 25314-2205
CRAIG CUSACK	P O BOX 250	ROSWELL NM 88202-0250
CUSACK FAMILY REV OCABLE TRUST	P O BOX 25	WILLOW CITY TX 78675
CYNTHIA ANN AVARA TAVERNA	3808 HIGHWEED	EL PASO TX 79928
CYNTHIA S GREGG	P O BOX 724	SUNDOWN TX 79372-0724
DINAH GEMELLE	P O BOX 486	VAUGHN WA 98394-0486
EDWARD ALLAN DUNBAR	P O BOX 885	ROCKSPRINGS TX 7880-0885
EDYTHE OWEN PRIKRYL	12 AUSTIN DOUGLAS WAY	CONGERS NY 10920-2466
ELEANOR CHRISTIE CORRIGAN TR U/W/O CE CORRIGANJ PAT CORRIGAN TRUSTEE	P O BOX 63869	COLORADO SPRINGS CO 80962
EVELYN CLAY OHARA TRUST	5022 BUFFALO COURT SOUTH	FORT WORTH TX 76119-7857
FIRST ROSWELL COMPANY	P O BOX 1797	ROSWELL NM 88202-1797
GAVIN R GARRETT JP MORGAN CHASE BANK NA ATTN: PHILLIP METTHAM	P O BOX 2605	FORT WORTH TX 76113-2605
GEORGE G SNOWDEN III TRUST ANN H SNOWDEN TRUSTEE	93 BEACH ST	WESTERLY RI 02891
GEORGE H ETZ SR TRUST GEORGE ETZ JR TRUSTEE	1105 XANTHISMA	McALLEN TX 78504-3519
GEORGE L AVARA	3108 TIERRA ENCINO DR	EL PASO TX 79338-4521

Name	Street Address/PO Box	City/State/Zip Code
GOODRICH TRUST NUMBER ONE U/W DAVID E GOODRICH BK ONE TX TRUSTEE/ACCT 5555	P O BOX 99084	FORT WORTH TX 76199-0084
GOODRICH TRUST NUMBER TWO U/W DAVID E GOODRICHBK ONE TX TRUSTEE/ACCT 5556	P O BOX 99084	FORT WORTH TX 76199-0084
HARVEY L JOHNSON R D GOODRICH ASSET PARTNERS LP	P O BOX 2605	FORT WORTH TX 76113-2605
HUGH CORRIGAN III	P O BOX 50460	MIDLAND TX 79710-0460
HUGH DANIEL S CORRIGAN TRUST U/W/O C E CORRIGAN J PAT CORRIGAN TRUSTEE	P O BOX 690068	VERO BEACH FL 32969-0068
J H MORRIS AGENT	P O BOX 1588	TULSA OK 74101-1588
JAMES B THOMAS	3304 CENTENARY AVE	DALLAS TX 75225-4833
JAMES C BROWN	P O BOX 10521	MIDLAND TX 79702-7621
JAMES M SNOWDEN TRUST	12 FORDYCE LANE	ST LOUIS MO 63124-1354
JAMES PATRICK CORRIGAN JR TR	P O BOX 690068	VERO BEACH FL 32969-0068
JEAN CHRISTINE THOMPSON TRUST 2 JAMES CLEO THOMPSON JR TRUSTEE	325 NORTH ST PAUL STE 5300	DALLAS TX 75201
JENNIFER ANN CLAY CATHER	4300 VERSAILLES AVE	DALLAS TX 75205-3009
JOAN CLAY	26242 VIA MISTRAL	SAN JUAN CAPISTRANO CA 92675-4452
JOANNE GRIES	P O BOX 516	BUENA VISTA CO 81211-0516
JOHN P CUSACK III	19945 KIRK AVENUE	EAGLE RIVER AR 99577
JOHN PATRICK CUSACK JR	2808 WOODWIND DRIVE	ARLINGTON TX 76013-3132
JOHN W CLAY III	1924 MEMPHIS	BEDFORD TX 76022-0312
KAREN CUSACK PASQUIER	P O BOX 46138	RIO RANCHO NM 87174
KDCB GARRETT HOLDING LLC	P O BOX 17001	SAN ANTONIO TX 78217
L SANDERS THOMPSON III	4420 GLENWICK	DALLAS TX 75205
LA SOMBRA MINERAL LLC	P O BOX 17001	SAN ANTONIO TX 78217
LANDRETH COMPANY STOCKHOLDERS	3207 W 4TH STREET	FORT WORTH TX 76107-2114
LAVON JOHNSON	10433 LAKE PARK DR	HURST TX 76053
LAWSON PETROLEUM COMPANY	401 SOUTH BOSTON #2100	TULSA OK 74103-4103
LEGACY RESERVES	P O BOX 10848	MIDLAND TX 79702
LINDA THOMPSON GORDON	325 NORTH ST PAUL STE 4300	DALLAS TX 75201
LOMA INC	4201 E 64TH STREET	TULSA OK 74136
LOUIS H KUNTZ	2118 HILLTOP COURT	FULLERTON CA 92831-1311
LOYD WHITLEY	P O BOX 168	MIDLAND TX 79702
LYNN T CONNOLLY	605 PRAIRIE WAY	WICHITA FALLS TX 76310
MALLOY OIL & GAS PROPERTIES LLP	P O BOX 18414	OKLAHOMA CITY OK 73154
MARGARET COUCH TRUST JAMES C BROWN & WILLIAM C COUCH	P O BOX 10621	MIDLAND TX 7;9702-7621
MARTHA THOMPSON	45116 UNIVERSITY UNIT A	DALLAS TX 75205
MARY ALICE LAFLIN MEHAFFEY	6138 S IOLA WAY	ENGLEWOOD CO 80111-5706
MARY ANN MYERS AYRES	P O BOX 25231	DALLAS TX 75226
McPETERS FAMILY REVOCABLE TRUST	502 W GOLD	HOBBS NM 88240-1805

Name	Street Address/PO Box	City/State/Zip Code
MICHAEL F CUSACK II	6003 VALKEITH	HOUSTON TX 77096-3832
MICHAEL HARRISON MOORE 2006 TR MICHAEL HARRISON MOORE TRUSTEE	P O BOX 51570	MIDLAND TX 79710
MICHAEL HARRISON MOORE TRUSTEE	P O BOX 51570	MIDLAND TX 79710
OBO INC	P O BOX 22577	HIALEAH FL 33002
PAT CORRIGAN TRUST	P O BOX 690068	VERO BEACH FL 32969-0068
PATRICIA LAND CO LTD	P O BOX 10621	MIDLAND TX 79704
PATRICIA P SCHIEFFER TEST TRUST	P O BOX 2546	FORT WORTH TX 76113-2546
PATRICK CUSACK	1837 SOUTH DUNSMUIR AVE	LOS ANGELES CA 90019
PAULINE DUNBAR EREKSON	P O BOX 213	ROCKSPRINGS TX 7880-0213
PRODUCERS AND REFINERS CORP	P O BOX 1765	ENID OK 73702
RDG MINERAL LTD F/B/O JANE GARRETT HEINRICHS	P O BOX 17001	SAN ANTONIO TX 78217
REEF OIL & GAS COMPANY	1901 NORTH CENTRAL EXPRESSWAY	RICHARDSON TX 75080-3609
RICHARD LYONS MOORE 2006 TRUST	P O BOX 94077	SOUTHLAKE TX 76092
RKC INC ATTN: ANTHONY KOCHEVAR	7500 ARAPAHOE RD #380	CENTENNIAL CO 80112-6116
ROBERT F LONG TESTAMENTARY TR FBO TERRENCE R BARKER #1143959008	P O BOX 25128	DALLAS TX 75225
ROBERT LEE MYERS	3812 MARQUETTE ST	DALLAS TX 75225
ROGER D JOHNSON	P O BOX 3516	HOBBS NM 88241-3516
ROUND HILL ROYALTY LP ATTN: SETH WOODBERRY	P O BOX 25127	DALLAS TX 75225
RUFUS GORDON PETE CLAY TRUST	P O BOX 10621	MIDLAND TX 79702-7621
SAGECREST OIL & GAS LLC	P O BOX 630	FORT WORTH TX 76101
SANDRA SNOWDEN TRUMP	42 NECK RD	TIVERTON RI 02878-4010
SCOTT JOHNSONv JACK CHANDLER MYERS	4709 WEST LOVERS LANE #200	DALLAS TX 75029
SEA PROPERTIES INC	P O BOX 1486	ARDMORE OK 73402-1486
STEPHANIE DOSHER	209 NE AVE D	SEMINOLE TX 79360
STEVE CUSACK	2910 ANNA J DRIVE	ROSWELL NM 88201
STUART A UMPLEBY TRUST	4141 N HENDERSON RD #1207	ARLINGTON VA 22203-2475
SUSAN G UMPLEBY PEASNER	5110 S YALE #400	TULSA OK 74135
SUSAN MARIE MAIER	13129 BLUFFTON AVENUE	BATON ROUGH LA 70817
TIMOTHY J CUSACK	P O BOX 250	ROSWELL NM 88202-0250
TY JOHNSON	3304 TEXAS TRAIL CT	HURST TX 76054
VEJA INC	P O BOX 18442	OKLAHOMA CITY OK 73154-0442
VIRGINIA HINMAN	2334 CHRISWOOD RD	TOLEDO OH 43617-1250
WESTBOURNE LLC	P O BOX 1401	LUBBOCK TX 79408

7006 2760 0001 6376 1413

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins[illegible] Provided)

For delivery information visit ou

OFFICI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
OBO INC
Street, or PO P O BOX 22577
City, St HIALEAH FL 33002

PS Form 3800, August 2006 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

OBO INC
P O BOX 22577
HIALEAH FL 33002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Millie Colon ☐ Agent ☐ Addressee

B. Received by (Printed Name) Millie Colon C. Date of Delivery 4/12/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 2760 0001 6376 1413

PS Form 3811, February 2004 Domestic Return Receipt

BEFORE THE OIL CONSERVATION COMMISSION
Santa Fe, New Mexico
Exhibit No. 16
Submitted by: **OXY**
Hearing Date: May 9, 2013

7006 0100 0005 5769 9308

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In[illegible] Provided)

For delivery information visit

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent
C M E OIL & GAS COMPANY
Street, or P P O BOX 10621
City, MIDLAND TX 79702-7621

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

C M E OIL & GAS COMPANY
P O BOX 10621
MIDLAND TX 79702-7621

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X James C. Brown ☐ Agent ☐ Addressee

B. Received by (Printed Name) James C. Brown C. Date of Delivery 4/18/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic 7006 0100 0005 5769 9308

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

7006 0100 0005 5769 9261

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 12 2013

Sent To: Cara V Umpleby Lockett Royalty Trust
Street, Apt. No., or PO Box No.: Farmers National Co Agent
City, State, ZIP+4: 5110 S Yale #400
Tulsa, OK 74135

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Cara V Umpleby Lockett Royalty Trust
Farmers National Co Agent
5110 S Yale #400
Tulsa, OK 74135

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Shannon Ford — C. Date of Delivery: 4-15-13

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

SHERIDAN OK
APR 15 2013
USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 9261

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

7006 0100 0005 5769 8660

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information vis: MHF/OXY
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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 13 2013

Sent To: PATRICIA LAND CO LTD
Street, Apt. No., or PO Box No.: P O BOX 10621
City, State, ZIP+4: MIDLAND TX 79702

Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PATRICIA LAND CO LTD
P O BOX 10621
MIDLAND TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): James C. Brown — C. Date of Delivery: 4/18/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8660

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

7006 0100 0005 5769 8677

U.S. Postal Service™
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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 1 2013

Sent T
Street, or PO
City, S

JOHN P CUSACK III
19945 KIRK AVENUE
EAGLE RIVER AR 99577

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JOHN P CUSACK III
19945 KIRK AVENUE
EAGLE RIVER AR 99577

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

EAGLE RIVER AK 99577 APR 17 2013 USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service la) 7006 0100 0005 5769 8677

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

7006 0100 0005 5769 8684

U.S. Postal Service™
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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent T
Street or PO
City, S

CHRISTEN SCHUTTE SANDERS
1408 CARSON
FORT WORTH TX 76117-6107

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CHRISTEN SCHUTTE SANDERS
1408 CARSON
FORT WORTH TX 76117-6107

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X K. Sanders ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8684

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

7006 0100 0005 5769 8691

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To: Michael Harrison Moore 2006 Trust
Street or PO: Michael Harrison Moore Trustee
City: P O BOX 51570
Midland, TX 79710

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Michael Harrison Moore 2006 Trust
Michael Harrison Moore Trustee
P O BOX 51570
Midland, TX 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Terri Turner ☐ Agent ☐ Addressee

B. Received by (Printed Name): Terri Turner
C. Date of Delivery: 4/16/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 8691

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

7006 0100 0005 5769 8707

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For delivery information visit: **MHF/OXY**
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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To: CYNTHIA ANN AVARA TAVERNA
Street or PO: 3808 HIGHWEED
City: EL PASO TX 79928

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 8714

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. No., or PO Box
City, State, ZIP+4

Susan G. Umpleby Peasner Royalty Trust
Farmers National Co Agent
5110 S YALE #400
TULSA OK 74135

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Susan G. Umpleby Peasner Royalty Trust
Farmers National Co Agent
5110 S YALE #400
TULSA OK 74135

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Shannon Fondren C. Date of Delivery 4-15-13

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

APR 15 2013

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8714

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

7006 0100 0005 5769 8721

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. No., or PO Box
City, State, ZIP+4

JAMES B THOMAS
3304 CENTENARY AVE
DALLAS TX 75225-4833

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JAMES B THOMAS
3304 CENTENARY AVE
DALLAS TX 75225-4833

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4/16/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8721

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

7006 0100 0005 5769 8363

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

For delivery information vi[illegible]

MHF/OXY

OFFIC[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, A[illegible] or PO B[illegible]
City, Sta[illegible]
CONNIE HINMAN
1833 DEVONDALE CIRCLE
CHARLESTON WV 25314-2205

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 8370

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

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Ap[illegible] or PO Bo[illegible]
City, State
VIRGINIA HINMAN
2334 CHRISWOOD RD
TOLEDO OH 43617-1250

Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

VIRGINIA HINMAN
2334 CHRISWOOD RD
TOLEDO OH 43617-1250

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4-17-13

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

CORNERS TOLEDO OH APR 17 2013 RETAIL USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8370

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

7006 0100 0005 5769 8387

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

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
STUART A UMPLEBY TRUST
Street, Ap or PO Bo 4141 N HENDERSON RD #1207
City, Stat ARLINGTON VA 22203-2475

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

STUART A UMPLEBY TRUST
4141 N HENDERSON RD #1207
ARLINGTON VA 22203-2475

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from servic* 7006 0100 0005 5769 8387

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

7006 0100 0005 5769 8394

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent T CEC TRUST FBO HUGH CORRIGAN IV
Street, or PO HUGH CORRIGAN IV TRUSTEE
City, S 3809 SHENADOAH ST
DALLAS TX 75205

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CEC TRUST FBO HUGH CORRIGAN IV
HUGH CORRIGAN IV TRUSTEE
3809 SHENADOAH ST
DALLAS TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-15-

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service* 7006 0100 0005 5769 8394

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

7006 0100 0005 5769 8400

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

For delivery information visit c

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent CEC TRUST FBO PARTICK EDWARD
Stree CORRIGAN PATRICK EDWARD
or PO CORRIGAN TRUSTEE
City, 8750 N CENTRAL EXPY #510
DALLAS TX 75231

PS Fo See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CEC TRUST FBO PARTICK EDWARD
CORRIGAN PATRICK EDWARD
CORRIGAN TRUSTEE
8750 N CENTRAL EXPY #510
DALLAS TX 75231

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Judy Miller ☐ Agent ☐ Addressee

B. Received by (Printed Name) Judy Miller
C. Date of Delivery 4-24-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi. 7006 0100 0005 5769 8400

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

7006 0100 0005 5769 8417

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

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent ELEANOR CHRISTIE CORRIGAN TR
U/W/O CE CORRIGAN J PAT
Stree CORRIGAN TRUSTEE
or PO
City, P O BOX 63869
COLORADO SPRINGS CO 80962

PS Fo ructions

7006 0100 0005 5769 8424

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

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

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE NM 87504
APR 12 2013
Postmark Here

Sent To: JAMES PATRICK CORRIGAN JR TR
U/W/O CE CORRIGAN J PAT
Street, Apt. or PO Box: CORRIGAN TRUSTEE
City, State: P O BOX 690068
VERO BEACH FL 32969-0068

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JAMES PATRICK CORRIGAN JR TR
U/W/O CE CORRIGAN J PAT
CORRIGAN TRUSTEE
P O BOX 690068
VERO BEACH FL 32969-0068

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Timothy Youngblood ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8424

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

7006 0100 0005 5769 8431

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

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

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE NM 87504
Postmark Here
APR 12 2013

Sent To: HUGH DANIEL S CORRIGAN TRUST
U/W/O C E CORRIGAN J PAT
Street, Apt. or PO Box: CORRIGAN TRUSTEE
City, State: P O BOX 690068
VERO BEACH FL 32969-0068

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF THE RETURN

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

HUGH DANIEL S CORRIGAN TRUST
U/W/O C E CORRIGAN J PAT
CORRIGAN TRUSTEE
P O BOX 690068
VERO BEACH FL 32969-0068

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Timothy Youngblood ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8431

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

7006 0100 0005 5769 8448

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

For delivery information vi OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
APR 12 2013

Sent To
Street, or PO PAULINE DUNBAR EREKSON
P O BOX 213
City, S ROCKSPRINGS TX 7880-0213

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PAULINE DUNBAR EREKSON
P O BOX 213
ROCKSPRINGS TX 7880-0213

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pauline Dunbar Erekson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Pauline D Erekson
C. Date of Delivery 4-16-13

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

ROCKSPRINGS TX 78880
APR 16 2013

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8448

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

7006 0100 0005 5769 8455

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

For delivery information OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
APR 12 2013

Sent To
Street, Apt or PO Box EDWARD ALLAN DUNBAR
P O BOX 885
City, State ROCKSPRINGS TX 7880-0885

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EDWARD ALLAN DUNBAR
P O BOX 885
ROCKSPRINGS TX 7880-0885

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pauline Erekson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Pauline D Erekson
C. Date of Delivery 4-16-13

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

ROCKSPRINGS TX 78880
APR 16 2013
USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se 7006 0100 0005 5769 8455

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

7006 0100 0005 5769 8462

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

For delivery information vis

MHF/OXY

OFFIC

Postage	$ .52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 1 2 2013
USPS SANTA FE, NM 87594
DE VARGAS MALL OFFICE

Sent T
Street, or PO
City, S

MARY ALICE LAFLIN MEHAFFEY
6138 S IOLA WAY
ENGLEWOOD CO 80111-5706

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MARY ALICE LAFLIN MEHAFFEY
6138 S IOLA WAY
ENGLEWOOD CO 80111-5706

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4/15

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service)* 7006 0100 0005 5769 8462

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

7006 0100 0005 5769 8479

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit

MHF/OXY

OFFIC

Postage	$ .52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87594
APR 1 2 2013
Postmark Here
DE VARGAS MALL OFFICE

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

ROUND HILL ROYALTY LP
ATTN: SETH WOODBERRY
P O BOX 25127
DALLAS TX 75225

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ROUND HILL ROYALTY LP
ATTN: SETH WOODBERRY
P O BOX 25127
DALLAS TX 75225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4/17/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service)* 7006 0100 0005 5769 8479

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

7006 0100 0005 5769 8486

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

For delivery information visit

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE NM 87594 APR 17 2013 Postmark Here DEVELOPED POST OFFICE

Sent To
Street, or PO E KDCB GARRETT HOLDING LLC
P O BOX 17001
City, St SAN ANTONIO TX 78217

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

KDCB GARRETT HOLDING LLC
P O BOX 17001
SAN ANTONIO TX 78217

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic 7006 0100 0005 5769 8486

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

7006 0100 0005 5769 8493

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

For delivery information visit o

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MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

U.S. POSTAGE SANTA FE NM 87594 APR 17 2013 Postmark Here

Sent To ROBERT F LONG TESTAMENTARY TR FBO
TERRENCE R BARKER #1143959008 ROUND
Street, or PO I HILL ROYALTY LP
ATTN: SETH WOODBERRY
City, St P O BOX 25128
DALLAS TX 75225

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ROBERT F LONG TESTAMENTARY TR FBO
TERRENCE R BARKER #1143959008 ROUND
HILL ROYALTY LP
ATTN: SETH WOODBERRY
P O BOX 25128
DALLAS TX 75225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4/17/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8493

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

7006 0100 0005 5769 8509

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

For delivery information visit our website at www.usps.com
OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
USPS SANTA FE NM 87594

Sent To: GEORGE G SNOWDEN III TRUST
Street, Apt. No., or PO Box: ANN H SNOWDEN TRUSTEE
City, State, ZIP+4: 93 BEACH ST
WESTERLY RI 02891

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GEORGE G SNOWDEN III TRUST
ANN H SNOWDEN TRUSTEE
93 BEACH ST
WESTERLY RI 02891

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Ann Snowden
C. Date of Delivery: 4/16/13

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

APR 18 2013
USPS

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8509

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

7006 0100 0005 5769 8516

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

For delivery information visit our website at www.usps.com
OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
USPS SANTA FE NM 87594

Sent To: RKC INC
Street, Apt. No., or PO Box: ATTN: ANTHONY KOCHEVAR
City, State, ZIP+4: 7500 ARAPAHOE RD #380
CENTENNIAL CO 80112-6116

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

RKC INC
ATTN: ANTHONY KOCHEVAR
7500 ARAPAHOE RD #380
CENTENNIAL CO 80112-6116

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name): V. Peebles
C. Date of Delivery: 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8516

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

7006 0100 0005 5769 8523

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 12 2013

Sent To
Street, or PO
City, St

TIMOTHY J CUSACK
P O BOX 250
ROSWELL NM 88202-0250

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

TIMOTHY J CUSACK
P O BOX 250
ROSWELL NM 88202-0250

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5769 8523

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

7006 0100 0005 5769 8530

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

For delivery information visit ot

MHF/OXY

OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO
City, St

STEVE CUSACK
2910 ANNA J DRIVE
ROSWELL NM 88201

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

STEVE CUSACK
2910 ANNA J DRIVE
ROSWELL NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from serv 7006 0100 0005 5769 8530

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

7006 0100 0005 5769 8547

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

For delivery information visit: **MHF/OXY**
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark: APR 12 2013

Sent
Street or PO: PRODUCERS AND REFINERS CORP
City: P O BOX 1765
ENID OK 73702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

1. Article Addressed to:

PRODUCERS AND REFINERS CORP
P O BOX 1765
ENID OK 73702

A. Signature: X [signature] ☐ Agent ☐ Addressee
B. Received by (Printed Name): Richard J Bach
C. Date of Delivery: 4-15-13
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 8547

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

7006 0100 0005 5769 8554

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

For delivery information visit: **MHF/OXY**
OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 12 2013

Sent
Street or PO: CATHERINE CUSACK
City: 2223 PAJARITO SW
ALBUQUERQUE NM 87105

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

1. Article Addressed to:

CATHERINE CUSACK
2223 PAJARITO SW
ALBUQUERQUE NM 87105

A. Signature: X [signature] ☐ Agent ☐ Addressee
B. Received by (Printed Name): CATHIE CUSACK
C. Date of Delivery: 4/17/13
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

USPS FIVE POINTS ALBUQUERQUE NM 87105-9998 APR 17 2013

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 8554

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

7006 0100 0005 5769 8653

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

For delivery information visit ou
OFFICI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, A or PO Bo
City, Sta
KAREN CUSACK PASQUIER
P O BOX 46138
RIO RANCHO NM 87174

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

KAREN CUSACK PASQUIER
P O BOX 46138
RIO RANCHO NM 87174

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jeff Pasquier ☐ Agent ☐ Addressee

B. Received by (Printed Name) Jeff Pasquier
C. Date of Delivery 4-16-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8653

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

7006 0100 0005 5769 8646

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

For delivery information visit ou
OFFICI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013
Postmark Here

Sent To
Street, Apt or PO Box
City, State,
ADELAIDE F COHU TRUST
KEVIN J McGRAW
C/O MINTZ & FRAADE PC
488 MADISON AVE
NEW YORK NY 10022-5001

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ADELAIDE F COHU TRUST
KEVIN J McGRAW
C/O MINTZ & FRAADE PC
488 MADISON AVE
NEW YORK NY 10022-5001

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Diana Ahmed ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8646

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

7006 0100 0005 5769 8639

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In[illegible])

For delivery information visit [illegible]
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013
Postmark Here

Sent T
Street, or PO
City, S

PATRICIA P SCHIEFFER TEST TRUST
PATRICIA P SCHIEFFER SUCCESSOR
TRUSTEE
BANK OF AMERICA NA
P O BOX 2546
FORT WORTH TX 76113-2546

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PATRICIA P SCHIEFFER TEST TRUST
PATRICIA P SCHIEFFER SUCCESSOR
TRUSTEE
BANK OF AMERICA NA
P O BOX 2546
FORT WORTH TX 76113-2546

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Collins — C. Date of Delivery APR 16 2013

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8639

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

7006 0100 0005 5769 8622

U.S. Postal Service™
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For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013
Postmark Here

Sent To
Street, or PO B
City, Sta

LINDA THOMPSON GORDON
325 NORTH ST PAUL STE 4300
DALLAS TX 75201

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LINDA THOMPSON GORDON
325 NORTH ST PAUL STE 4300
DALLAS TX 75201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8622

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

7006 0100 0005 5769 8615

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OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. or PO Box: JEAN CHRISTINE THOMPSON TRUST 2
JAMES CLEO THOMPSON JR TRUSTEE
City, State: 325 NORTH ST PAUL STE 5300
DALLAS TX 75201

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JEAN CHRISTINE THOMPSON TRUST 2
JAMES CLEO THOMPSON JR TRUSTEE
325 NORTH ST PAUL STE 5300
DALLAS TX 75201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8615

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

7006 0100 0005 5769 8608

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark Here

Sent To
Street, Apt. or PO Box: L SANDERS THOMPSON III
4420 GLENWICK
City, State: DALLAS TX 75205

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

L SANDERS THOMPSON III
4420 GLENWICK
DALLAS TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8608

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

7006 0100 0005 5769 8592

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In[illegible])

For delivery information visit o[illegible]
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
ANN H TAYLOR
Street, Apt. No., or PO Box P O BOX 3487
City, State, ZIP+4 MIDLAND TX 79702-3487

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ANN H TAYLOR
P O BOX 3487
MIDLAND TX 79702-3487

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

MIDLAND TX VISITATION CTR APR 12 2013

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8592

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

7006 0100 0005 5769 8585

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

For delivery information visi[illegible]
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
JAMES M SNOWDEN TRUST
Street, Apt. No., or PO Box JAMES M SNOWDEN AND
MARIE KIELY SNOWDEN TRUSTEES
City, State, ZIP+4 12 FORDYCE LANE
ST LOUIS MO 63124-1354

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JAMES M SNOWDEN TRUST
JAMES M SNOWDEN AND
MARIE KIELY SNOWDEN TRUSTEES
12 FORDYCE LANE
ST LOUIS MO 63124-1354

CREVE COEUR ST. LOUIS, MO 63141 APR 15 2013 USPS

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s[illegible]) 7006 0100 0005 5769 8585

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

7006 0100 0005 5769 8578

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

For delivery information visit
OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
VEJA INC
Street, or PO Box
P O BOX 18442
City, State
OKLAHOMA CITY OK 73154-0442

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

VEJA INC
P O BOX 18442
OKLAHOMA CITY OK 73154-0442

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J Davidson ☐ Agent ☐ Addressee

B. Received by (Printed Name) J Davidson C. Date of Delivery 4-12-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8578

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

7006 0100 0005 5769 8561

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

For delivery information visit
OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
CRAIG CUSACK
Street, or PO Box
P O BOX 250
City, State
ROSWELL NM 88202-0250

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CRAIG CUSACK
P O BOX 250
ROSWELL NM 88202-0250

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) ET Gallegos C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8561

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

7006 0100 0005 5769 8967

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

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark Here
U.S. VARGAS POST OFFICE

Sent To
Street or PO
City, St
MICHAEL F CUSACK II
6003 VALKEITH
HOUSTON TX 77096-3832

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 8974

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

For delivery information vis: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark Here
U.S. VARGAS POST OFFICE

Sent To
Street, or PO B
City, St
PAT CORRIGAN TRUST
PAT CORRIGAN TRUSTEE
P O BOX 690068
VERO BEACH FL 32969-0068

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PAT CORRIGAN TRUST
PAT CORRIGAN TRUSTEE
P O BOX 690068
VERO BEACH FL 32969-0068

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8974

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

7006 0100 0005 5769 8981

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

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To: MARGARET COUCH TRUST
Street or PO: JAMES C BROWN & WILLIAM C COUCH CO-TRUSTEES
City, St: P O BOX 10621
MIDLAND TX 7;9702-7621

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MARGARET COUCH TRUST
JAMES C BROWN & WILLIAM C COUCH
CO-TRUSTEES
P O BOX 10621
MIDLAND TX 7;9702-7621

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X James C. Brown ☐ Agent ☐ Addressee

B. Received by (Printed Name): James C. Brown C. Date of Delivery: 4/18/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8981

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

7006 0100 0005 5769 8998

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

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To:
Street or PO: EVELYN CLAY OHARA TRUST
City, St: 5022 BUFFALO COURT SOUTH
FORT WORTH TX 76119-7857

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 9001

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

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

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
RUFUS GORDON PETE CLAY TRUST
Street, Apt. No., or PO Box: RUFUS P CLAY & JAMES C BROWN
CO TRUSTEES
City, State, ZIP+4: P O BOX 10621
MIDLAND TX 79702-7621

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

RUFUS GORDON PETE CLAY TRUST
RUFUS P CLAY & JAMES C BROWN
CO TRUSTEES
P O BOX 10621
MIDLAND TX 79702-7621

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X James C. Brown ☐ Agent ☐ Addressee

B. Received by (Printed Name): James C. Brown
C. Date of Delivery: 4/18/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 9001

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

7006 0100 0005 5769 9018

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

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

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
CHRISTOPHER R CUSACK
Street, Apt. No., or PO Box: 2114 HOLMBY
City, State, ZIP+4: LOS ANGELES CA 90025

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 9025

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

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, A PATRICK CUSACK
or PO Bo 1837 SOUTH DUNSMUIR AVE
City, Sta LOS ANGELES CA 90019

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PATRICK CUSACK
1837 SOUTH DUNSMUIR AVE
LOS ANGELES CA 90019

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lisa Cusack ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5769 9025

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

7006 0100 0005 5769 9032

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

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent T
Street, LYNN T CONNOLLY
or PO 605 PRAIRIE WAY
City, S WICHITA FALLS TX 76310

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LYNN T CONNOLLY
605 PRAIRIE WAY
WICHITA FALLS TX 76310

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lynne Connolly ☐ Agent ☐ Addre

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service 7006 0100 0005 5769 9032

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

7006 0100 0005 5769 9049

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

For delivery information visit
MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent
Street or PO
City,
MARTHA THOMPSON
45116 UNIVERSITY UNIT A
DALLAS TX 75205

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MARTHA THOMPSON
45116 UNIVERSITY UNIT A
DALLAS TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9049

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

7006 0100 0005 5769 9056

U.S. Postal Service™
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OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent
Street or PO
City,
GEORGE L AVARA
3108 TIERRA ENCINO DR
EL PASO TX 79338-4521

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GEORGE L AVARA
3108 TIERRA ENCINO DR
EL PASO TX 79338-4521

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☒ Addressee

B. Received by (Printed Name) George Avara C. Date of Delivery 4-17-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9056

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

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OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 1 2 2013

Sent To
Street, or PO B
City, St

JAMES C BROWN
P O BOX 10521
MIDLAND TX 79702-7621

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 8158

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JAMES C BROWN
P O BOX 10521
MIDLAND TX 79702-7621

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) 4-29-13 | C. Date of Delivery 4-29-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service lab) 7006 0100 0005 5769 8158

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

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

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 1 2 2013

Sent To
Street, or PO B
City, St

DINAH GEMELLE
P O BOX 486
VAUGHN WA 98394-0486

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 8141

so 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:

DINAH GEMELLE
P O BOX 486
VAUGHN WA 98394-0486

COMPLETE THIS SECTION ON DELIVERY

Signature
Dinah Gemelle ☐ Agent ☐ Addressee

B. Received by (Printed Name) Dinah Gemelle | C. Date of Delivery 4-25-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8141

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

7006 0100 0005 5769 8134

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

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OFFICI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To GEORGE H ETZ SR TRUST
Street, Apt. or PO Box GEORGE ETZ JR TRUSTEE
1105 XANTHISMA
City, State, McALLEN TX 78504-3519

PS Form 3800, June 2002 See Reverse for Instructions

TOP OF ENVELOPE TO THE RIGHT
ADDRESS FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GEORGE H ETZ SR TRUST
GEORGE ETZ JR TRUSTEE
1105 XANTHISMA
McALLEN TX 78504-3519

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☑ Addressee

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

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

MCALLEN TEXAS 785 APR 24 2013

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 8134

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

7006 0100 0005 5769 8127

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OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To JOHN PATRICK CUSACK JR
Street, Apt. or PO Box C/O F C NEWBURN CPA
2808 WOODWIND DRIVE
City, State, ARLINGTON TX 76013-3132

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JOHN PATRICK CUSACK JR
C/O F C NEWBURN CPA
2808 WOODWIND DRIVE
ARLINGTON TX 76013-3132

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 8127

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

7006 0100 0005 5769 8110

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
CUSACK FAMILY REV OCABLE
Street, Apt. No., or PO Box No. TRUST
P O BOX 25
City, State, ZIP+4 WILLOW CITY TX 78675

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CUSACK FAMILY REV OCABLE
TRUST
P O BOX 25
WILLOW CITY TX 78675

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4-16-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8110

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

7006 0100 0005 5769 8103

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

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

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
20 ACRES LLC
Street, Apt. No., or PO Box No. 801 GARCIA STREET
City, State, ZIP+4 SANTA FE NM 87505

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

20 ACRES LLC
801 GARCIA STREET
SANTA FE NM 87505

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4/16/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8103

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

7006 0100 0005 5769 8097

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

For delivery information visit ou
OFFICI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 1 2 2013

Sent To
Street, Ap or PO Bo
City, Stat
COLLEEN M WALLACE NEWMAN
24 CLUB CIRCLE
SHERWOOD AR 72120

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

COLLEEN M WALLACE NEWMAN
24 CLUB CIRCLE
SHERWOOD AR 72120

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Colleen M Newman ☐ Agent ☐ Addressee

B. Received by (Printed Name) Colleen M. Newman C. Date of Delivery 4-12-2013

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8097

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

7006 0100 0005 5769 8080

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

For delivery information visit ou
OFFICI

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 1 2 2013

Sent To
Street, Ap or PO Bo
City, Stat
LOYD WHITLEY
P O BOX 168
MIDLAND TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LOYD WHITLEY
P O BOX 168
MIDLAND TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Marilyn Schwenke ☐ Agent ☐ Addressee

B. Received by (Printed Name) MARILYN SCHWENKE C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la* 7006 0100 0005 5769 8080

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

7006 0100 0005 5769 8073

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. or PO Box: J H MORRIS AGENT
P O BOX 1588
City, State: TULSA OK 74101-1588

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

J H MORRIS AGENT
P O BOX 1588
TULSA OK 74101-1588

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) APR 15 C. Date of Delivery
[signature] 4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8073

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

7006 0100 0005 5769 8066

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, A or PO Bo: LEGACY RESERVES
P O BOX 10848
City, Sta: MIDLAND TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LEGACY RESERVES
P O BOX 10848
MIDLAND TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Evan Ceballos
C. Date of Delivery 4-12-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8066

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

7006 0100 0005 5769 8868

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

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark Here

Sent To
Street, or PO B
City, St
CBR OIL PROPERTIES LLC
P O BOX 1518
ROSWELL NM 88202-1518

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION ... TION ON DELIVERY

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

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

1. Article Addressed to:

CBR OIL PROPERTIES LLC
P O BOX 1518
ROSWELL NM 88202-1518

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

APR 15 2013

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service)* 7006 0100 0005 5769 8868

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

7006 0100 0005 5769 8875

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

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark Here

Sent T
Street or PO
City, S
BUTTRAM ENERGIES INC
2601 NW EXPRESSWAY
501 OIL CENTER WEST
OKLAHOMA CITY OK 73112-7269

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COM... ON DELIVERY

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

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

1. Article Addressed to:

BUTTRAM ENERGIES INC
2601 NW EXPRESSWAY
501 OIL CENTER WEST
OKLAHOMA CITY OK 73112-7269

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[signature] 4/15/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from servic)* 7006 0100 0005 5769 8875

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

7006 0100 0005 5769 8882

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To GAVIN R GARRETT
JP MORGAN CHASE BANK NA
Street, Apt. No., or PO Box No. ATTN: PHILLIP METTHAM
P O BOX 2605
City, State, ZIP+4 FORT WORTH TX 76113-2605

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GAVIN R GARRETT
JP MORGAN CHASE BANK NA
ATTN: PHILLIP METTHAM
P O BOX 2605
FORT WORTH TX 76113-2605

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Robin Boley ☐ Agent ☐ Addressee

B. Received by (Printed Name) Robin Boley
C. Date of Delivery 4/15

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8882

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

7006 0100 0005 5769 8899

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(Domestic Mail Only; No Insurance Coverage Provided)

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

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To LAWSON PETROLEUM COMPANY
Street, Apt. No., or PO Box No. 401 SOUTH BOSTON #2100
City, State, ZIP+4 TULSA OK 74103-4103

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LAWSON PETROLEUM COMPANY
401 SOUTH BOSTON #2100
TULSA OK 74103-4103

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kim Parks ☒ Agent ☐ Addressee

B. Received by (Printed Name) Kim Parks
C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8899

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

7006 0100 0005 5769 8905

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

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. or PO Box: LOMA INC
4201 E 64TH STREET
City, State: TULSA OK 74136

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LOMA INC
4201 E 64TH STREET
TULSA OK 74136

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): NED HARNEY C. Date of Delivery: 4-15-13

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

N

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5769 8905

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

7006 0100 0005 5769 8912

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

For delivery information: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. or PO Box: MARY ANN MYERS AYRES
P O BOX 25231
City, State: DALLAS TX 75226

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

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

1. Article Addressed to:

MARY ANN MYERS AYRES
P O BOX 25231
DALLAS TX 75226

A. Signature: X M. A. Ayres ☐ Agent ☐ Addressee

B. Received by (Printed Name): Mary Ann Ayres C. Date of Delivery: 4-17-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5769 8912

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

7006 0100 0005 5769 8929

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

For delivery information visit c

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street or PC McPETERS FAMILY REVOCABLE TRUST
City, 502 W GOLD
HOBBS NM 88240-1805

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

McPETERS FAMILY REVOCABLE
TRUST
502 W GOLD
HOBBS NM 88240-1805

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 8929

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

7006 0100 0005 5769 8936

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

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, SEA PROPERTIES INC
or PO B P O BOX 1486
City, Sta ARDMORE OK 73402-1486

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SE

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

1. Article Addressed to:

SEA PROPERTIES INC
P O BOX 1486
ARDMORE OK 73402-1486

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi) 7006 0100 0005 5769 8936

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

7006 0100 0005 5769 8868

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

For delivery information vi: OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, / or PO E: JOANNE GRIES
P O BOX 516
City, St: BUENA VISTA CO 81211-0516

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

1. Article Addressed to:

JOANNE GRIES
P O BOX 516
BUENA VISTA CO 81211-0516

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from servic) 7006 0100 0005 5769 8943

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

7006 0100 0005 5769 8950

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

For delivery information visit: OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Ap or PO Bo: SANDRA SNOWDEN TRUMP
42 NECK RD
City, Stat: TIVERTON RI 02878-4010

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

1. Article Addressed to:

SANDRA SNOWDEN TRUMP
42 NECK RD
TIVERTON RI 02878-4010

A. Signature
X Sandra S Trump ☐ 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

APR 25 2013

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from s) 7006 0100 0005 5769 8950

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

7006 0100 0005 5769 8776

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

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO B: FIRST ROSWELL COMPANY
P O BOX 1797
City, St: ROSWELL NM 88202-1797

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

FIRST ROSWELL COMPANY
P O BOX 1797
ROSWELL NM 88202-1797

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Ray Srader ☐ Agent ☐ Addressee

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

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

ROSWELL NM APR 16 2013 88201

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8776

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

7006 0100 0005 5769 8783

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO I: HUGH CORRIGAN III
P O BOX 50460
City, S: MIDLAND TX 79710-0460

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 8790

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

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To: LANDRETH COMPANY
Street, Apt. No., or PO Box: STOCKHOLDERS
3207 W 4TH STREET
City, State, ZIP+4: FORT WORTH TX 76107-2114

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LANDRETH COMPANY
STOCKHOLDERS
3207 W 4TH STREET
FORT WORTH TX 76107-2114

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8790

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

7006 0100 0005 5769 8806

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

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To: RICHARD LYONS MOORE 2006 TRUST
Street, Apt. No., or PO Box: RICHARD LYONS MOORE TRUSTEE
P O BOX 94077
City, State, ZIP+4: SOUTHLAKE TX 76092

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

RICHARD LYONS MOORE 2006
TRUST
RICHARD LYONS MOORE TRUSTEE
P O BOX 94077
SOUTHLAKE TX 76092

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) LIC Parker | C. Date of Delivery 4-18-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8806

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

7006 0100 0005 5769 8813

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

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

OFFIC MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

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

BILLIE S DEVOSS
15311 E LA SALOS DRIVE
WHITTIER CA 90603-2243

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

BILLIE S DEVOSS
15311 E LA SALOS DRIVE
WHITTIER CA 90603-2243

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7006 0100 0005 5769 8813

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

7006 0100 0005 5769 8820

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

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

OFFIC MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

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

BARBARA J DEVOSS JUNKER
P O BOX 5346
LUBOCK TX 79453-3546

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

BARBARA J DEVOSS JUNKER
P O BOX 5346
LUBOCK TX 79453-3546

DOWNTOWN STATION APR 15 LUBBOCK, TEXAS

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7006 0100 0005 5769 8820

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

7006 0100 0005 5769 8837

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark Here

Sent To
JOAN CLAY
Street, Apt or PO Box 26242 VIA MISTRAL
City, State SAN JUAN CAPISTRANO CA 92675-4452

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JOAN CLAY
26242 VIA MISTRAL
SAN JUAN CAPISTRANO CA 92675-4452

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

☐ Agent
☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7006 0100 0005 5769 8837

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

7006 0100 0005 5769 8844

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 12 2013 Postmark

Sent To
JENNIFER ANN CLAY CATHER
Street, Apt or PO Box 4300 VERSAILLES AVE
City, State DALLAS TX 75205-3009

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 8851

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. No., or PO Box No. 1924 MEMPHIS
City, State, ZIP+4 BEDFORD TX 76022-0312

PS Form 3800, June 2002 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JOHN W CLAY III
1924 MEMPHIS
BEDFORD TX 76022-0312

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4/16

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 8851

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

7006 0100 0005 5769 8769

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, Apt. No., or PO Box No. 13129 BLUFFTON AVENUE
City, State, ZIP+4 BATON ROUGH LA 70817

PS Form 3800, June 2002 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

SUSAN MARIE MAIER
13129 BLUFFTON AVENUE
BATON ROUGH LA 70817

DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) S. Maier C. Date of Delivery 4/26/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5769 8769

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

7006 0100 0005 5769 9162

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

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 1 2 2013

Sent
Stree
or PO
City,
EDYTHE OWEN PRIKRYL
12 AUSTIN DOUGLAS WAY
CONGERS NY 10920-2466

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EDYTHE OWEN PRIKRYL
12 AUSTIN DOUGLAS WAY
CONGERS NY 10920-2466

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Delivery | C. Date of Delivery 4/15

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from)* 7006 0100 0005 5769 9162

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

7006 0100 0005 5769 9179

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

For delivery information v
OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR Here 2 2013

Sent To GOODRICH TRUST NUMBER ONE
U/W DAVID E GOODRICH
Street, A or PO Bo BK ONE TX TRUSTEE/ACCT 5555
City, Sta P O BOX 99084
FORT WORTH TX 76199-0084

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GOODRICH TRUST NUMBER ONE
U/W DAVID E GOODRICH
BK ONE TX TRUSTEE/ACCT 5555
P O BOX 99084
FORT WORTH TX 76199-0084

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 9179

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

7006 0100 0005 5769 9186

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 12 2013

Sent To: GOODRICH TRUST NUMBER TWO
Street, Apt. No., or PO Box No.: U/W DAVID E GOODRICH
City, State, ZIP+4: BK ONE TX TRUSTEE/ACCT 5556
P O BOX 99084
FORT WORTH TX 76199-0084

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GOODRICH TRUST NUMBER TWO
U/W DAVID E GOODRICH
BK ONE TX TRUSTEE/ACCT 5556
P O BOX 99084
FORT WORTH TX 76199-0084

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 9186

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

7006 0100 0005 5769 9193

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark: APR 12 2013

Sent To: CLIFF T MILFORD
Street, Apt. No., or PO Box No.: 12019 BROWNING LANE
City, State, ZIP+4: DALLAS TX 75230-2851

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 9209

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO
City, S

LOUIS H KUNTZ
2118 HILLTOP COURT
FULLERTON CA 92831-1311

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LOUIS H KUNTZ
2118 HILLTOP COURT
FULLERTON CA 92831-1311

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9209

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

7006 0100 0005 5769 9216

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO
City, S

AGHORN ENERGY
ATTN: FROSTY GILLIAM JR
P O BOX 12663
ODESSA TX 79768

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

AGHORN ENERGY
ATTN: FROSTY GILLIAM JR
P O BOX 12663
ODESSA TX 79768

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Laura Payne
☐ Agent
☐ Addressee

B. Received by (Printed Name) Laura Payne | C. Date of Delivery APR 15 2013

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9216

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

7006 0100 0005 5769 9223

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO B: WESTBOURNE LLC
P O BOX 1401
City, St: LUBBOCK TX 79408

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

WESTBOURNE LLC
P O BOX 1401
LUBBOCK TX 79408

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sonia Leyva ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9223

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

7006 0100 0005 5769 9230

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO: SAGECREST OIL & GAS LLC
P O BOX 630
City, St: FORT WORTH TX 76101

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

SAGECREST OIL & GAS LLC
P O BOX 630
FORT WORTH TX 76101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9230

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

7006 0100 0005 5769 9247

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To MALLOY OIL & GAS PROPERTIES
Street, A LLP
or PO Bo P O BOX 18414
City, Sta OKLAHOMA CITY OK 73154

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MALLOY OIL & GAS PROPERTIES
LLP
P O BOX 18414
OKLAHOMA CITY OK 73154

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la* 7006 0100 0005 5769 9247

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

7006 0100 0005 5769 9254

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

For delivery information vis MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, ROGER D JOHNSON
or PO B P O BOX 3516
City, Sta HOBBS NM 88241-3516

PS Form 3800, June 2002 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ROGER D JOHNSON
P O BOX 3516
HOBBS NM 88241-3516

IIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

APR 20 2013

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la* 7006 0100 0005 5769 9254

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

7006 0100 0005 5769 9063

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
R D GOODRICH ASSET PARTNERS LP
Street or PO C/O BANK ONE TEXAS NA AGENT
City, S P O BOX 2605
FORT WORTH TX 76113-2605

PS Fo See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

R D GOODRICH ASSET PARTNERS LP
C/O BANK ONE TEXAS NA AGENT
P O BOX 2605
FORT WORTH TX 76113-2605

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Robert Roley — C. Date of Delivery 4/15

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service* 7006 0100 0005 5769 9063

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

7006 0100 0005 5769 9070

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
CYNTHIA S GREGG
Street, or PO B P O BOX 724
City, Sta SUNDOWN TX 79372-0724

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CYNTHIA S GREGG
P O BOX 724
SUNDOWN TX 79372-0724

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cynthia D. Gregg ☐ 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

SUNDOWN APR 15 2013 USPS 79372

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service* 7006 0100 0005 5769 9070

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

7006 0100 0005 5769 9087

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

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 12 2013

Sent T

Street, or PO
City, S

STEPHANIE DOSHER
209 NE AVE D
SEMINOLE TX 79360

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

STEPHANIE DOSHER
209 NE AVE D
SEMINOLE TX 79360

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Stephanie Dosher C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9087

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

7006 0100 0005 5769 9094

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

For delivery information vist

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 12 2013

Sent To

Street, or PO E
City, St

LAVON JOHNSON
10433 LAKE PARK DR
HURST TX 76053

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LAVON JOHNSON
10433 LAKE PARK DR
HURST TX 76053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service lat 7006 0100 0005 5769 9094

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

7006 0100 0005 5769 9100

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
APR 12 2013
DOMESTIC MAIL ONLY

Sent To
LA SOMBRA MINERAL LLC
Street, Apt. or PO Box F/B/O JULIA GARRETT HEINRICHS
City, State, P O BOX 17001
SAN ANTONIO TX 78217

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LA SOMBRA MINERAL LLC
F/B/O JULIA GARRETT HEINRICHS
P O BOX 17001
SAN ANTONIO TX 78217

COMPLETE THIS SECTION ON DELIVERY

A. Signature X ☐ Agent ☐ Addressee

B. Received by (Printed Name) J Barn C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 9100

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

7006 0100 0005 5769 9117

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

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
APR 12 2013
DOMESTIC MAIL ONLY

Sent
Stree TY JOHNSON
or P 3304 TEXAS TRAIL CT
City, HURST TX 76054

PS Form 3800, June 2002 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

TY JOHNSON
3304 TEXAS TRAIL CT
HURST TX 76054

E THIS SECTION ON DELIVERY

A. Signature X Ty Johnson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ty Johnson C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi) 7006 0100 0005 5769 9117

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

7006 0100 0005 5769 9124

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, or PO B: CHARTER PRIVATE EQUITY
47 HIGHLAND PARK VILLAGE #200
City, St: DALLAS TX 75205

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CHARTER PRIVATE EQUITY
47 HIGHLAND PARK VILLAGE #200
DALLAS TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from s: 7006 0100 0005 5769 9124

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

7006 0100 0005 5769 9131

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In[illegible])

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent
Street or PO: JACK CHANDLER MYERS
4709 WEST LOVERS LANE #200
City: DALLAS TX 75029

PS Form 3800, June 2002 — See Reverse for Instructions

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

SEN[illegible] TE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

JACK CHANDLER MYERS
4709 WEST LOVERS LANE #200
DALLAS TX 75029

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/7/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service: 7006 0100 0005 5769 9131

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

7006 0100 0005 5769 9148

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

For delivery information vis
MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark APR 12 2013

Sent
Stree ROBERT LEE MYERS
or P 3812 MARQUETTE ST
City, DALLAS TX 75225

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ROBERT LEE MYERS
3812 MARQUETTE ST
DALLAS TX 75225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pam Myers ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4-17-13

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

RECEIVED USPS APR 17 2013 DALLAS TX 75225-9998

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5769 9148

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

7006 0100 0005 5769 9155

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

For delivery information vis
MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark APR 12 2013

Sent To REEF OIL & GAS COMPANY
Street, 1901 NORTH CENTRAL
or PO B EXPRESSWAY
City, St RICHARDSON TX 75080-3609

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

REEF OIL & GAS COMPANY
1901 NORTH CENTRAL
EXPRESSWAY
RICHARDSON TX 75080-3609

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic 7006 0100 0005 5769 9155

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

7006 0100 0005 5769 8738

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

For delivery information visit ou

OFFICI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 1 6 2013
Postmark Here

Sent To
RDG MINERAL LTD
Street, Apt. or PO Box F/B/O JANE GARRETT HEINRICHS
City, State P O BOX 17001
SAN ANTONIO TX 78217

PS Form 3 ... See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

RDG MINERAL LTD
F/B/O JANE GARRETT HEINRICHS
P O BOX 17001
SAN ANTONIO TX 78217

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☑ Agent ☐ Addressee

B. Received by (Printed Name) U Bell

C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from s* 7006 0100 0005 5769 8738

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

North Hobbs Unit Working Interest Owners

Name	Street Address/PO Box	City/State/Zip Code
A GAYLE HUDGENS	P O BOX 1195	MANCHACA TX 78652
ANN H TAYLOR	P O BOX 3487	MIDLAND TX 79702
BARRY ANTWEIL	12610 STILLWOOD PARK CT	CYPRESS TX 77433
BETTYE CONRAD TREADWAY	9507 GODSTONE LANE	SPRING TX 77379
CARY MURDOCH	1277 CR 2415	LEESBURG TX 75451
CATHERINE CUSACK	2223 PAJARITO SW	ALBUQUERQUE NM 87105
CHEMILY MANAGEMENT COMPANY	11131 McCRACKEN CIRCLE STE A	CYPRESS TX 77429-4462
CHEVRON MIDCONTINENT LP ATTN: NOJV MANAGER	P O BOX 2100	HOUSTON TX 77252
CHRISTOPHER R CUSACK	2114 HOLMBY	LOS ANGELES CA 90025
CRAIG CUSACK	P O BOX 250	ROSWELL NM 88202
CUSACK FAMILY REV TRUST	P O BOX 25	WILLOW CITY TX 78675
DAN C BERRY III	P O BOX 160	EUNICE NM 88231
DR HENRY YEAGER JR	5624 KNOLLWOOD	BETHESDA MD 20816
ESTATE OF HATTIE C WILLIAMS C/O AMERICAN STATE BANK	P O BOX 1401	LUBBOCK TX 79408
EVER LIVING CHURCH TRUST FIRST UNITED METHODIST CHURCH ATTN: KEITH BELL TRUSTEE	1411 BROADWAY	LUBBOCK TX 79401
F & M BANK & TRUST CO TRUSTEE FOR THE CHARLES NOBLE FORBES FAMILY TRUST	P O BOX 3688	TULSA OK 74101
FIRST ROSWELL COMPANY	P O BOX 1767	ROSWELL NM 88202
FORBES INVESTMENT COMPANY	P O BOX 842	TULSA OK 74101
GY GROUP	P O BOX 990	MIDLAND TX 79702-0990
JOHN P CUSACK III	19945 KIRK AVENUE	EAGLE RIVER AR 99577
JOHN P CUSACK JR TR UNDER	2808 WOOD WIND DRIVE	ARLINGTON TX 76013
JULIE ANTWEIL SILVERMAN	4408 CANYON COURT NE	ALBUQUERQUE NM 87111
K D McPETERS	502 W GOLD	HOBBS NM 88240
KAREN CUSACK PASQUIER	P O BOX 46138	RIO RANCHO NM 87174
KATHRYN LOUISE CONRAD McCARTHY	4435 SAN GABRIEL	DALLAS TX 75229
LANDRETH COMPANY STOCKHOLDERS	3207 W 4TH STREET	FORT WORTH TX 76107-2114
LEGACY RESERVES	P O BOX 10848	MIDLAND TX 79702
LOYD WHITLEY	P O BOX 168	MIDLAND TX 79702
MARATHON OIL CO ATTN: COLLIN HOOVER	5555 SAN FELIPE	HOUSTON TX 77056
MARJORIE DANIEL WINN	920 DANIELDALE ROAD	DE SOTO TX 75115
MARK ANTWEIL	P O BOX 365	LARCHMONT NY 10538
MARSHALL & WINSTON INC	P O BOX 50880	MIDLAND TX 79710
MARY ALICE LAFLIN MEHAFFEY	6138 IOLA WAY	ENGLEWOOD CO 80111
MARY ANN CURTIS LLC JOYCE E SILVERNAIL SUCTTEE	P O BOX 58095	OKLAHOMA CITY OK 73157-8095
MICHAEL F CUSACK II	6003 VALKEITH	HOUSTON TX 77096

Name	Street Address/PO Box	City/State/Zip Code
A GAYLE HUDGENS	P O BOX 1195	MANCHACA TX 78652
MRS FRANCY'S I CONRAD HOY	3849 PALLOS VERDAS	DALLAS TX 75229-2743
NOBLE ISSUE TRUST	P O BOX 26883	OKLAHOMA CITY OK 73126-0883
OBO INC	P O BOX 22577	HIALEAH FL 33002
OIL & GAS DISTRICT ACCT ARMSTRONG ACCT NO 050515113500 WELLS FARGO BANK NA TRUSTEE	P O BOX 40909	AUSTIN TX 78704
P G P HOLDINGS 1 LLC	104 TOWNPARK DR	KENNESAW GA 30144
P H INC	P O BOX 3142	MIDLAND TX 79702-3142
PATRICK CUSACK	1837 SOUTH DUNSMUIR AVE	LOS ANGELES CA 90019
PHILLIP BERRY	P O BOX 1551	LOVINGTON NM 88260
RORCO LLC CAROLYN K LISLE MANAGING MEMBERS	2540 WARWICK DRIVE	OKLAHOMA CITY OK 73116
RUTH ANNE YEAGER HANSEN ESTATE	4642 LORRAINE	DALLAS TX 75209
SARA WARD SIMS SUCCESSOR TRUSTEE OF THE JS WARD & MARGARET WARD TRUST OF 1985	101 S FOURTH STREET	ARTESIA NM 88210-2177
SEA PROPERTIES LTD	P O BOX 1486	ARDMORE OK 73402
SEVEN WAYS VENTURE CAPITAL LTD	214 WEST TEXAS AVENUE #200	MIDLAND TX 79701-4621
STEVE CUSACK	2910 ANNA J DRIVE	ROSWELL NM 88210-3406
STEVENS ENHANCED RECOVERY PARTNERS ATTN: N L STEVENS III	1000 LOUISIANA #3400	HOUSTON TX 77002-5007
SUNDOWN ENERGY LP	13455 NOEL RD #2000	DALLAS TX 75240
THOMAS AQUINAS COLLEGE	10000 NORTH OJAI RD	SANTA PAULA CA 93060
TIMOTHY CUSACK	P O BOX 250	ROSWELL NM 88202
TRABAJO DEL SPEAR LP	P O BOX 1684	MIDLAND TX 79702-1684
TWO STATES OIL COMPANY	4925 GREENVILLE AVE #940	DALLAS TX 75206
WANDA T MILLIGAN	151 MATTHEWS ROAD	OAKDALE NY 11769
XTO ENERGY INC	810 HOUSTON STREET #2000	FT WORTH TX 76102-6298
YATES PETROLEUM CORPORATION	105 SOUTH 4TH STREET	ARTESIA NM 88210

7006 0100 0005 5769 7861

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

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

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501 6888 — Postmark Here — USPS

Sent To
Street, Apt. No., or PO Box No. Ruth Anne Yeager Hansen Estate
4642 Lorraine
City, State, ZIP+4 Dallas, TX 75209

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ruth Anne Yeager Hansen Estate
4642 Lorraine
Dallas, TX 75209

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) ROGER A. HANSEN — C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7861

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

7006 0100 0005 5769 7878

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

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

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO — Postmark Here — USPS

Sent To
Street, Apt. No., or PO Box No. Patrick Cusack
1837 South Dunsmuir Ave.
City, State, ZIP+4 Los Angeles, CA 90019

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Patrick Cusack
1837 South Dunsmuir Ave.
Los Angeles, CA 90019

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7878

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

7006 0100 0005 5769 7885

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
SANTA FE NEW MEXICO 87501 USPS

Sent To: Mrs. Francy's I Conrad Hoy
Street, or PO I: 3849 Pallos Verdas
City, St: Dallas, TX 75229-2743

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mrs. Francy's I Conrad Hoy
3849 Pallos Verdas
Dallas, TX 75229-2743

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Yolanda Hoy ☐ Agent ☐ Addressee

B. Received by (Printed Name): Yolanda Hoy
C. Date of Delivery: 4/16/13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5769 7885

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

7006 0100 0005 5769 7892

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 1
SANTA FE NEW MEXICO 87501 9998

Sent To: A Gayle Hudgens
Street, or PO I: P O BOX 1195
City, St: Manchaca, TX 78652

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

A Gayle Hudgens
P O BOX 1195
Manchaca, TX 78652

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name): HANLEY JONES
C. Date of Delivery: 4-17-2013

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5769 7892

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

7006 0100 0005 5769 7908

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

For delivery information visi
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501 0888
Postmark Here
APR 12 2013
USPS

Sent
Stree
or P
City,

Christopher R. Cusack
2114 Holmby
Los Angeles, CA 90025

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 7915

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

For delivery information visi
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501 0888
Postmark Here
APR 12 2013
USPS

Sent T
Street,
or PO
City, S

Mary Alice Laflin Mehaffey
6138 IOLA WAY
Englewood, CO 80111

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — COMPLETE THIS SECTION ON DELIVERY

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

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

1. Article Addressed to:

Mary Alice Laflin Mehaffey
6138 IOLA WAY
Englewood, CO 80111

A. Signature
X
☐ Agent
☒ Addressee

B. Received by (Printed Name) John McLaughlin
C. Date of Delivery 4/15

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la...* 7006 0100 0005 5769 7915

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

7006 0100 0005 5769 7922

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

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501-9998 Postmark Here USPS

Sent To RORCO LLC
Carolyn K. Lisle
Street, A Managing Members
or PO Bc 2540 WARWICK DRIVE
City, Sta Oklahoma City, OK 73116

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

RORCO LLC
Carolyn K. Lisle
Managing Members
2540 WARWICK DRIVE
Oklahoma City, OK 73116

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) TOM HALL C. Date of Delivery 4/16/15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7922

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

7006 0100 0005 5769 7939

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

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501-9998 Postmark Here USPS

Sent MARATHON OIL CO
ATTN: COLLIN HOOVER
Stree 5555 SAN FELIPE
or PC
City, HOUSTON TX 77056

PS Form 3800, June 2002 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION ...TION ON DELIVERY

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

1. Article Addressed to:

MARATHON OIL CO
ATTN: COLLIN HOOVER
5555 SAN FELIPE
HOUSTON TX 77056

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4/13/15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7939

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

7006 0100 0005 5769 7946

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

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501 Postmark Here APR 17 USPS

Sent To
Street, Ap or PO Bo
City, Stat
MARSHALL & WINSTON INC
P O BOX 50880
MIDLAND TX 79710

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: CO... — PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE — ...ON ON DELIVERY

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

1. Article Addressed to:

MARSHALL & WINSTON INC
P O BOX 50880
MIDLAND TX 79710

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4/16/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service l 7006 0100 0005 5769 7946

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

7006 0100 0005 5769 7953

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v
OFFI(

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501 Postmark Here APR 17 USPS

Sent To
Street, Apt. or PO Box
City, State,
KATHRYN LOUISE CONRAD McCARTHY
4435 SAN GABRIEL
DALLAS TX 75229

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE — ...TION ON DELIVERY

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

1. Article Addressed to:

KATHRYN LOUISE CONRAD McCARTHY
4435 SAN GABRIEL
DALLAS TX 75229

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/16/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service lab 7006 0100 0005 5769 7953

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

7006 0100 0005 5769 7960

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

For delivery information vis — MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here — SANTA FE NEW MEXICO 87501-9998

Sent To
K D McPETERS
Street, Ap or PO Bo 502 W GOLD
City, Stat HOBBS NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

K D McPETERS
502 W GOLD
HOBBS NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7960

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

7006 0100 0005 5769 7977

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

For delivery information visit o — MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here — USPS 87501-9998

Sent To
WANDA T MILLIGAN
Street, Ap or PO Bo 151 MATTHEWS ROAD
City, Stat OAKDALE NY 11769

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

WANDA T MILLIGAN
151 MATTHEWS ROAD
OAKDALE NY 11769

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X T. Milligan — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7977

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

7006 0100 0005 5769 7984

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

For delivery information visit ou

MHF/OXY

OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
NEW MEXICO 87501
USPS

Sent To
Street, Apt. or PO Box: CARY MURDOCH
1277 CR 2415
City, State: LEESBURG TX 75451

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CARY MURDOCH
1277 CR 2415
LEESBURG TX 75451

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[signature] 4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7984

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

7006 0100 0005 5769 7991

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
NEW MEXICO 87501
USPS

Sent To
Street, Apt. or PO Box:
City, State:
NOBLE ISSUE TRUST
P O BOX 26883
OKLAHOMA CITY OK 73126-0883

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

NOBLE ISSUE TRUST
P O BOX 26883
OKLAHOMA CITY OK 73126-0883

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

OKLAHOMA CITY OK 73125-9998
APR 15 2013
US

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7991

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

7006 0100 0005 5769 8004

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

For delivery information vis — **MHF/OXY**
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501-9998 Postmark Here APR 12 2004 USPS

Sent To
Street, Apt. or PO Box
City, State,
THOMAS AQUINAS COLLEGE
10000 NORTH OJAI RD
SANTA PAULA CA 93060

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 8011

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

For delivery information visit ot — **MHF/OXY**
OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501-9998 Postmark Here APR 12 2004 USPS

Sent To
Street, Ap
or PO Bo
City, Stat
P H INC
P O BOX 3142
MIDLAND TX 79702-3142

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

1. Article Addressed to:

P H INC
P O BOX 3142
MIDLAND TX 79702-3142

A. Signature
X Shirley Lester ☑ Agent ☐ Addressee

B. Received by (Printed Name) Shirley Lester — C. Date of Delivery 4-18-B

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8011

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

7006 0100 0005 5769 8028

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87 Postmark Here USPS

Sent To
Street, Ap or PO Bo
City, Stat

LEGACY RESERVES
P O BOX 10848
MIDLAND TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LEGACY RESERVES
P O BOX 10848
MIDLAND TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Evan Ceballos ☐ Agent ☐ Addressee

B. Received by (Printed Name): EVAN Ceballos
C. Date of Delivery: 4-18-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 8028

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

7006 0100 0005 5769 8035

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87 Postmark Here USPS

Sent To
Street, A
or PO Bo
City, Sta

SEA PROPERTIES LTD
P O BOX 1486
ARDMORE OK 73402

PS Form 3800, June 2002 — See Reverse for Instructions

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

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

SEA PROPERTIES LTD
P O BOX 1486
ARDMORE OK 73402

A. Signature
X ☐ Agent ☐ Addressee

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

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

ARDMORE OK APR 15 2013

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 8035

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

7006 0100 0005 5769 8042

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

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
SANTA FE NEW MEXICO 87501-8888
USPS

Sent To
JULIE ANTWEIL SILVERMAN
Street, or PO I 4408 CANYON COURT NE
City, St ALBUQUERQUE NM 87111

PS Form 3800, June 2002 See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION — **E THIS SECTION ON DELIVERY**

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

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

1. Article Addressed to:
JULIE ANTWEIL SILVERMAN
4408 CANYON COURT NE
ALBUQUERQUE NM 87111

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8042

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

7006 0100 0005 5769 8059

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

For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS

Sent To
TRABAJO DEL SPEAR LP
Street, Apt. or PO Box P O BOX 1684
City, State, MIDLAND TX 79702-1684

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) LORI SAUNDERS C. Date of Delivery 4-17-13

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

1. Article Addressed to:
TRABAJO DEL SPEAR LP
P O BOX 1684
MIDLAND TX 79702-1684

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from ser* 7006 0100 0005 5769 8059

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

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

GY GROUP
P O BOX 990
MIDLAND TX 79702-0990

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Shirley Lester ☑ Agent ☐ Addressee

B. Received by (Printed Name) Shirley Lester
C. Date of Delivery 4-18-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8172

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

7006 0100 0005 5769 8165

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

For delivery information v OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE, NEW MEXICO 87501-9998 Postmark Here USPS

Se EVER LIVING CHURCH TRUST
FIRST UNITED METHODIST
Si CHURCH
or ATTN: KEITH BELL TRUSTEE
Ci 1411 BROADWAY
PS LUBBOCK TX 79401

Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

EVER LIVING CHURCH TRUST
FIRST UNITED METHODIST CHURCH
ATTN: KEITH BELL TRUSTEE
1411 BROADWAY
LUBBOCK TX 79401

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pat Latch ☐ Agent ☐ Addressee

B. Received by (Printed Name) PAT LATCH
C. Date of Delivery 4/15/13

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

LUBBOCK TX STATION APR 15 2013

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8165

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

7006 0100 0005 5769 8189

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

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501-8888
Postmark Here
USPS

Sent T
Street, or PO
City, S

STEVENS ENHANCED RECOVERY
PARTNERS
ATTN: N L STEVENS III
1000 LOUISIANA #3400
HOUSTON TX 77002-5007

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 8196

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

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501-8888
Postmark Here
USPS

Sent T
Street, or PO
City, St

TIMOTHY CUSACK
P O BOX 250
ROSWELL NM 88202

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

TIMOTHY CUSACK
P O BOX 250
ROSWELL NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X E.T. Gallegos ☐ Agent ☐ Addressee

B. Received by (Printed Name) E.T. Gallegos C. Date of Delivery 15 APR 2013

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

ROSWELL, NM 88201

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la...* 7006 0100 0005 5769 8196

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

7006 0100 0005 5769 8202

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

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: SANTA FE NEW M... APR 10 ... 87501-9888 USPS

Sent To: ANN H TAYLOR
Street, Apt. or PO Box: P O BOX 3487
City, State: MIDLAND TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ANN H TAYLOR
P O BOX 3487
MIDLAND TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

MIDLAND TX 79701 APR 15 2013

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8202

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

7006 0100 0005 5769 8219

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

For delivery information vi: MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 2013 87501-9888 USPS

Sent To: CHEVRON MIDCONTINENT LP
Street, Apt. or PO Box: ATTN: NOJV MANAGER
City, State: P O BOX 2100
HOUSTON TX 77252

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CHEVRON MIDCONTINENT LP
ATTN: NOJV MANAGER
P O BOX 2100
HOUSTON TX 77252

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Anthony Allen C. Date of Delivery 4-16-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service)* 7006 0100 0005 5769 8219

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

7006 0100 0005 5769 8226

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

For delivery information v

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87501
APR 12 2013
SANTA FE MAIN POST OFFICE

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

MARY ANN CURTIS LLC
JOYCE E SILVERNAIL SUCTTEE
P O BOX 58095
OKLAHOMA CITY OK 73157-8095

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MARY ANN CURTIS LLC
JOYCE E SILVERNAIL SUCTTEE
P O BOX 58095
OKLAHOMA CITY OK 73157-8095

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Joyce E Silvernail ☐ Agent ☐ Addressee

B. Received by (Printed Name) Joyce E Silvernail C. Date of Delivery 4-16-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service la) 7006 0100 0005 5769 8226

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

7006 0100 0005 5769 8233

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

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87501
APR 12 2013
SANTA FE MAIN POST OFFICE

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

BETTYE CONRAD TREADWAY
9507 GODSTONE LANE
SPRING TX 77379

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

BETTYE CONRAD TREADWAY
9507 GODSTONE LANE
SPRING TX 77379

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Bettye Conrad Treadway ☐ Agent ☐ Addressee

B. Received by (Printed Name) Bettye Treadway C. Date of Delivery 4-17-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser) 7006 0100 0005 5769 8233

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

7006 0100 0005 5769 8240

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

For delivery information vi
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87501 — Postmark Here — APR 12 2013 — SANTA FE MAIN POST OFFICE

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

JOHN P CUSACK III
19945 KIRK AVENUE
EAGLE RIVER AR 99577

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: *COMPLETE THIS SECTION*

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

1. Article Addressed to:

JOHN P CUSACK III
19945 KIRK AVENUE
EAGLE RIVER AR 99577

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

EAGLE RIVER AK 99577 APR 17 2013 USPS

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la* 7006 0100 0005 5769 8240

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

7006 0100 0005 5769 8257

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In[illegible])

For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87501 — Postmark Here — APR 12 2013 — SANTA FE MAIN POST OFFICE

Sent To
Street, Ap
or PO Bo
City, Stat

TWO STATES OIL COMPANY
4925 GREENVILLE AVE #940
DALLAS TX 75206

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: *COMPLETE THIS SECTION*

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

1. Article Addressed to:

TWO STATES OIL COMPANY
4925 GREENVILLE AVE #940
DALLAS TX 75206

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la* 7006 0100 0005 5769 8257

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

7006 0100 0005 5769 7663

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

For delivery information: OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

APR 2 2013

SANTA FE MAIN POST

Sent To: SARA WARD SIMS SUCCESSOR
Street, Apt. or PO Box: TRUSTEE OF THE JS WARD &
City, State: MARGARET WARD TRUST OF 1985
101 S FOURTH STREET
ARTESIA NM 88210-2177

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

SARA WARD SIMS SUCCESSOR
TRUSTEE OF THE JS WARD &
MARGARET WARD TRUST OF 1985
101 S FOURTH STREET
ARTESIA NM 88210-2177

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X S. Mathews ☐ Agent ☐ Addressee

B. Received by (Printed Name): S. Mathews — C. Date of Delivery:

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5769 7663

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

7006 0100 0005 5769 7670

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

For delivery information visi: OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

APR 2 2013

SANTA FE MAIN POST

Sent To: LOYD WHITLEY
Street, Apt. or PO Box: P O BOX 168
City, State: MIDLAND TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LOYD WHITLEY
P O BOX 168
MIDLAND TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Marilyn Schwamb ☐ Agent ☐ Addressee

B. Received by (Printed Name): MARILYN SCHWAMB — C. Date of Delivery: 4-18-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5769 7670

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

7006 0100 0005 5769 7687

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

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

Sent To: ESTATE OF HATTIE C WILLIAMS
Street, Apt. or PO Box: C/O AMERICAN STATE BANK
City, State: ATTN: JOHN COMMACKK
P O BOX 1401
LUBBOCK TX 79408

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ESTATE OF HATTIE C WILLIAMS
C/O AMERICAN STATE BANK
ATTN: JOHN COMMACKK
P O BOX 1401
LUBBOCK TX 79408

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sonia Leyva ☐ Agent ☐ Addressee

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

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

DOWNTOWN STATION
APR 18 2013
LUBBOCK, TEXAS 79408

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic) 7006 0100 0005 5769 7687

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

7006 0100 0005 5769 7694

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

For delivery information vi
OFFI(

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

Sent To: MARJORIE DANIEL WINN
Street, Apt. or PO Box: 920 DANIELDALE ROAD
City, State: DE SOTO TX 75115

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MARJORIE DANIEL WINN
920 DANIELDALE ROAD
DE SOTO TX 75115

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Beverly Cook ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic) 7006 0100 0005 5769 7694

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

7006 0100 0005 5769 7700

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

For delivery information visi: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR [illegible]
[illegible] FE MAIN POST [illegible]

Sent To: YATES PETROLEUM CORP
Street, A or PO B: S P YATES; ABO PETR;
City, Sta: ATTN: LAND DEPT
105 SOUTH 4TH STREET
ARTESIA NM 88210

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

YATES PETROLEUM CORP
S P YATES; ABO PETR;
ATTN: LAND DEPT
105 SOUTH 4TH STREET
ARTESIA NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [illegible] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7700

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

7006 0100 0005 5769 7717

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
[illegible] FE MAIN POST [illegible]

Sent To: P G P HOLDINGS 1 LLC
Street, Ap or PO Box: 104 TOWNPARK DR
City, State: KENNESAW GA 30144

m 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

P G P HOLDINGS 1 LLC
104 TOWNPARK DR
KENNESAW GA 30144

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X E Williams ☑ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-15-13

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7717

PS Form [illegible], February 2004 — Domestic Return Receipt — 10[illegible]02-M-1540

7006 0100 0005 5769 7724

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

For delivery information visi: **MHF/OXY**
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
SANTA FE MAIN POST OFFICE

Sent To
Street, Apt or PO Box: SEVEN WAYS VENTURE CAPITAL LTD
214 WEST TEXAS AVENUE #200
City, State: MIDLAND TX 79701-4621

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

SEVEN WAYS VENTURE CAPITAL LTD
214 WEST TEXAS AVENUE #200
MIDLAND TX 79701-4621

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kay Cummings ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7724

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

7006 0100 0005 5769 7731

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

For delivery information visit: **MHF/OXY**
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
SANTA FE NEW MEXICO 87501-8888
USPS

Sent To
Street, Apt or PO Box: DR HENRY YEAGER JR
5624 KNOLLWOOD
City, State: BETHESDA MD 20816

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

DR HENRY YEAGER JR
5624 KNOLLWOOD
BETHESDA MD 20816

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sandra D. Yeager ☐ Agent ☐ Addressee

B. Received by (Printed Name) Sandra Yeager | C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7731

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

7006 0100 0005 5769 7748

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N... Coverage Provided)

For delivery information v...

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE, NEW MEXICO 87501 — APR 12 2013 — Postmark Here — USPS

Sent To
Street, ...
or PO B...
City, Sta...

XTO ENERGY INC
ATTN: LAND – PERMIAN
810 HOUSTON STREET #2000
FT WORTH TX 76102-6298

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

XTO ENERGY INC
ATTN: LAND – PERMIAN
810 HOUSTON STREET #2000
FT WORTH TX 76102-6298

COMPLETE THIS SECTION ON DELIVERY

A. Signature — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery: APR 15 2013

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7748

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

7006 0100 0005 5769 7755

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

For delivery information visi...

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

...EW MEXICO 87501 — Postmark Here — 2013

Sent To
Street, A...
or PO Bo...
City, Sta...

LANDRETH COMPANY STOCKHOLDERS
ATTN: W A LANDRETH
3207 W 4TH STREET
FORT WORTH TX 76107-2114

...S Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LANDRETH COMPANY STOCKHOLDERS
ATTN: W A LANDRETH
3207 W 4TH STREET
FORT WORTH TX 76107-2114

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7755

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

7006 0100 0005 5769 7762

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

For delivery information visi
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO 87501 USPS 8668

Postmark Here

Sent To
Street, or PO E BARRY ANTWEIL
City, St 12610 STILLWOOD PARK CT
CYPRESS TX 77433

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 7779

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

For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE NEW MEXICO USPS

Postmark Here

Sent To
Street, Apt. or PO Box MARK ANTWEIL
City, State, P O BOX 365
LARCHMONT NY 10538

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RETURN ADDRESS, FOLD AT DO

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MARK ANTWEIL
P O BOX 365
LARCHMONT NY 10538

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

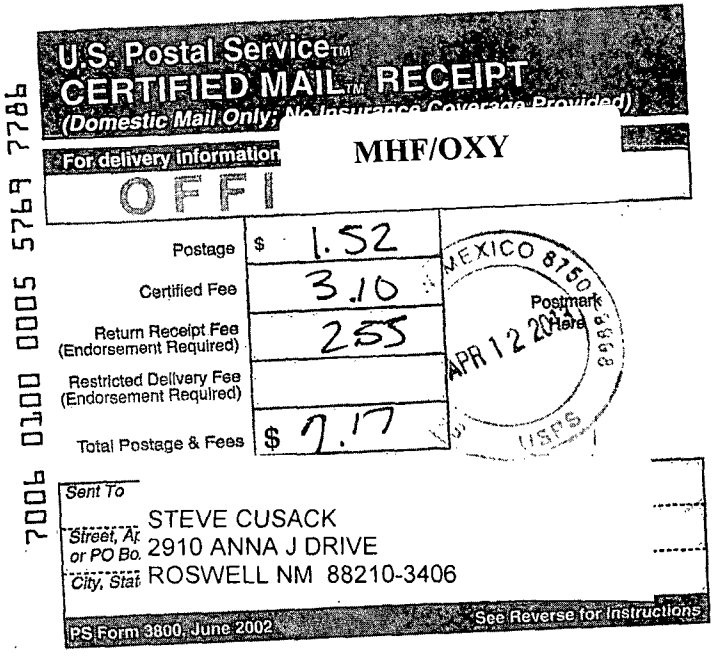
SANTA FE NEW MEXICO 87501 DEC 25 2013 USPS 8668

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 7779

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



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

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

MHF/OXY

OFFI

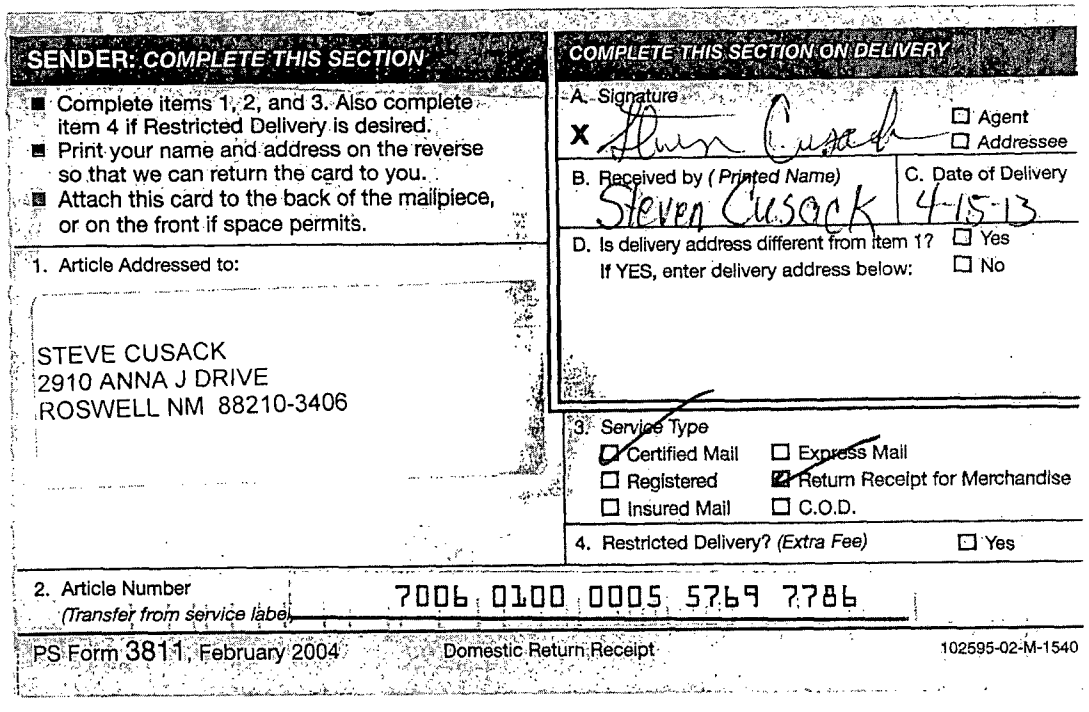
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

MEXICO 87501 Postmark Here APR 12 2013 USPS

7006 0100 0005 5769 7786

Sent To
STEVE CUSACK
Street, Apt. No., or PO Box No. 2910 ANNA J DRIVE
City, State, ZIP+4 ROSWELL NM 88210-3406

PS Form 3800, June 2002 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

STEVE CUSACK
2910 ANNA J DRIVE
ROSWELL NM 88210-3406

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Steven Cusack ☐ Agent ☐ Addressee

B. Received by (Printed Name) Steven Cusack
C. Date of Delivery 4-15-13

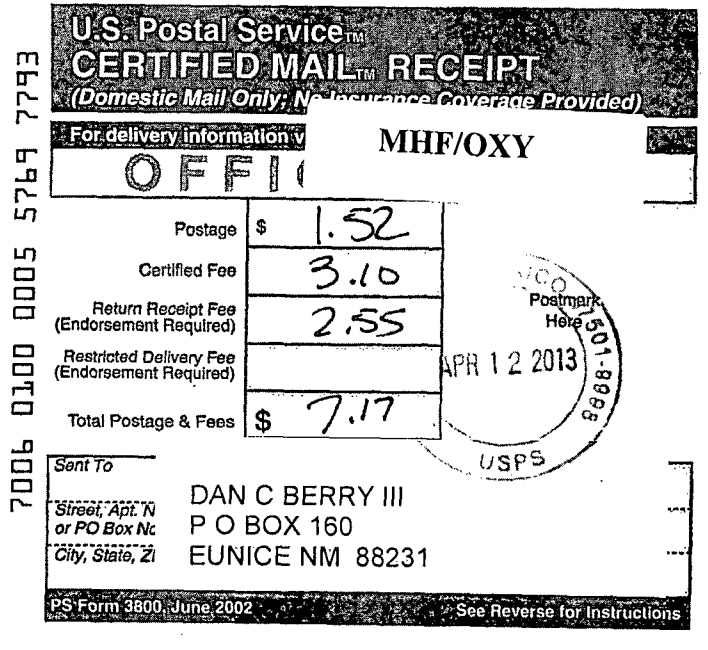
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7786

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



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

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

MHF/OXY

OFFI

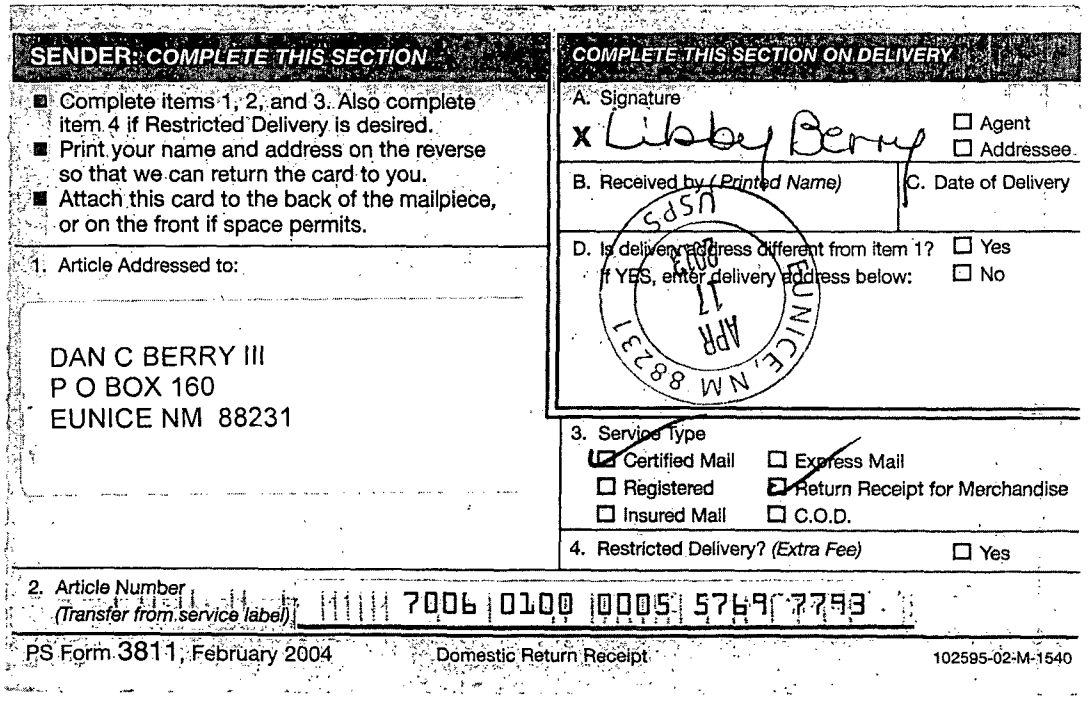
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 12 2013 USPS

7006 0100 0005 5769 7793

Sent To
DAN C BERRY III
Street, Apt. No., or PO Box No. P O BOX 160
City, State, ZIP+4 EUNICE NM 88231

PS Form 3800, June 2002 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

DAN C BERRY III
P O BOX 160
EUNICE NM 88231

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Libby Berry ☐ 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

USPS APR 17 2013 EUNICE, NM 88231

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7793

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

7006 0100 0005 5769 7809

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

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
NEW MEXICO 87501-8888

Sent To
Street, Apt or PO Box
City, State

PHILLIP BERRY
P O BOX 1551
LOVINGTON NM 88260

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PHILLIP BERRY
P O BOX 1551
LOVINGTON NM 88260

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7809

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

7006 0100 0005 5769 7816

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

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
NEW MEXICO 87501-8888

Sent To
Street, Apt or PO Box
City, State

CHEMILY MANAGEMENT COMPANY
ATTN: JOINT INTEREST
11131 McCRACKEN CIRCLE STE A
CYPRESS TX 77429-4462

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER

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

1. Article Addressed to:

CHEMILY MANAGEMENT COMPANY
ATTN: JOINT INTEREST
11131 McCRACKEN CIRCLE STE A
CYPRESS TX 77429-4462

ECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery 4/15/13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service 7006 0100 0005 5769 7816

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

7006 0100 0005 5769 7823

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

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

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
SANTA FE NEW MEXICO 87501-9998
USPS

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

CATHERINE CUSACK
2223 PAJARITO SW
ALBUQUERQUE NM 87105

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CATHERINE CUSACK
2223 PAJARITO SW
ALBUQUERQUE NM 87105

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Catherine Cusack ☐ Agent ☐ Addressee

B. Received by (Printed Name) Catherine Cusack
C. Date of Delivery 4/17/13

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

SPS FIVE POINTS STATION APR 17 2013 ALBUQUERQUE NM 87105-9998

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7823

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

7006 0100 0005 5769 7830

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

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

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
MAIN POST OFFICE

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

KAREN CUSACK PASQUIER
P O BOX 46138
RIO RANCHO NM 87174

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

KAREN CUSACK PASQUIER
P O BOX 46138
RIO RANCHO NM 87174

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jeff Pasquier ☐ Agent ☑ Addressee

B. Received by (Printed Name) Jeff Pasquier
C. Date of Delivery 4-16-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7830

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

7006 0100 0005 5769 7847

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
USPS SANTA FE, NM 87501
SANTA FE MAIN POST OFFICE

Sent To
OBO INC
Street, Apt. No., or PO Box No. P O BOX 22577
City, State, ZIP+4 HIALEAH FL 33002

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

OBO INC
P O BOX 22577
HIALEAH FL 33002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

APR 17 2013

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7847

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

7006 0100 0005 5769 7854

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

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OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
USPS SANTA FE, NM 87501
SANTA FE MAIN POST OFFICE

Sent To
JOHN P CUSACK JR TR UNDER
JOHN P CUSACK TESTAMENTARY TR
Street, Apt. No., or PO Box No. 2808 WOOD WIND DRIVE
City, State, ZIP+4 ARLINGTON TX 76013

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

JOHN P CUSACK JR TR UNDER
JOHN P CUSACK TESTAMENTARY TR
2808 WOOD WIND DRIVE
ARLINGTON TX 76013

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4-15-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7854

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

7006 0100 0005 5769 8264

U.S. Postal Service™
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For delivery information visit: MHF/OXY
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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 12 2013 SANTA FE MAIN POST OFFICE SANTA FE NM 87501

Sent To: CRAIG CUSACK
Street, Apt. or PO Box: P O BOX 250
City, State: ROSWELL NM 88202

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CRAIG CUSACK
P O BOX 250
ROSWELL NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): ET Gallegos — C. Date of Delivery: APR 12 2013

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

ROSWELL NM 88201

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 8264

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

7006 0100 0005 5769 8271

U.S. Postal Service™
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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 12 2013 SANTA FE MAIN POST OFFICE SANTA FE NM 87501

Sent To: MICHAEL F CUSACK II
Street, Apt. or PO Box: 6003 VALKEITH
City, State: HOUSTON TX 77096

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 8288

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

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MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
SANTA FE MAIN POST OFFICE

Sent To
Street, Ap or PO Box
City, State
CUSACK FAMILY REV TRUST
P O BOX 25
WILLOW CITY TX 78675

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

CUSACK FAMILY REV TRUST
P O BOX 25
WILLOW CITY TX 78675

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) P Cusack C. Date of Delivery 4-16-13

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8288

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

7006 0100 0005 5769 8295

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

For delivery information visit o
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MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013

Sent To
Street, A or PO Bo
City, Sta
SUNDOWN ENERGY LP
TWO GALLERIA TOWER
13455 NOEL RD #2000
DALLAS TX 75240

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

SUNDOWN ENERGY LP
TWO GALLERIA TOWER
13455 NOEL RD #2000
DALLAS TX 75240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R. Thurman ☐ Agent ☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8295

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

7006 0100 0005 5769 8301

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here — APR 12 2013 — SANTA FE, NM

Sent To: OIL & GAS DISTRICT ACCT
ARMSTRONG
Street, Apt. or PO Box: ACCT NO 050515113500
City, State: WELLS FARGO BANK NA TRUSTEE
P O BOX 40909
AUSTIN TX 78704

PS Form 3800, June 2002 — See Reverse for Instructions

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

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

A. Signature — X [signature] — ☐ Agent ☐ Addressee

B. Received by (Printed Name): Hank Sullins — C. Date of Delivery: 4-17

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

1. Article Addressed to:
OIL & GAS DISTRICT ACCT
ARMSTRONG
ACCT NO 050515113500
WELLS FARGO BANK NA TRUSTEE
P O BOX 40909
AUSTIN TX 78704

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8301

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

7006 0100 0005 5769 8318

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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com
OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here — APR 12 2013 — SANTA FE MAIN POST OFFICE

Sent To: FIRST ROSWELL COMPANY
Street, Apt. or PO Box: P O BOX 1767
City, State: ROSWELL NM 88202

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

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

A. Signature — X [signature] — ☐ Agent ☐ Addressee

B. Received by (Printed Name): Kay Srader — C. Date of Delivery

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

1. Article Addressed to:
FIRST ROSWELL COMPANY
P O BOX 1767
ROSWELL NM 88202

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 8318

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

ROSWELL, NM 88201 APR 23 2013

7006 0100 0005 5769 8325

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

For delivery information visit ou

MHF/OXY

OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
SANTA FE MAIN POST

Sent T F & M BANK & TRUST CO TRUSTEE
FOR THE CHARLES NOBLE
Street, or PO FORBESFAMILY TRUST
City, S P O BOX 3688
TULSA OK 74101

PS Form 3800, June 2002 ructions

SENDER: *COMPLETE THIS SECTION*

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

1. Article Addressed to:

F & M BANK & TRUST CO TRUSTEE
FOR THE CHARLES NOBLE
FORBESFAMILY TRUST
P O BOX 3688
TULSA OK 74101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Steve Bates ☐ Agent ☐ Addressee

B. Received by (Printed Name) Steve BATES APR 16 2013 C. Date of Delivery

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

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

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from se 7006 0100 0005 5769 8325

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

7006 0100 0005 5769 8332

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

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 12 2013
SANTA FE MAIN POST OFFICE

Sent To FORBES INVESTMENT COMPANY
Street, ILAMAE FORBES REV TRUST
or PO B P O BOX 842
City, Sti TULSA OK 74101

PS Form 3800, June 2002 See Reverse for Instructions

Returned

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
A. June Hardy	2733 North Rojo	Hobbs, NM 88240
A.G. Troutt	6011 Moon St. NE, Apt. 1312	Albuquerque, NM 87111-1453
Acme Land Co.	P.O. Box 10280	Midland, TX 79702
Albert D. & Deborah Hobbs	1321 West Dogwood	Lovington, NM 88260
Alden Obering O'Brien, c/o Warrior Oil Company	1580 Lincoln Street, Suite 920	Denver, CO 80203
Alice M.Smith	115 Thompson Drive SE	Cedar Rapids, IA 52403
Alice W. Wickett	5011 Donnelly Ave.	Fort Worth, TX 76107-6006 817-735-1045
Aline Belle Bristow	2737 Colonial Parkway	Fort Worth, TX 76101
Allen W. Ralston	P.O. Box 1737	Hobbs, NM 88240
Alta Ann Garrison	29522 Warmsprings Drive	Menifee, CA 92584 951-679-3448
American Minerals Corp	1331 Lamar Street, Ste. 900	Houston, TX 77010-3025
AmeriTrust, N.A. as trustee Jennette Clift George	P.O. Box 3285	Houston, TX 77253
Anderson Carter	P.O. Box 998	Las Cruces,NM 88004
Andrews Oil & Gas Partnership	14 South Court	Port Washington, NY 11050
Angela Jo Alexander	P.O. Box 482	Marysville, MO 64468
Ann M. Barber	2218 Poplar Park Drive	Kingwood, TX 77339-1756 281-359-0167
Apollo Energy, Inc.	P.O. Box 5315	Hobbs, NM 88241
Archbishiphoric of New York	P.O. Box 470425	Fort Worth, TX 76147
Armstrong Royalties LLC	1561 N. Dallas Parkway, #900	Addison, TX 75001
Arnold Divine	1500 American National Bank Building	St. Paul, MN 55101
Ashland Exploration Inc.	P.O. Box 218330	Houston, TX 77218
Baber Well Servicing Company	P.O. Box 1772	Hobbs, NM 88240
Bandera Minerals LLC; Bandera Minerals I LLC; Bandera Minerals II LLC	P.O. Box 701228	Tulsa, OK 74170
Bank of America, N.A. & Jeffery W. Foltz as co-trustee of the Allie Gayle Davison Trust #2	P.O. Box 830308	Dallas, TX 75283
Barbara Christman Farrell	224 Providence Road	Duck Hill, MS 38925-9301
Barbara J. DeVoss Junker	2929 East 6th Street, Apt. 140	Tucson, AZ 85716
Barron Properties	P.O. Box 182	Midland, TX 79702
BDT Oil & Gas LP	1308 Lake Street	Fort Worth, TX 76102
Berry Lee Hobbs, Jr. & Linda Sue	1546 5th Avenue SW	Rochester, MN 55902
Betty J. Talley	926 Railhead Drive	Ada, OK 74820
Beverly Boss	East Star Route, Box 9-B	Lovington, NM 88260
Billie S. DeVoss	15311 East La Salos Drive	Whittier, CA 90603
Billy Glenn Spradlin	29 Rim Road	Kilgore, TX 75662
BMCM Partnership, LP	5661 South Crestbrook Drive	Morrison, CO 80465
Bob Callhoon	P.O. Box 98	Eunice, NM 88231
Brad Bassore	P. O. Box 4028	Alburqurque, NM 87196
Bradley McInroe d/b/a Big Al Oil & Gas	P.O. Box 669	Levelland, TX 79336

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Bradley Nominee Corp.	P.O. Box 1938	Palm City, FL 24990
Bryan E. Lee	777 Main Street, Suite 3200	Fort Worth, TX 76102
Bryan Hal Ussery	5018 Eunice Hwy.	Hobbs, NM 88240
Bryan M. Wortham	1408 North Kelley	Odessa, TX 79763
Buttram Energies Inc.	2601 NW Expressway #501W	Tulsa, OK 74101
Byrl Harris	P.O.Box 426	Hobbs, NM 88240
C.P. Yadon	C/O Wells Fargo 3301 N. Big Spring Street	Midland TX 79705 432-685-8502
Cara Unpleby Lockett Royalty Trust Comerica Bank- Texas and Stanley L. Lockett, Co-Trustees	403 S. Cheyenne, Suite 800	Tulsa, OK 74103
Carol Ann King	7700 Wedlock Lane	Las Vegas, NV 89129
Carol M. Polhamus	P.O. Box 519	Port Angeles, WA 98362
Carole Lynn Luck	P.O. Box 186	Hobbs, NM 88241
Catherine Cusack	2223 Pajarito SW	Albuquerque, NM 87105
Catherine T. Vennes	55 Elm Street	Hartsford, CT 06104
Catherine Weinaug	8211 Katy Freeway, #32	Houston, TX
Cathie Auvenshire	P.O. Box 507	Dripping Springs, TX 78620
CEC Trust f/b/o James Patrick Corrigan	3809 Shenandoah Street	Dallas, TX 75205
Cecil P. Bordages II	213 Redbay Rd.	Elgin, SC 29405
Charldee Cochran Sparks & Rudolph	1216 Landsun Circle 1205 W. Orchard Lane	Carlsbad, NM 88220-4012 Carlsbad, NM 88220-4650 575-885-4494
Charles & Beverly Overton trustees of the Charles & Beverly Overton Revocable Trust	P. O. Box 32	Yeso, NM 88136
Charles F. Doornbos trustee of the Charles F. Doornbos Revocable Trust	P.O. Box 639	Bartlesville, OK 74005
Charles Tyson Smith, II	c/o Nowery J. Smith 16420 Park Ten Place, Suite 415	Houston, TX 77084 281-579-8480
Chesapeake Energy Corp.	6100 N. Western Ave.	Oklahoma City, OK 73118
Chesapeake Expl. Ltd. Ptsp.	6100 N. Western Ave.	Oklahoma City, OK 73118
Chevron Oil & Gas Company	P.O. Box 1722	Tulsa, OK 74101
Chevron USA, Inc.	11111 South Wilcrest	Houston, TX 77099
Chevron USA, Inc.	15 Smith Road	Midland, TX 79705
Chevron USA, Inc.	P.O. Box 1635	Houston, TX 77251
Christopher Cusack	2114 Holmby	Los Angeles, CA 90025
City of Hobbs	200 E. Broadway	Hobbs, NM 88240
Clara B. Scallon	1404 East 14th	Pueblo, CO 81001
Clara S. McKim	c/o Ray McKim P.O. Box 2356	Midland, TX 79702
Clarke C. Coll	P.O. Box 1818	Roswell, NM 88202-1818
Clay Burkhart	P.O. Box 1888	Hobbs, NM 88240
Clay Cooper	P.O. Box 117	Canyon, TX 79015
Cleroy, Inc.	601 South Boulder Avenue	Tulsa, OK 74119
CLEROY, Inc.	P.O. Box 3403	Tulsa, OK 74101
Clifford Cone	P.O. Drawer 1629	Lovington, NM 88260
Clinton H. Dean, Jr.	4212 O'Keefe Drive	El Paso, TX 79902

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Clodette Maner, as Guardian of the Estate of Haley Lowe	3424 61st Street	Lubbock, TX 79413
Coats Energy Int. LTD	P.O. Box 171717	San Antonio, TX 78217
Cochran Family Trust	PO Box 145	Hobbs, NM 88241
Commissioner of Public Lands - State Land Office	P.O. Box 1148	Santa Fe, NM 87504-1148
Connie C. Hinman	1833 Devondale Circle	Charlestonm WV 25314
Conoco-Phillips	3300 North "A" Street, Building 6	Midland, TX 79705
ConocoPhillips Company	P.O. Box 2197	Houston, TX 77252
Coombs, M R	1015 N Dal Paso	Hobbs, NM 88240
Corrigan Southern Land & Cattle	8117 Preston Road, Suite 610	Dallas, TX 75225
Courtney Holt Cowden Jr.	P.O. Box 950	Midland, TX 79702
Coy S. Lowe	3301 42nd Street	Lubbock, TX 79413
Craig Cusack	P.O. Box 250	Roswell, NM 88202
CRJ Resources, LLC	5908 Los Hermanos Court NE	Albuquerque, NM 87111
Cross Timbers Oil Company, LP	810 Houston Street, Suite 2000	Forth Worth, TX 76102
Cusack Family Revocable Living Trust	P.O. Box 25	Willow City, TX 78675
Cyndy Grace St. Clair	Route 1, Box 145C	Waurika, OK 73537
Cynthia A. Thompson	350 Pleasant Drive SE	Cedar Rapids, IA 52403
Cynthis S. Gregg	P.O. Box 724	Sundown, TX 75372
D.C. Well Service	P.O.Box 1449	Denver City, TX 79323
Dalco Oil Company	C/O Hunt Oil Co. 1900 N. Akard Street	Dallas, TX 75201-2300 214-978-8000
Daniel L. Viers	1209 W. Cuthbert	Midland, TX 79701
David B. Talbot, III	1309 East Street	Graham, TX 76046
David Carl Ganz, Jr.; Cathey Ganz Johnsen	87 Crestwood Blvd.	Farmington, NM 11735
David Fred Carr	6401 Mount Ada Road #143	San Diego, CA 92111
DC Energy LLC	105 Oscar Lane	Dallas, GA 30132
DCP Midstream LP	5718 Westheimer Suite 1900	Houston, TX 77057
Debra D. Dye	P.O. Box 834	LaPorte, TX 77572
Debra Lowe Finn	1500 Broadway, Suite 1230	Lubbock, TX 79401
Del-Lea, Inc.	P.O. Box 1889	Hobbs, NM 88240
Denise Lowe	3424 61st Street	Lubbock, TX 79413
Dennis Cox	422 East Main	Hobbs, NM 88240
Devon Energy Corp.	20 N. Broadway, Suite 1500	Oklahoma City, OK 731102
Dianna Beatty Dugger	2407 Latinada Court	Carlsbad, CA 92009-9133
Dinah Gemelle	16117 136th Ave.	Gig Harbor, WA 98329
Donald A. Turner	4201 Monty Dr.	Midland, TX 79703
Donald H. Greer	P.O. Box 256	Center Point, TX 78010-0256 830-634-7126
Doris Rollins Daugherty	408 Kilpatrick Court	Lexington, KY 40511-1624 859-293-1254
Douglas C. Koch	P.O. Box 540244	Houston, TX 77254
Douglas L. Cone	P.O. Box 64244	Lubbock, TX 79413
Dr. Donna F. Adams	406 West Main Street	Dennison, TX 75020
Dr. Roy Camp	24 Woodlands	Enid, OK 73701

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
E.A. Beck, Jr.	1223 Sheridan	Corona, CA
Edna Louise Miller	1106 Cincinnati	El Paso, TX 79902
Edward Allen Dunbar	P.O. Box 883	Rocksprings, TX 78880
EG Energy LLC	9204 Cherokee Lane	Leawood, KS 66206
Elaine M. Walker & William C.	P.O. Box 11222	Wichita, KS 67211
Eleanor Christie Corrigan	3809 Shenandoah Street	Dallas, TX 75205
Elizabeth Blosser	1601 Fernwood Drive	Oakland, CA 94611
Elizabeth T. Barry	151 Thompson Drive SE	Cedar Rapids, IA 52403
Elwyn Ward White	P.O. Box 918	Greemville, Miss 38702
Enterprise Crude Oil LLC	POBox 4018	Houston, TX 77210
Eric J. Coll	P.O. Box 1818	Roswell, NM 88202-1818
Erma Hoffman	1628 41st Avenue E	Seattle, WA 98112
Ernest B. Alexander	P.O. Box 482	Marysville, MO 64468
Ernest H. Byers, Jr. & Ruth McKissack Byers	8805 Royal Harbor Court	Fort Worth, TX 76179
Estate Hilton Sayle	38 South Dearborn Street, Suite 777	Chicago, IL 60603
Estate John P. Cusack, Jr.	P.O. Box 250	Roswell, NM 88202
Estate Mona Sayle	38 South Dearborn Street, Suite 777	Chicago, IL 60603
Estate of Clara Wright Tedrick Hal Ussery, Personal Rep.	5018 Eunice Hwy.	Hobbs, NM 88240
Estate of Ruth O. Snowden Roy E. Brooks, Pers. Rep.	3404 Purdue Place NE	Albuquerque, NM 87106
Etz Oil Properties, LTD.	P.O. Box 1992	Roswell, NM 88201
Evrett R. Newby	c/o Brian Newby 715 Jones Street, Apt. 201	Fort Worth, TX 76102-5474 817-439-0707
ExxonMobil Corp.	P.O. Box 2305	Houston, TX 77252-2305
Fairway Oil & Gas Company	P.O. Box 1747	Midland, TX 79702
Farley Ranch Lowe Family Partnership LTD	308 Comet	Austin, TX 78734
Featherstone Development Corp.	P.O. Box 429	Roswell, NM 88202
Fernand Robidoux	97 Hanover Avenue	Pawtucket, RI 02861
Finley Production Company LP	1308 Lake Street	Fort Worth, TX 76102
First Baptist Church of Forrest City	507 N. Rosser	Forrest City, AR 76335
First Roswell Company	P.O. Box 1797 111 S. Kentucky	Roswell, NM 88202-1797 575-623-8331
Forest Oil Corp.	3838 North Causeway Blvd., Suite 2300	Metairie, LA 70002
Frank J. Redfern	P.O. Box 50890	Midland, TX 79710
Gabrielle Goust Young	4448 South Shore Drive	Anacortes, WA 98221
Gail Allen Emory	2683 West Ivanhoe Street	Chandler, AZ 85524
Gary J. Lamb	P.O. Box 3383	Midland, TX 79702
Gary L. Finch, Jr.	P.O. Box 12	Stowell, TX 77661
Gary Phillips	777 Main Street, Suite 3200	Fort Worth, TX 76102
Gene C. & Vikki L. Jameson	987 Island Drive	Somerset, WI 54025
George H. Etz, Jr., trustee of the George H. Etz, Sr. Trust	2003 17th Street	Lubbock, TX 79401
George K. Avera	8648 La Gente	El Paso, TX 79907

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
George Wesley Weir	6 Hope Road	Eaton Town, NJ 07724
Glenna Warren	419 East Dunham	Hobbs, NM 88240
Gordon Nees, III	P.O. Box 119	Graham, TX 76046
Grassland Energy LP	1308 Lake Street	Fort Worth, TX 76102
Green River Resources, Inc.	302 Summit Ridge	Leander, TX 78645
Greg & Nancy Vance Family LP, c/o Production Gathering Company	8080 N. Central Expressway	Dallas, TX 75206
Greg Mauzy trustee of the MGM Oil & Gas Co.	P.O. Box 891	Midland, TX 79702
H. Corrigan, III	3809 Shenandoah Street	Dallas, TX 75205
H. Edison Ellis, Jr.	P.O. Box 6700707	Dallas, TX 75367
H.B. Fuqua	210 Pack Saddle Trail	Fort Worth, TX 76108-4268 817-246-8066
H.R. Stasney & Sons, LTD	P.O. Box 3190	Albany, TX 76430
HAG Partnership	7311 Creek Bluff Drive	Austin, TX 78750
Haoho, LTD	P.O. Box 1747	Midland, TX 79702
Harold E. Burke	6777 Camp Bowie, Suite 215	Forth Worth, TX 76116
Harvard Energy Partners Ltd.	c/o Andy Grooms P.O. Box 936	Roswell, NM 88202
Harvey Lee Johnson	3917 Radcliff	Abilene, TX 79603
Hazel Lewelling	702 West Avenue	Levelland, TX 79336
Helen Learmont Bedford Family Trust Edwin L. Bedford, Trustee	P.O. Box 2047	Newport, OR 97365
Helm Energy, LLC	1775 Sherman Street, Suite 1955	Denver, CO 80203
Henry C. Parsons, Sr. & Katherine	Proctor Star Route	Williamsport, PA 17701
Herring's Carter Minerals, LLC	P.O. Box 2036	Roswell, NM 88202
Hickory Timbers LTD	810 Houston Street, Suite 2000	Fort Worth, TX 76102
HNL Royalty Company	P.O. Box 51311	Midland, TX 79710
Hobbs Oil Syndicate	P.O. Box 2980 MC-3-TR	Milwaukee, WI 53201
Hugh A. Thompson	6301 Colony Way 1-A	Edina, MN 55435
Hugh Corrigan III	2 Live Oak Dr.	Midland, TX 79705
Hugh Daniel Corrigan	3809 Shenandoah Street	Dallas, TX 75205
Isaacs Family LP	5 Inverness Srive East	Englewood, CO 80112
J. Cleo Thompson & J.Cleo Thompson Jr. LP	325 North St. Paul, Suite 4300	Dallas, TX 75201
J. Pat Corrigan Family Ltd. Ptsp.	7150 20th St., Suite E	Vero Beach, FL 32966
J. R. McGinley, Jr., trustee of the J.R. McGinley, Jr.Revocable Trust dated 1/2/1990	P.O. Box 769	Tulsa, OK 74101
J.H. Herd	P.O. Box 130	Midland, TX 79702
J.M. White	HC 74, Box 503	Graham, TX 76450
J.R. McGinley, Jr. Revocable Trust	P.O. Box 769	Tulsa, OK 74101
Jacqueline Gousy Beattie	200 Old River Road, Apt. 14	Lincoln, RI 02865
James B. Thomas	3304 Centenary	Dallas, TX 75225
James E. Byers & Mattie N. Byers trustee of the James E. Byers & Mattie N. Byers Revocable Living Trust	929 Lawnview Lane	Franklin, TN 37064
James H.Wilkes	777 Main Street, Suite 3200	Fort Worth, TX 76102

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Janetta J. Brown	P.O. Box 482	Marysville, MO 64468
Jayson Lee Ussery	5018 Eunice Hwy.	Hobbs, NM 88240
JCJ Investments, LLC	P.O. Box 1048	Pentwater, MI 49449
Jerry N. Namy	777 Main Street, Suite 3200	Fort Worth, TX 76102
Jim Allen	620 East 23rd	San Angelo, TX 76904
Jim R.Williams	905 West Pine Court	Midland, TX 79705
Jimmie Charles Weir	P.O. Box 777	Jal, NM 88252
JM Bryan Oil LLC	P.O. Box 839	Graham, TX 76450
Joan Miller Ganz & John William Lytle, Jr. co-trustees u/w/o Mary Duke Pearlbrook & Ida Miller	P.O. Box 65	Farmington, NY 11735
Joe Gieb, III	P.O. Box 2434	Midland, TX 79702
John C. Alexander & Diane Alexander 1998 Family Trust u/a 4/21/98	509 Camino Cortez	Yuba City, CA 95911
John H. Hendrix Corp.	P.O. Box 3040	Midland, TX 79702
John Hays Hammonds, Jr.	2618 Cheverny Drive	McKinney, TX 75070-4745 972-529-2678
John J. Redfern, III	P.O. Box 50890	Midland, TX 79710
John P. Cusack, III	19945 Kirk Avenue	Eagle River, AK 99573
John R. Bryant	911 Silver	Hobbs, NM 88240
John Thompson	6209 Minesal Point Road	Madison, WI 53705
John W. Crotty	18064 Shore Dr.	Flint, TX 75762
Johnny W. Finch	303 Stephanie	Kerrville, TX 78028
Jon F.Coll, II	P.O. Box 1818	Roswell, NM 88202-1818
Jon M. Morgan	P.O. Box 1015	Midland, TX 79702
Joy F. Davis & Larry C. Davis	Box 53	Hobbs, NM 88240
Judith O. McGinn	777 Main Street, Suite 3200	Fort Worth, TX 76102
Judith O. McGinn	777 Main Street, Suite 3200	Fort Worth, TX 76102
Karen Cusack Limas	P.O. Box 46138	Rio Rancho, NM 87174-6138
Karen Keith Tindell	1004 Ridgeview	Carrollton, TX 75007
Katherine Cecelia Grief	315 Jefferson Ave.	Indianapolis, IN 46201-3141
Kay Lowe Hughes	3914 54th Street	Lubbock, TX 79412
Kay Salem, as Guardiab of Lauren Lowe	4513 13th Street	Lubbock, TX 79416
Keith W.Davis	777 Main Street, Suite 3200	Fort Worth, TX 76102
Kenneth C. Leach & Judith Diane Duff Leach co-trustees of the Duff-Leach Family Trust	4015 Altamonk NE	Albuquerque, NM 87110
Kenneth D. McPeters	P.O. Box 1860	Hobbs, NM 88240
Kenneth G. Cone	P.O. Box 11310	Midland, TX 79702
Kirby D. Schenck	P.O.Box 1627	Lovington,NM 88260
Kirby Minerals LC, c/o Minerals Aqquisition Partners, Inc. GP	100 Park Avenue, Suite 1008	Oklahoma City, OK 73102
Knackwurst Properties	P.O. Box 10484	Midland, TX 79702
Kyle L. Stallings	P.O. Box 10217	Midland, TX 79702
Landmark Mineral Corp.	300 Paseo De Peralta, Suite 100	Santa Fe, NM 87501
Landreth Company Stockholders	P.O. Box 277120	Atlanta, GA 30384
Lanroy, Inc.	20 East 5th Street	Tulsa, OK 74103

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Larry K. Lowe	2313 Broadway	Lubbock, TX 79401
Larry O. Hulsey	P.O. Box 1143	Graham, TX 76046
Larry Threadgill	1210 Sellman	Hobbs, NM 88240
Lasca, Inc.	500 Throckmorton Street	Fort Worth, TX 76102-3708
Lavon Johnson c/o Leonard Johnson	3666 Janice Lane	Abilene, TX 79603
LaWayne E. Jones, Mary LuAnn Walker, Kalkman Habeck Co., Enertree LLC, Carkel Energy, Dail C. West LP, H.w. Allen Co.,Frank Dale C/O JWK Minerals Mangement	P.O. Box 1169	Duncan, OK 73534
Lawson Petroleum Company	2100 Philtower Building	Tulsa, OK 74103
LDL Lowe Family Partnership LTD	308 Comet	Austin, TX 78734
Legacy Reserves Operating, LP	303 West Wall, Suite 1600	Midland, TX 79701
Legacy Reserves Operating, LP	PO Box 5677	Abilene, TX 79608
Leo A. Szczotka	2867 Vista Mariana	Carlsbad, CA 92009-7112
Leonard Ross Johnson	3666 Janice Lane	Abilene, TX 79603
Lewis Oil & Gas Inc.	P.O. Box 80035	Midland, TX 79705
Linda B. Parrish & Linda Ann Parrish Richardson, co-trustees u/w/o M.C. Parrish, Jr.	P.O. Box 525	Willis, TX 77328
Lise Robidoux	30 Wilson Street	Pawtucket, RI 02861
LM Robinson, LLC	P.O. Box 847	Ruidoso, NM 88255
Lois A. Hankamp	5432 Shelley Way	Carmichael, CA 95608
Lois A.LaMar	230 South State Street, Apt. 28	Zeeland, MI 49464
Lola Carpenter	P.O. Box 31073	El Paso, TX
Lonye Wade	Route 4, Box 90-A	Stephenville, TX 76401
Loretta D. Lowe	30040 Royal Mustang Circle	Beorne, TX 78006
Loretta Mary Voss	13 Bellaire Road	Wellesey, MA 02181
Lorrauine S. Black Trust Lorraine S. Black, Trustee	6608 North Western Avenue #262	Oklahoma City, OK 73116
Lyn Kent Jones	547 South Ash	Kermit, TX 79745
M. Dion Lowe	2306 Cypress Point West	Austin, TX 78746
M. Ralph Lowe, Inc.	4600 Post Oak Place, Suite 307	Houston, TX 77027
M.Y. Merchant	P.O. Box 5315	Hobbs, NM 88240
Mack H. Wooldridge	P.O. Box 3217	Albany, TX 76430
Marathon Oil Company	P.O. Box 552	Midland,TX 79702
Margaret D. Wiley	P.O. Box #1	Cape Vincent, NY 13618
Margaret Lewis Lidren	1243 NE 168th Street	Seattle, WA 98115
Margot Stone c/o Roy Lee Cain	Rt. 1 Box 38	Mountainair, NM 87036
Marguerite McKim Kent	2110 Nebraska Street	Pecos, TX 79772-6713 432-586-2937
Marilyn Cone, trustee of the D.C. Cone Trust	P.O. Box 64244	Lubbock, TX 79464
Marion C. Bowers	Route 4 Box 352	Seminole, TX 79360
Marjorie Cone Kastman	P. O. Box 5930	Lubbock, TX 79408
Marjory J. Dye Trust	5331 85th Street	Lubbock, TX 79424
Mark Boner	3728 James Rd.	Memphis, TN 38128

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Mark P Godsey trustee of the Mark P. Godsey Revocable Trust u/t/a 12/22/1994	3701 S. Orange Circle	Broken Arrow, OK 74011-1103 918-249-0915
Marshall & Winston, Inc.	P.O. Box 50880	Midland, TX 79710
Marshall T. Steves trustee of the Galt Trusts	P.O.Box 171312	San Antonio, TX 782217
Martha Lou Hester Beaird & Dan L. Beaird trustees of th Beaird Revocable Trust, c/o Oklahoma Foundation	5121 McKinney Avenue	Dallas, TX 75205
Martha Maki	5942 46th Avenue SW	Seattle, WA 98136
Marx Robidoux	30 Bellevue Avenue	Cumberland, RI 02864
Mary Birdwell	Box 157	Dimmitt, TX
Mary Carol Lay Jackson	81 Deerwoods Lane	Brevard, NC 28712
Mary Lee Saunders	210 Calhoun Street	Cuero, TX 77954-4719 361-275-6315
Mary Matthews	1239 Stillwell	Wichita, KS 67213
Mary Worthington & Joe	715 Grant Avenue	Dimmitt, TX
Max W. Coll, III	7625-2 El Centro Blvd.	Las Cruces, NM 88012
McCaw & Nix c/o William J. McCaw	P.O. Box 376	Artesia, NM 88211
Melanie Coll DeTempe	5653 Tobias Avenue	Van Nuys, CA 91411
Metcalfe Oil, LP	1308 Lake Street	Fort Worth, TX 76102
Michael C. Dean	6006 Balcones #32	El Paso, TX 79912
Michael E. Chapman	777 Main Street, Suite 3200	Fort Worth, TX 76102
Michael F. Cusack, II	6003 Valkeith	Houston, TX 77096
Michael F. Gilmer	P.O. Box 384	Columbia, TN 38402
Michael Harrison Moore 2006 Trust Michael Harrison Moore, Trustee	P.O. Box 51570	Midland, TX 79710
Middle Bay Oil Company	115 South Dearborn Street	Mobile, AL 36602
Mildred M. Welch	P.O. Box 4308	Parkersburg, WV 26101
Minnie Mae Dalmont Cartlidge	P.O. Box 14119	Albuquerque, NM
MJK Mineral Partners Ltd.	500 W. Texas Ave., Suite 1230	Midland, TX 79701
Mohammed Yamin Merchant	P.O. Box 5970	Hobbs, NM 88240
Moranco	P.O. Box 1860	Hobbs, NM 88240
Moss M. Kent	907 Shoshoni	Cheyenne, WY 82009
Mrs. M.J. Baker c/o Tedrick Hal Ussery	5018 Eunice Hwy.	Hobbs, NM 88240
Namy Energy, LP	777 Main Street, Suite 3200	Fort Worth, TX 76102
Nancy L. Thompson	320 Pleasant Drive SE	Cedar Rapids, IA 52403
Nell P. Lowe	P.O. Box 53775	Lubbock, TX 79453
Nowery J. Smith	16420 Park Ten Place, Suite 415	Houston, TX 77084 281-579-8480
Odell L. Lowe	P.O. Box 53775	Lubbock, TX 79453
Opal Scallon	1706 Alexander	Pueblo, CO 81001
Optometric Extension Program Foundation, Inc.	1921 East Carnegie Avenue, Suite 3-L	Santa Ana, CA 92705-5510
Orval Dalmont	Route 1, Box 95	McAllister, OK 74501
Overton Energy Investments VI, LLC	4265 San Felipe #800	Houston, TX 77027
P.L.Duncan	P.O. Box 7	Wesley, AR 72773

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Pacific Enterprises Royalty Company	C/O Provident Royalties LLC 15660 N. Dallas Parkway, Ste 700	Dallas, TX 75248-3348 214-580-2252
Panhandle Oil & Gas Inc.	5400 N Grand Blvd., Ste 300	Oklahoma City, Ok 73112-5654 405-948-1560
Pat Bryan, III	P.O. Box 833	Graham, TX 76046
Patricia Ann Barnhart	P.O. Box 482	Marysville, MO 64468
Patricia D. McKnight	2208 Private Road 2545	Quinlan, TX 75474-7853
Patricia Kasch	50 Oakridge	Algona, IA 50511
Patricia Umpleby Royalty Trust Comerica Bank – Texas, Trustee	403 S. Cheyenne, Suite 800	Tulsa, OK 74103
Patrick A. McGinley Revocable Trust	P.O. Box 3126	Tulsa, OK 74101
Patrick Cusack	1837 South Dunsmuir Avenue	Los Angeles, CA 90019
Patterson Drilling Company LP	200 S 10th St,	Richmond, TX 77469
Pauline B.Lowe	317 Atlantic	Austin, TX 78734
Pauline Dunbar Erekson	P.O. Box 264	Rocksprings, TX 78880
Pauline R. Lucas	504 Shadylawn Avenue	Nokomis, FL 34275
Phillip J. Pennington	9239 Rowan Lane	Houston, TX 77036
Phyllis Audrey Hennessee	Route 1 Box 1174	Elkhart, TX 75839
Pogo Producing Company	700 Milam, Suite 3100	Houston, TX 77002
Ponderosa Royalty LLC	P.O. Box 10428	Midland, TX 79702
Preglar Oil Company, LLC	P.O. Box 1722	Tulsa, OK 74101
Preston G. Northrup	C/O Trinity Univeristy 1 trinity Place	San Antonio TX 78212-4674 210-736-7301
Quail Creek Royalty LLC	13831 Quail Pointe Drive	Oklahoma City, OK 73134
Randall R. Fort	P.O. Box 13693	Albuquerque, NM 87192
Randall V. Polhamus	P.O. Box 519	Port Angeles, WA 98362
Ray L. McKim trustee of the Ray & Helen McKim Revocable Trust	P.O. Box 60855	San Angelo, TX 76906
Ray Shonhor	118 Manor Place	Commerce, GA 30530
Realeza Del Spear LP	P.O. Box 1684	Midland, TX 79702
Rebel Oil Company	P.O. Box 1684	Midland, TX 79702-1684 432-683-8420
Rector Oil Ltd.	777 Main Street, Suite 3200	Fort Worth, TX 76102
Richard L. Lutrell	P.O. Box 2421	Midland, TX 79702
Richard Lyons Moore 2006 Trust Richard Lyons Moore, Trustee	1150 N. Carroll Ave.	Southlake, TX 76092
Richard Lyons Moore et al	P. O. Box 94077	Southlake TX 76092
Rio Grande Investment Partners Inc.	P.O. Box 290748	Kerrville, TX 78029
Robert C. Crotty	3521 S. Western	Dallas, TX 75225
Robert G. Polhamus	9321 McCabe	El Paso, TX 79925
Robert Hannifin	P.O. Box 218	Midland, TX 79702
Robert Hooper	P.O. Box 733	Roswell, NM 88202
Robert J. Anderson	31 Skyline Drive	Wellesey, MA 02181
Robert L. Menk	319 7th NW, Suite B	Albuquerque, NM 87102
Robert Martin Moran	P.O. Box 1860	Hobbs, NM 88240

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Robert O. Lane, Individually and Trustee of Virginia Bell Lane Family Trust	13845 Creekside Place	Dallas, TX 75240
Robert R. Dean	6006 Balcones #32	El Paso, TX 79912
Robert S. Kent, Jr.	1901 Horse Wagon Drive	Austin, TX 78754
Robert S. Long Trusts fbo Amanda Susan Barker and Terrance Robert Barker Liberty Bank & Trust Co., Trustee	P.O. Box 25848	Oklahoma City, OK 73125
Robert T. Hartley	P.O. Box 1402	Clovis, NM 88101
Roberts Family Living Trust f/b/o W.V. & Earldeen Roberts	P.O. Box 3636	Midland, TX 79702
Robertson Resources Inc.	P.O. Box 9415	Midland, TX 79708
Rocky Mountain Resources	3310 Dentcrest	Midland, TX 79707
Roger Dale Johnson c/o Leonard Johnson	3666 Janice Lane	Abilene, TX 79603
Roger L. Gousy	1038 Old River Road	Manville, RI
Ronnie Westbrook	P.O. Box 3171	Midland, TX 79702
Ronny P.Lowe	6400 Coors Road, NW	Albuquerque, NM 87120
Rosalind Redfern	C/O Waikiki Minerals, 303 W. Wall	Midland, TX 79701
Rosalind Redfern	P.O. Box 2127	Midland, TX 79702
Roy Barton, Jr.	1919 North Turner Street	Hobbs, NM 88240
Roy E. Brooks etux Connie	3404 Purdue Place NE	Albuquerque, NM 87106
Roy G. Barton & Opal Barton Revocable Trust Roy G. Barton Jr., Trustee	1919 N. Turner	Hobbs, NM 88240
Roy G. Barton, Jr. trustee Roy G.Barton, Sr. & Opal Barton Revocable Trust	P.O. Box 978	Hobbs, NM 88240
Roy Lee Cain Revocable Trust Roy Lee Cain, Trustee Rt. 1 Box 38 Mountainair, NM 87036	Rt. 1 Box 38	Mountainair, NM 87036
Ruth Elizabeth Nordyke	19120 West Melvin	Buckeye, AZ 85326
S.B. Crabtree	702 Sahara Drive	Greenville, TX 75402-4016 903-455-7826
Saber Oil and Gas Ventures LLC	400 W. Ill Ave. #950	Midland, TX 79701-4399
Sabine Royalty Corp.	LBX 840887	Dallas, TX 75284
Saga Petroleum Corp.	415 West Wall, Suite 1900	Midland, TX 79701
Salient Zarvona Energy Fund	4265 San Felipe #800	Houston, TX 77027
Sally Rodgers	152 Arroyo Hondo Road	Santa Fe, NM 87505
Sam Dalmont & Mary Josephine Dalmont	17087 Century Plant Road	Apple Valley, CA 92307
Sam Dalmont, Jr.	8611 West Avenue E-4	Lancaster, CA 93534
Sambaiah Kankala	Medicals Art Building #12	Hobbs,NM 88240
Samuel Edwin Beatty	6531 FM 1488 RD	Magnolia, TX 77354-3266
Scarborough, Steven	411 E Baja	Hobbs, NM 88240
Schumacher Partners II Ltd.	777 Main Street, Suite 3200	Fort Worth, TX 76102

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Scott Johnson c/o Leonard Johnson	3666 Janice Lane	Abilene, TX 79603
Scott Little	1508 Pecan Place	Andrews, TX 79714
Shana Lowe Conine	405 Oak Forrest Circle	Waco, TX 76710
Shane Harvey	P.O. Box 1449	Denver City, TX 79323
Shea Oil & Gas Royalties,LLC	198 Mills Street	Morristown, NJ 07960
Sherry Alexander Morin	P.O. Box 482	Marysville, MO 64468
Shirley Rich	6312 Blue Stem West Road	Oklahoma City, OK 73162
Spindletop Exploration Co., Inc.	P.O. Box 25163	Dallas, TX 75225
Stadium 5 LLC	8117 Preston Road, Suite 520	Dallas, TX 75225
Stanford University	450 Serra Mall	Stanford, CA 94305-2004 650-723-2300
Stephanie Coy Dosher	209 NE Ave. E	Seminole, TX 79360
Steve Cusack	2910 Anna J Drive	Roswell, NM 88201
Stuart A. Umpleby	4007 49th Sr. NW	Washington DC 200166
Stuart A. Umpleby, et al	4141 North Henderson Road	Arlington, VA 22203
Stuart S. Umpleby Marital Trust Comerica Bank – Texas and Cara V. Lockett, Co-Trustees	403 S. Cheyenne, Suite 800	Tulsa, OK 74103
Susan Umpleby Peasner Royalty Tr. Comerica Bank- Texas and Cara U. Lockett, Co-Trustees	403 S. Cheyenne, Suite 800	Tulsa, OK 74103
Synergex Inc.	3750 W. Memorial Rd., Suite 1401	Oklahoma City, OK 73134
Teddy L. Hartley	P.O. Box 309	Clovis, NM 88101
Terrence Scott Blankenship	2109 County Road 301 S	Dayton, TX 77535-3943 281-659-9295
The Allar Company	P.O. Box 630	Graham, TX 76046
The Cochran Trust, c/o D. A.Cochran	P.O. Box 145	Hobbs, NM 88241
The Long Trusts	118 South Kilgore Street	Kilgore, TX 75663
The Long Trusts	P.O. Box 3069	Kilgore, TX 75663
The University of Oklahoma Foundation, Inc.	100 Timberdell Road	Norman, OK 73019
Tidemark Corporation	6116 North Central Parkway	Dallas, TX
Tierra Oil Company LLC	P.O. Box 700968	San Antonio, TX 78270
Timothy C. Williams	3931 Tall Birch Cove	Memphis, TN 38115
Timothy J. Cusack	P.O. Box 250	Roswell, NM 88202
Tom R. Cone	P.O. Box 400	Southwest City, MO 64863
Tom R. Cone	P.O. Box 778	Jay, OK 74346
Tommy L.Fort	P.O. Box 2044	Midland, TX 79702
Toni H. Beare	189 S. Rembert St.	Memphis, TN 38104
Trilogy Operatong Company	P.O. Box 7606	Midland, TX 79708
Troy D. Blackburn successor trusteeof theBlack Irrevocable Trusts	247 Blackburn Road	Abilene, TX 79602
Ty Johnson	401 W. 18th St., #19	Fort Stockton, TX 79735
V.E. Gourley, III	P.O. Box 572782	Houston, TX 77057
Veja Inc.	6300 NW Grand Blvd.	Oklahoma City, OK 73116
Verna Runnels	48 Hobart, Space #7	Canadian, TX 79014

Other Affected Parties

Name	Street Address/PO Box	City/State/Zip Code
Virginia C. Hinman	2334 Chriswood	Toledo, OH 43617
Vivian Lowe Anseimi	1500 Broadway, Suite 1230	Lubbock, TX 79401
Vora L. Hartley	4915-C 94th Street	Lubbock, TX 79424
W.R. Hill	200 East 37th Street, #3	Odessa, TX 79762
Waikiki Partners, LP	P.O. Box 2127	Midland, TX 79702
Wayne A. Bissett	P.O. Box 2101	Midland, TX 79702
Weslynn McCallister Holway	7350 S. Tamiami Trial, Apt. 229	Sarasota, FL 34231-7004
Wes-Tex Drilling Company	P.O. Box 3739	Abilene, TX 79604
WFM Minerals, LTD	P.O. Box 339	Bridger, Montana 59014
White Star Energy, Inc.	P.O. Box 51108	Midland, TX 79710
Wilbur C. Bradley trustee of the O.E. Bradley Trust	One Main Place, Suite 608	Wichita, KS 67202
Wilda C.Collins	East 431 Dalby Road	Union, WA 98592
William E. Walker trustee of the William E. Walker Living Trust, 7/27/00	P.O.Box 113	Wichita, KS 67201
William F. Pendleton	777 Main Street, Suite 3200	Fort Worth, TX 76102
Windlands Corp.	P.O. Box 591	Midland, TX 79702
Winnie Dalmont Menk	P.O. Box 14110	Albuquerque, NM
Winnie Pearl Hale as trustee of the Hale Family Trust	4007 15th Street	Lubbock, TX 79416
Woodland P. Saunders	8404 Goodnight Trail	Amarillo, TX 79110-5030 806-353-2924
Xeric Oil & Gas Corp.	P.O. Box 51311	Midland, TX 79710
XTO Energy Inc.	810 Houston St., Suite 2000	Fort Worth, TX 76102
ZPZ Delaware I LLC	2000 Post Oak Blvd., Suite 100	Houston, TX 77056
ZPZ Delaware I LLC	P.O. Box 840133	Dallas, TX 75284

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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery informa — **MHF/OXY** — E

OFF

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO B
City, Sta

A. June Hardy
2733 North Rojo
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2329

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

For delivery information vis — **MHF/OXY**

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO B
City, Sta

A.G. Troutt
6011 Moon St. NE, Apt. 1312
Albuquerque, NM 87111-1453

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 2336

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

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

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

Acme Land Co.
P.O. Box 10280
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Acme Land Co.
P.O. Box 10280
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Hannah Doshier ☐ Agent ☐ Addressee

B. Received by (Printed Name) Hannah Doshier C. Date of Delivery 4/29/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2336

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2343

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. 1 or PO Box N
City, State, Z

Albert D. & Deborah Hobbs
1321 West Dogwood
Lovington, NM 88260

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Albert D. & Deborah Hobbs
1321 West Dogwood
Lovington, NM 88260

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/26/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service 7006 0100 0005 5770 2343

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2350

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Provided)

For delivery information vis

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VALLICAS POST OFFICE
USPS SANTA FE, NM
APR 19 2013
Postmark Here

Sent To
Street, Ap or PO Box
City, State

Alden Obering O'Brien,
c/o Warrior Oil Company
1580 Lincoln Street, Suite 920
Denver, CO 80203

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2367

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VALLICAS POST OFFICE
USPS SANTA FE, NM
Postmark Here
APR 19 2013

Sent To
Street, Ap or PO Box
City, State

Alice M.Smith
115 Thompson Drive SE
Cedar Rapids, IA 52403

PS Form — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alice M.Smith
115 Thompson Drive SE
Cedar Rapids, IA 52403

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Alice T. Smith — ☐ Agent ☒ Addressee

B. Received by (Printed Name): ALICE SMITH — C. Date of Delivery: 4/22/13

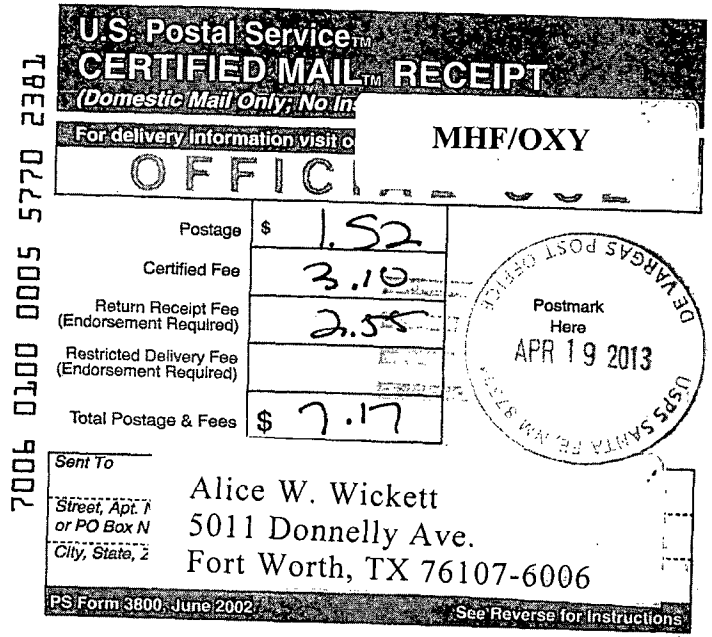
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

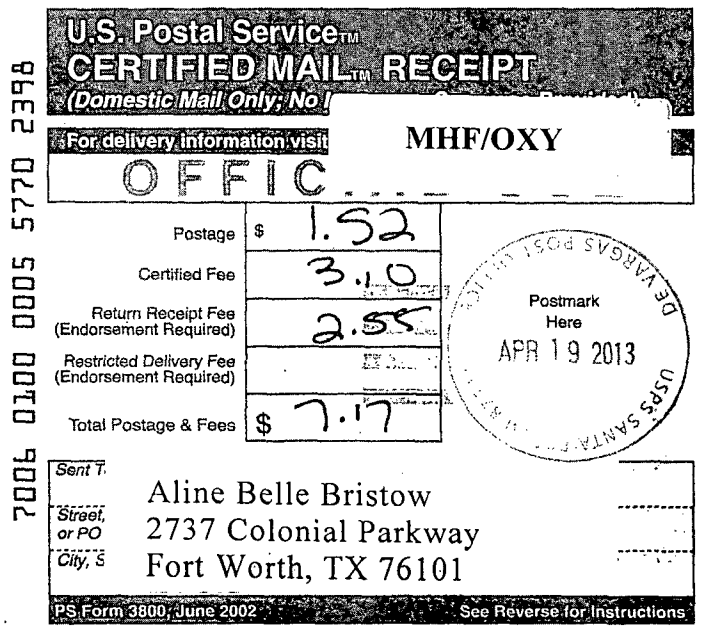
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5770 2367

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540


7006 0100 0005 5770 2381
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In
For delivery information visit o
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Sent To
Street, Apt. N
or PO Box N
City, State, Z
Alice W. Wickett
5011 Donnelly Ave.
Fort Worth, TX 76107-6006
PS Form 3800, June 2002
See Reverse for Instructions


7006 0100 0005 5770 2398
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I
For delivery information visit
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Sent T
Street, or PO
City, S
Aline Belle Bristow
2737 Colonial Parkway
Fort Worth, TX 76101
PS Form 3800, June 2002
See Reverse for Instructions

Returned

7006 0100 0005 5770 2404

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here

Sent T
Street, or PO
City, St

Allen W. Ralston
P.O. Box 1737
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 2411

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here

Sent To
Street, Apt. or PO Box
City, State,

Alta Ann Garrison
29522 Warmsprings Drive
Menifee, CA 92584

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alta Ann Garrison
29522 Warmsprings Drive
Menifee, CA 92584

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Alta King ☐ Agent ☒ Addressee

B. Received by (Printed Name) Alta King
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5770 2411

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2428

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

APR 19 2013

USPS SANTA FE, NM

Sent To

Street, Ap
or PO Bo
City, Stat

American Minerals Corp
1331 Lamar Street, Ste. 900
Houston, TX 77010-3025

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2435

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

APR 19 2013

USPS SANTA

Sent T

Street,
or PO
City, S

AmeriTrust, N.A. as trustee
Jennette Clift George
P.O. Box 3285
Houston, TX 77253

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2442

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

MHF/OXY

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO Box
City, State,

Anderson Carter
P.O. Box 998
Las Cruces,NM 88004

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Anderson Carter
P.O. Box 998
Las Cruces,NM 88004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Judy Carter C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 29 2013
USPS LAS CRUCES NM 880059998 POST OFFICE CLERK #7

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2442

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2459

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

MHF/OXY

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO Box
City, State,

Andrews Oil & Gas Partnership
14 South Court
Port Washington, NY 11050

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2466

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM 87

Sent To
Angela Jo Alexander
Street, Apt. No., or PO Box No. P.O. Box 482
City, State, ZIP+4 Marysville, MO 64468

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Angela Jo Alexander
P.O. Box 482
Marysville, MO 64468

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Bryan Alexander ☒ Agent ☐ Addressee

B. Received by (Printed Name) Bryan Alexander
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2466

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2473

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM 87

Sent To
Ann M. Barber
Street, Apt. No., or PO Box No. 2218 Poplar Park Drive
City, State, ZIP+4 Kingwood, TX 77339-1756

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ann M. Barber
2218 Poplar Park Drive
Kingwood, TX 77339-1756

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Ann Barber ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ann Barber
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2473

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2480

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box I
City, State,

Apollo Energy, Inc.
P.O. Box 5315
Hobbs, NM 88241

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 2497

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 20

Sent To
Street, Apt. or PO Box N
City, State,

Archbishiphoric of New York
P.O. Box 470425
Fort Worth, TX 76147

PS Form 3800, June 2002 See Reverse for Instructions

SE

- Co
item
- Print y
so that w
- Attach this
or on the front if space permits.

1. Article Addressed to:

Archbishiphoric of New York
P.O. Box 470425
Fort Worth, TX 76147

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2497

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2503

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent To
Armstrong Royalties LLC
Street, Apt. No., or PO Box No.
1561 N. Dallas Parkway, #900
City, State, ZIP+4
Addison, TX 75001

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Armstrong Royalties LLC
1561 N. Dallas Parkway, #900
15607
Addison, TX 75001

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Latreacia Mays ☐ Agent ☑ Addressee

B. Received by (Printed Name) Latreacia Mays C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2503

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2374

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

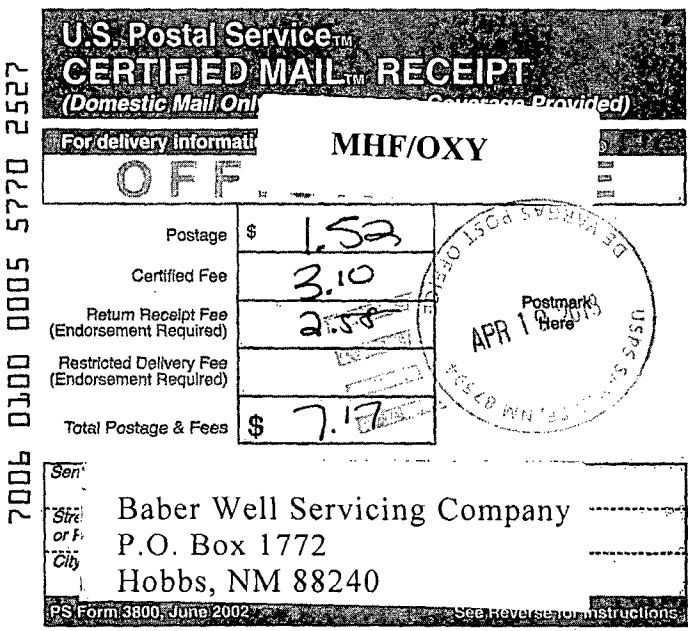
Sent To
Arnold Divine
Street, Apt. No., or PO Box No.
1500 American National Bank Building
City, State, ZIP+4
St. Paul, MN 55101

PS Form 3800, June 2002 See Reverse for Instructions

Returned


7006 0100 0005 5770 2510
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;
For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
Sent To
Ashland Exploration Inc.
P.O. Box 218330
Houston, TX 77218
PS Form 3800, June 2002
See Reverse for Instructions

Returned


7006 0100 0005 5770 2527
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only
For delivery informati
MHF/OXY
OFF
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 1
Baber Well Servicing Company
P.O. Box 1772
Hobbs, NM 88240
PS Form 3800, June 2002
See Reverse for Instructions

7006 0100 0005 5770 2534

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 DE VARGAS POST OFFICE USPS SANTA FE, NM

Sent To: Bandera Minerals LLC;
Street, Apt. or PO Box: Bandera Minerals I LLC;
City, State: Bandera Minerals II LLC
P.O. Box 701228
Tulsa, OK 74170

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bandera Minerals LLC;
Bandera Minerals I LLC;
Bandera Minerals II LLC
P.O. Box 701228
Tulsa, OK 74170

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X C. Hummel ☐ Agent ☐ Addressee

B. Received by (Printed Name): C. Hummel — C. Date of Delivery:

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

JENKINS TULSA OK 74136 MAY 1 2013 USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2534

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2541

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com: MHF/OXY
OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 DE VARGAS POST OFFICE USPS SANTA FE, NM

Sent To: Bank of America, N.A. & Jeffery W.
Street, Apt. or PO Box: Foltz as co-trustee of the Allie Gayle
City, State: Davison Trust #2
P.O. Box 830308
Dallas, TX 75283

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bank of America, N.A. & Jeffery W.
Foltz as co-trustee of the Allie Gayle
Davison Trust #2
P.O. Box 830308
Dallas, TX 75283

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name): — C. Date of Delivery: APR 22 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2541

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2558

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit ou

MHF/OXY

OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 9 2013

Sent T
Street, or PO
City, S

Barbara Christman Farrell
224 Providence Road
Duck Hill, MS 38925-9301

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0561

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here

Sent To
Street, or PO E
City, St

Barbara J. DeVoss Junker
2929 East 6th Street, Apt. 140
Tucson, AZ 85716

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0578

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 2013
USPS SANTA FE
DE VARGAS POST OFFICE

Sent To
Barron Properties
Street, A or PO Bo
P.O. Box 182
City, Sta
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Barron Properties
P.O. Box 182
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mendy Standridge ☐ Agent ☐ Addressee

B. Received by (Printed Name) Mendy Standridge
C. Date of Delivery 4-25-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se) 7006 0100 0005 5770 0578

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0585

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only

For delivery informatio

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE
DE VARGAS

Sent To
BDT Oil & Gas LP
Street, Ap or PO Bo
1308 Lake Street
City, State
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BDT Oil & Gas LP
1308 Lake Street
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sperla Todd ☐ Agent ☐ Addressee

B. Received by (Printed Name) Sperla Todd
C. Date of Delivery 4/25

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numl (Transfer fro) 7006 0100 0005 5770 0585

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0592

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To: Berry Lee Hobbs, Jr. &
Street, or PO B: Linda Sue
City, St: 1546 5th Avenue SW
Rochester, MN 55902

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Berry Lee Hobbs, Jr. &
Linda Sue
1546 5th Avenue SW
Rochester, MN 55902

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Berry Hobbs ☐ Agent ☐ Addressee

B. Received by (Printed Name): Berry Hobbs C. Date of Delivery: 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from ser): 7006 0100 0005 5770 0592

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0608

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information: MHF/OXY

OFFI

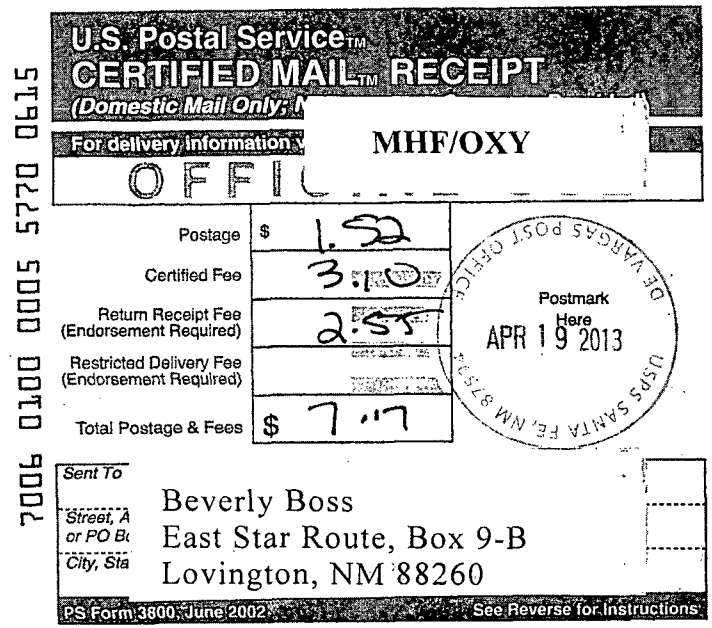
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

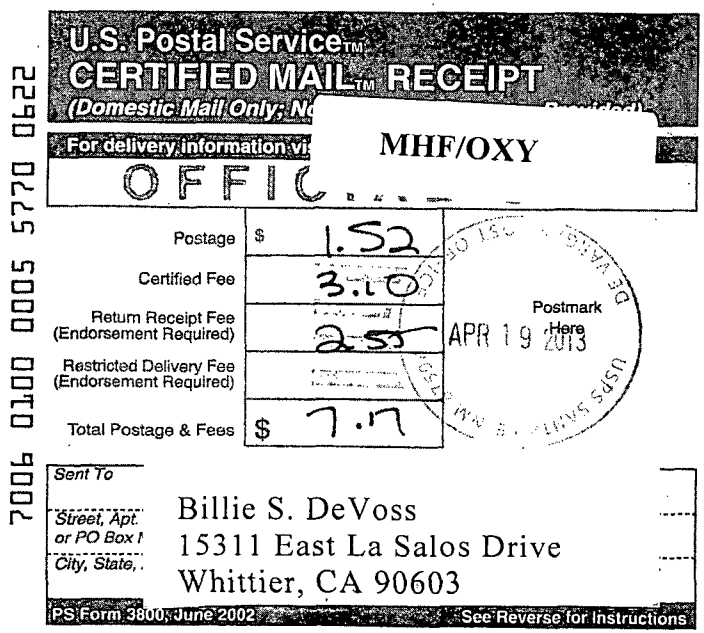
Sent To: Betty J. Talley
Street, or PO I: 926 Railhead Drive
City, St: Ada, OK 74820

PS Form 3800, June 2002 — See Reverse for Instructions

Returned


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE
Sent To
Street, A
or PO B
City, Sta
Beverly Boss
East Star Route, Box 9-B
Lovington, NM 88260
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5770 0615

Returned


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
Sent To
Street, Apt.
or PO Box
City, State,
Billie S. DeVoss
15311 East La Salos Drive
Whittier, CA 90603
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5770 0622

7006 0100 0005 5770 0639

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For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Billy Glenn Spradlin
Street, A or PO Bo
29 Rim Road
City, Stat
Kilgore, TX 75662

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Billy Glenn Spradlin
29 Rim Road
Kilgore, TX 75662

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 4/22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0639

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0653

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible] Coverage Provided)

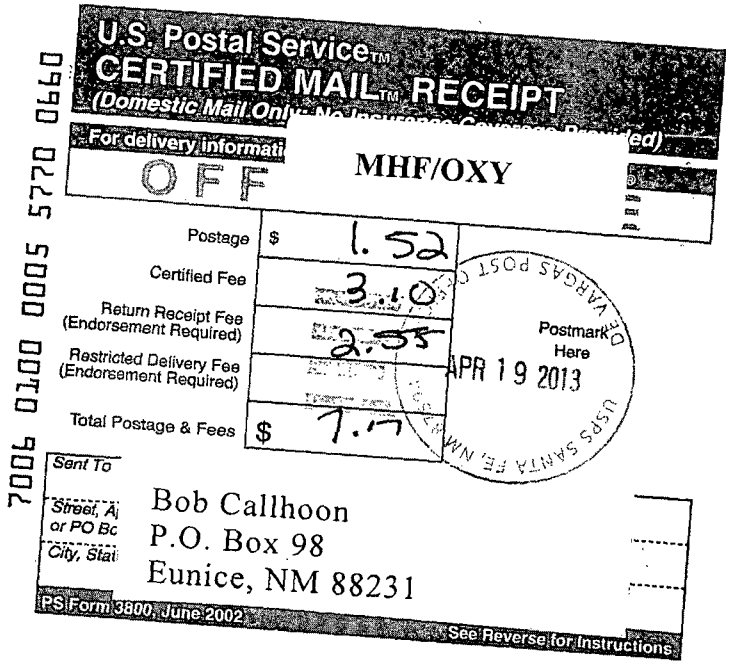
For delivery information v MHF/OXY
OFFI(

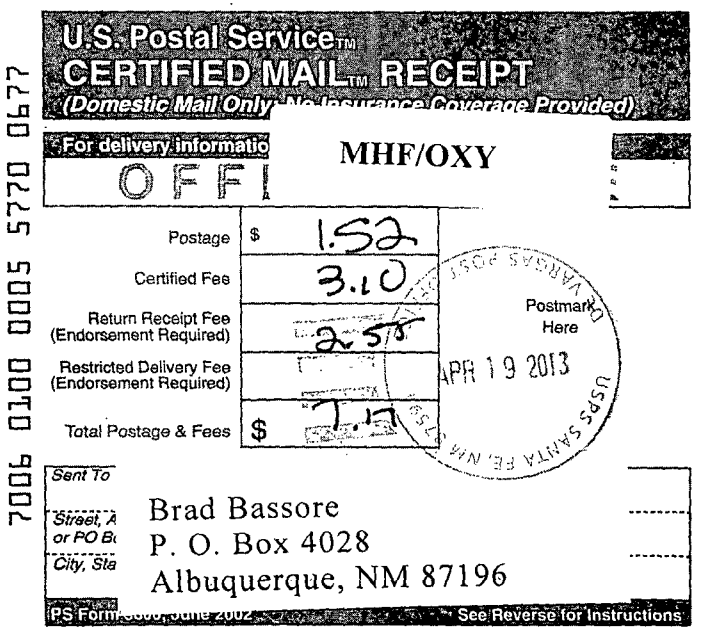
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
BMCM Partnership, LP
Street, A or PO B
5661 South Crestbrook Drive
City, Sta
Morrison, CO 80465

PS Form 3800, June 2002 See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery informati
OFF
MHF/OXY
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
USPS SANTA FE, NM
VARGAS POST
Sent To
Street, Ap or PO Bo
City, Stat
Bob Callhoon
P.O. Box 98
Eunice, NM 88231
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5770 0660


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery informatio
OFFI
MHF/OXY
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
USPS SANTA FE, NM
VARGAS POST
Sent To
Street, A
or PO Bo
City, Sta
Brad Bassore
P. O. Box 4028
Albuquerque, NM 87196
See Reverse for Instructions
7006 0100 0005 5770 0677

7006 0100 0005 5770 0684

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; I

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, A
or PO B
City, Sta

Bradley McInroe d/b/a Big Al
Oil & Gas
P.O. Box 669
Levelland, TX 79336

PS Form [illegible], June 2002 [illegible] Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bradley McInroe d/b/a Big Al
Oil & Gas
P.O. Box 669
Levelland, TX 79336

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Charle Abbott
☐ 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

UNITED STATES POSTAL SERVICE
APR 22 2013
LEVELLAND, TX 79336

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 0684

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0691

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, A
or PO B
City, Sta

Bradley Nominee Corp.
P.O. Box 1938
Palm City, FL 24990

Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0707

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent To
Bryan E. Lee
Street, Apt. or PO Box
777 Main Street, Suite 3200
City, State
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bryan E. Lee
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) W. Westmoreland
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0707

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0714

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent To
Bryan Hal Ussery
Street, Apt. or PO Box
5018 Eunice Hwy.
City, State
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bryan Hal Ussery
5018 Eunice Hwy.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Rhonda Ussery
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0714

PS Form 3811, February 2004 Domestic Return Receipt 102595 1540

7006 0100 0005 5770 0721

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, Ap
or PO Box
City, State

Bryan M. Wortham
1408 North Kelley
Odessa, TX 79763

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bryan M. Wortham
1408 North Kelley
Odessa, TX 79763

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ODESSA TX 79761 MAY 2013 USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from s*
7006 0100 0005 5770 0721

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0738

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage P

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
USPS SANTA FE, NM

Sent To
Street, Apt. N
or PO Box N
City, State, Z

Buttram Energies Inc.
2601 NW Expressway #501W
Tulsa, OK 74101

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 0745

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent
Stree
or PC
City,

Byrl Harris
P.O.Box 426
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0752

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street,
or PO B
City, St

C.P. Yadon
C/O Wells Fargo
3301 N. Big Spring Street
Midland TX 79705

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0769

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Cara Unpleby Lockett Royalty Trust
Street, Apt. No.; or PO Box No.
Comerica Bank- Texas and
City, State, ZIP+4
Stanley L. Lockett, Co-Trustees
403 S. Cheyenne, Suite 800
Tulsa, OK 74103

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0776

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Carol Ann King
Street, Apt. No.; or PO Box No.
7700 Wedlock Lane
City, State, ZIP+4
Las Vegas, NV 89129

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0783

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE DEPOT NEW MEXICO

Sent To
Carol M. Polhamus
Street, Apt. No., or PO Box No. P.O. Box 519
City, State, ZIP+4 Port Angeles, WA 98362

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0790

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE POST OFFICE NEW MEXICO

Sent To
Carole Lynn Luck
Street, Apt. No., or PO Box No. P.O. Box 186
City, State, ZIP+4 Hobbs, NM 88241

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0806

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible] Coverage Provided)

For delivery information v[illegible]

OFFI[illegible]

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State,

Catherine Cusack
2223 Pajarito SW
Albuquerque, NM 87105

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 0646

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible] Coverage Provided)

For delivery information v[illegible]

OFFI[illegible]

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here

Sent To
Street, Ap[illegible]
or PO Bo[illegible]
City, Stat[illegible]

Catherine T. Vennes
55 Elm Street
Hartsford, CT 06104

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Catherine T. Vennes
~~55 Elm Street~~
Hartsford, CT ~~06104~~

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) ISAK HAYES C. Date of Delivery APR 22 2013

D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

PO Box 120
06141

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ~~☐ Return Receipt for Merchandise~~
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 0646

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0813

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE
DE VARGAS POST OFFICE

Sent To
Street, A
or PO Bo
City, Sta

Catherine Weinaug
8211 Katy Freeway, #32
Houston, TX 77024

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 0820

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE
DE VARGAS POST OFFICE

Sent To
Street,
or PO
City, St

Cathie Auvenshire
P.O. Box 507
Dripping Springs, TX 78620

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cathie Auvenshire
P.O. Box 507
Dripping Springs, TX 78620

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Bill McDonald C. Date of Delivery 4/30/14

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

DRIPPING SPRINGS POST OFFICE
APR 23 2013

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from ser* 7006 0100 0005 5770 0820

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0837

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87...
DE VARGAS POST STATION

Sent
Stree
or PC
City,

CEC Trust f/b/o James Patrick
Corrigan
3809 Shenandoah Street
Dallas, TX 75205

PS Form 3800, June 2002 ...tructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CEC Trust f/b/o James Patrick
Corrigan
3809 Shenandoah Street
Dallas, TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 4-22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s... 7006 0100 0005 5770 0837

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0844

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N...

For delivery information vi...

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87...
DE VARGAS POST STATION

Sent T
Street,
or PO
City, S

Cecil P. Bordages II
213 Redbay Rd.
Elgin, SC 29405

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cecil P. Bordages II
213 Redbay Rd.
Elgin, SC 29405

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cecil P. Bordages II ☐ Agent ☒ Addressee

B. Received by (Printed Name) Cecil P. Bordages II | C. Date of Delivery 4/22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandis...
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se... 7006 0100 0005 5770 0844

P... 3811, February 2004 Domestic Return Receipt 102595-02-M

7006 0100 0005 5770 0851

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent To
Street, or PO E
City, St

Charldee Cochran Sparks &
Rudolph
1205 W. Orchard Lane
Carlsbad, NM 88220-4650

PS Form 3800, June 2002 uctions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charldee Cochran Sparks &
Rudolph
1205 W. Orchard Lane
Carlsbad, NM 88220-4650

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Keith Sparks | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic) 7006 0100 0005 5770 0851

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0868

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent To
Street, or PO E
City, St

Charldee Cochran Sparks &
Rudolph
1216 Landsun Circle
Carlsbad, NM 88220-4012

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0875

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87504

Sent To: Charles & Beverly Overton trustees
Street, Apt. or PO Box: of the Charles & Beverly Overton Revocable Trust
City, State: P. O. Box 32
Yeso, NM 88136

PS Form 3800, June 2002 ... ctions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charles & Beverly Overton trustees
of the Charles & Beverly Overton
Revocable Trust
P. O. Box 32
Yeso, NM 88136

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Beverly Overton ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser...) 7006 0100 0005 5770 0875

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0882

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi: MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87504

Sent To: Charles F. Doornbos trustee of
Street, Apt. or PO Box: the Charles F. Doornbos Revocable Trust
City, State: P.O. Box 639
Bartlesville, OK 74005

PS Form 3800, June 2002 ... ctions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charles F. Doornbos trustee of
the Charles F. Doornbos
Revocable Trust
P.O. Box 639
Bartlesville, OK 74005

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Debi Brim ☐ Agent ☐ Addressee

B. Received by (Printed Name) Debi Brim | C. Date of Delivery 4-25-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0882

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0899

U.S. Postal Service™
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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS

Sent To
Charles Tyson Smith, II
c/o Nowery J. Smith
Street, Apt. No., or PO Box No. 16420 Park Ten Place, Suite 415
City, State, ZIP+4 Houston, TX 77084

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charles Tyson Smith, II
c/o Nowery J. Smith
16420 Park Ten Place, Suite 415
Houston, TX 77084

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Nowery Smith — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 0899

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0905

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS

Sent To
Chesapeake Energy Corp.
6100 N. Western Ave.
Street, Apt. No., or PO Box No.
City, State, ZIP+4 Oklahoma City, OK 73118

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chesapeake Energy Corp.
6100 N. Western Ave.
Oklahoma City, OK 73118

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X RECEIVED ☐ Agent ☐ Addressee

B. Received by (Printed Name) APR 23 2013 — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
MAILROOM

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 0905

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0912

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 — DE VARGAS POST — USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State

Chesapeake Expl. Ltd. Ptsp.
6100 N. Western Ave.
Oklahoma City, OK 73118

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ■ Print your name and address on the reverse so that we can return the card to you.
- ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chesapeake Expl. Ltd. Ptsp.
6100 N. Western Ave.
Oklahoma City, OK 73118

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x RECEIVED ☐ Agent ☐ Addressee

B. Received by (Printed Name): APR 23 2013
C. Date of Delivery:

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
MAILROOM

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5770 0912

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0929

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 — DE VARGAS POST — USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State

Chevron Oil & Gas Company
P.O. Box 1722
Tulsa, OK 74101

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ■ Print your name and address on the reverse so that we can return the card to you.
- ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron Oil & Gas Company
P.O. Box 1722
Tulsa, OK 74101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x ☐ Agent ☐ Addressee

B. Received by (Printed Name): CW
C. Date of Delivery: 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5770 0929

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0936

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Ap
or PO Bo
City, Stat

Chevron USA, Inc.
11111 South Wilcrest
Houston, TX 77099

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0943

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Apt or PO Box
City, State,

Chevron USA, Inc.
15 Smith Road
Midland, TX 79705

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron USA, Inc.
15 Smith Road
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Chris Lawrence
C. Date of Delivery 4-22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0943

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0950

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 DE VARGAS POST OFFICE USPS SANTA FE, NM 87

Sent To
Street, Apt. or PO Box
City, State

Chevron USA, Inc.
P.O. Box 1635
Houston, TX 77251

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron USA, Inc.
P.O. Box 1635
Houston, TX 77251

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5770 0950

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0967

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 DE VARGAS POST OFFICE USPS SANTA FE, NM 87

Sent To
Street, Apt. or PO Box
City, State

Christopher Cusack
2114 Holmby
Los Angeles, CA 90025

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Christopher Cusack
2114 Holmby
Los Angeles, CA 90025

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] | C. Date of Delivery: 04/19/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5770 0967

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0974

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 875

Sent T
Street or PO
City,

Clara B. Scallon
1404 East 14th
Pueblo, CO 81001

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0981

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent
Stree
or P
City,

Clara S. McKim
c/o Ray McKim
P.O. Box 2356
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clara S. McKim
c/o Ray McKim
P.O. Box 2356
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☒ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4-30-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0981

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0998

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Clarke C. Coll\
Street, Apt. No. or PO Box No.: P.O. Box 1818
City, State, ZIP+4: Roswell, NM 88202-1818

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clarke C. Coll\
P.O. Box 1818
Roswell, NM 88202-1818

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

ROSWELL, NM
APR 23 2013
88201

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 0998

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1001

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Clay Burkhart
Street, Apt. No. or PO Box No.: P.O. Box 1888
City, State, ZIP+4: Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 1018

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins

For delivery information visit o

MHF/OXY

OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST

Sent To
Clay Cooper
Street, /
or PO B
P.O. Box 117
City, Sta
Canyon, TX 79015

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clay Cooper
P.O. Box 117
Canyon, TX 79015

S SECTION ON DELIVERY

A. Signature
X Charles E. Cooper ☐ Agent ☒ Addressee

B. Received by (Printed Name) Charles E. Cooper
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 1018

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1025

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST

Sent To
Cleroy, Inc.
Street, Apt.
or PO Box
601 South Boulder Avenue
City, State,
Tulsa, OK 74119

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cleroy, Inc.
601 South Boulder Avenue
Tulsa, OK 74119

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☒ Agent ☐ Addressee

B. Received by (Printed Name) M W Rich
C. Date of Delivery 4-22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 1025

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1032

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Coverage Provided)

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87594

Sent To
Street, Ap or PO Bo
City, Stat

CLEROY, Inc.
P.O. Box 3403
Tulsa, OK 74101

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CLEROY, Inc.
P.O. Box 3403
Tulsa, OK 74101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[illegible]

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

DOWNTOWN STATION APR 24 2013 74103-USPS

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from serv 7006 0100 0005 5770 1032

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1049

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I[illegible])

For delivery information visit MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87594

Sent To
Street, or PO I
City, St

Clifford Cone
P.O. Drawer 1629
Lovington, NM 88260

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Clinton H. Dean, Jr.
Street, Apt. No., or PO Box No.: 4212 O'Keefe Drive
City, State, ZIP+4: El Paso, TX 79902

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1056

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clinton H. Dean, Jr.
4212 O'Keefe Drive
El Paso, TX 79902

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1056

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.58
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Clodette Maner, as Guardian of
Street, Apt. No., or PO Box No.: the Estate of Haley Lowe
City, State, ZIP+4: 3424 61st Street
Lubbock, TX 79413

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1063

Returned

7006 0100 0005 5770 1070

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
Here
APR 19 2013

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, Apt. or PO Box
City, State,

Coats Energy Int. LTD
P.O. Box 171717
San Antonio, TX 78217

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1087

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
Here
APR 19 2013

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, Ap
or PO Bo
City, Stat

Connie C. Hinman
1833 Devondale Circle
Charlestonm WV 25314

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Connie C. Hinman
1833 Devondale Circle
Charlestonm WV 25314

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Virginia C. Hinman ☐ Agent ☐ Addressee

B. Received by (Printed Name) Virginia C. Hinman
C. Date of Delivery 5-3-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

USPS RECEIVED MAY -3 2013 REYNOLDS CORNERS TOLLEDO

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 1087

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1094

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State,

Conoco-Phillips
3300 North "A" Street,
Building 6
Midland, TX 79705

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Conoco-Phillips
3300 North "A" Street,
Building 6
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R Pratt ☐ Agent ☐ Addressee

B. Received by (Printed Name) R PRATT
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 1094

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1100

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State,

ConocoPhillips Company
P.O. Box 2197
Houston, TX 77252

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1117

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

MHF/OXY

For delivery information vis
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 875
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO Box
City, State,

Corrigan Southern Land & Cattle
8117 Preston Road, Suite 610
Dallas, TX 75225

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Corrigan Southern Land & Cattle
8117 Preston Road, Suite 610
Dallas, TX 75225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X D. Holland ☐ Agent ☐ Addressee

B. Received by (Printed Name) D. Holland
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service)* 7006 0100 0005 5770 1117

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1124

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins

MHF/OXY

For delivery information visit ou
OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87
DE VARGAS POST OFFICE

Sent T
Street, or PO
City, S

Courtney Holt Cowden Jr.
P.O. Box 950
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Courtney Holt Cowden Jr.
P.O. Box 950
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Holt Cowden
C. Date of Delivery 4-19-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service)* 7006 0100 0005 5770 1124

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1131

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No ...

For delivery information vi...

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...
Postmark Here
APR 19 2013

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP.

Coy S. Lowe
3301 42nd Street
Lubbock, TX 79413

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Coy S. Lowe
3301 42nd Street
Lubbock, TX 79413

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lillian Koontz ☐ Agent ☐ Addressee

B. Received by (Printed Name) Lillian Koontz C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

LOVINGTON STA. APR 23 2013 USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi...) 7006 0100 0005 5770 1131

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1148

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N...

For delivery information vi...

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...
Postmark Here
APR 19 2013

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP.

Craig Cusack
P.O. Box 250
Roswell, NM 88202

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Craig Cusack
P.O. Box 250
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) ET Gallegos C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL, NM APR 22 2013 USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s...) 7006 0100 0005 5770 1148

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1155

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

MHF/OXY

For delivery information vi
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Street, Ap
or PO Bo
City, Stat

CRJ Resources, LLC
5908 Los Hermanos Court NE
Albuquerque, NM 87111

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CRJ Resources, LLC
5908 Los Hermanos Court NE
Albuquerque, NM 87111

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) LEE JONES C. Date of Delivery 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi 7006 0100 0005 5770 1155

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1162

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

MHF/OXY

For delivery information v
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Street, A
or PO Bo
City, Sta

Cross Timbers Oil Company, LP
810 Houston Street, Suite 2000
Forth Worth, TX 76102

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cross Timbers Oil Company, LP
810 Houston Street, Suite 2000
Forth Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Kenia Lacy - Brown ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5770 1162

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1179

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 875
DE VARGAS POST OFFICE

Sent To
Street, Ap
or PO Bo
City, Stat

Cusack Family Revocable Living Trust
P.O. Box 25
Willow City, TX 78675

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1186

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;
For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 875
DE VARGAS POST OFFICE

Sent To
Street, Ap
or PO Box
City, Stat

Cyndy Grace St. Clair
Route 1, Box 145C
Waurika, OK 73537

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1193

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Cynthia A. Thompson
Street, Apt. No., or PO Box No.
350 Pleasant Drive SE
City, State, ZIP+4
Cedar Rapids, IA 52403

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cynthia A. Thompson
350 Pleasant Drive SE
Cedar Rapids, IA 52403

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) Cynthia A. Thompson C. Date of Delivery 4/21/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1193

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1209

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Cynthis S. Gregg
Street, Apt. No., or PO Box No.
P.O. Box 724
City, State, ZIP+4
Sundown, TX 75372

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cynthis S. Gregg
P.O. Box 724
Sundown, TX 75372

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 30 2013 USPS SUNDOWN TX 79372

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1209

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1216

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box I
City, State,

D.C. Well Service
P.O.Box 1449
Denver City, TX 79323

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 1223

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State

Dalco Oil Company
C/O Hunt Oil Co.
1900 N. Akard Street
Dallas, TX 75201-2300

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dalco Oil Company
C/O Hunt Oil Co.
1900 N. Akard Street
Dallas, TX 75201-2300

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) Logan Bleasdale C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1223

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1230

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Daniel L. Viers
Street, Apt. No. or PO Box No.: 1209 W. Cuthbert
City, State, ZIP+4: Midland, TX 79701

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 1247

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com
MHF/OXY
OFFIC

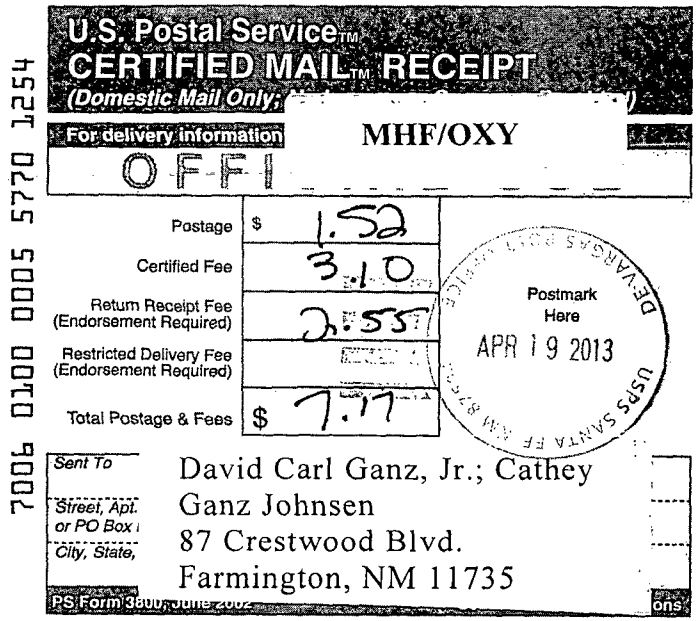
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
David B. Talbot, III
Street, Apt. No. or PO Box No.: 1309 East Street
City, State, ZIP+4: Graham, TX 76046

PS Form 3800, June 2002 — ...ions

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

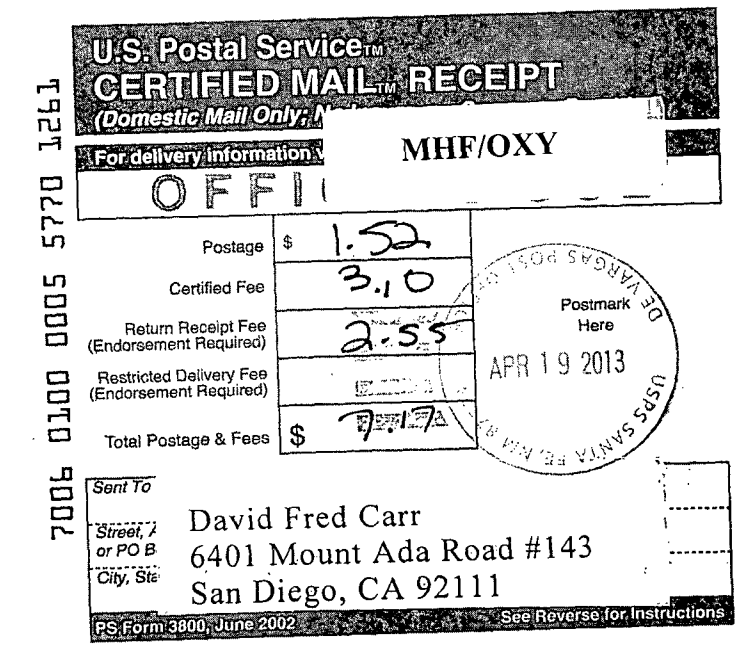
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO Box
City, State,

David Carl Ganz, Jr.; Cathey Ganz Johnsen
87 Crestwood Blvd.
Farmington, NM 11735

PS Form 3800, June 2002

7006 0100 0005 5770 1254



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street,
or PO B
City, Ste

David Fred Carr
6401 Mount Ada Road #143
San Diego, CA 92111

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1261

7006 0100 0005 5770 1278

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N...

For delivery information v... MHF/OXY
OFFI...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State,

Debra D. Dye
P.O. Box 834
LaPorte, TX 77572

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1285

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only ...d)

For delivery informatio... MHF/OXY
OFFI...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87...

Sent To
Street, Apt or PO Box
City, State,

Debra Lowe Finn
1500 Broadway, Suite 1230
Lubbock, TX 79401

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5720 1292

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information MHF/OXY
OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87

Sent To
Street, Apt. or PO Box
City, State,

Del-Lea, Inc.
P.O. Box 1889
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5720 1308

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only [illegible])

For delivery informatio MHF/OXY
OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87

Sent To
Street, A
or PO Bc
City, Stai

Denise Lowe
3424 61st Street
Lubbock, TX 79413

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1315

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sent To
Street, A
or PO Bc
City, Sta

Dennis Cox
422 East Main
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1322

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sent T
Stree
or PC
City,

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 731102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 731102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery
APR 20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

OKLAHOMA CITY OK 731
USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service label) 7006 0100 0005 5770 1322

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1339

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Provided)

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Dianna Beatty Dugger
Street, Apt. No.; or PO Box No.
2407 Latinada Court
City, State, ZIP+4
Carlsbad, CA 92009-9133

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1346

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible] Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Dinah Gemelle
Street, Apt. No.; or PO Box No.
16117 136th Ave.
City, State, ZIP+4
Gig Harbor, WA 98329

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dinah Gemelle
16117 136th Ave.
Gig Harbor, WA 98329

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Dinah Gemelle ☐ Agent ☐ Addressee

B. Received by (Printed Name) Dinah Gemelle
C. Date of Delivery 4-25-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1346

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1353

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

Sent To
Street, Apt. or PO Box
City, State,

Donald A. Turner
4201 Monty Dr.
Midland, TX 79703

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- ☑ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☑ Print your name and address on the reverse so that we can return the card to you.
- ☑ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donald A. Turner
4201 Monty Dr.
Midland, TX 79703

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Susan Turner ☐ Agent ☐ Addressee

B. Received by (Printed Name) Susan Turner C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service la* 7006 0100 0005 5770 1353

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1360

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis: MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

Sent To
Street, A
or PO Bo
City, Sta

Donald H. Greer
P.O. Box 256
Center Point, TX 78010-0256

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- ☑ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ☑ Print your name and address on the reverse so that we can return the card to you.
- ☑ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Donald H. Greer
P.O. Box 256
Center Point, TX 78010-0256

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

APR 22 2013
78010 9998

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 1360

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1377

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 10 2013

Sent To
Street, Apt. or PO Box
City, State

Doris Rollins Daugherty
408 Kilpatrick Court
Lexington, KY 40511-1624

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Doris Rollins Daugherty
408 Kilpatrick Court
Lexington, KY 40511-1624

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Doris K. Daugherty ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1377

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1384

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

Douglas C. Koch
P.O. Box 540244
Houston, TX 77254

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Douglas C. Koch
P.O. Box 540244
Houston, TX 77254

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) DOUGLAS KOCH C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 23 2013

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1384

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1391

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OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Douglas L. Cone
Street, Apt. No., or PO Box
P.O. Box 64244
City, State
Lubbock, TX 79413

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1407

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Dr. Donna F. Adams
Street, Apt. No., or PO Box No.
406 West Main Street
City, State, ZIP+4
Dennison, TX 75020

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dr. Donna F. Adams
406 West Main Street
Dennison, TX 75020

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) DR. D. F. ADAMS — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 1407

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1414

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP+4

Dr. Roy Camp
24 Woodlands
Enid, OK 73701

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1421

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP+4

E.A. Beck, Jr.
1223 Sheridan
Corona, CA 92882-4346

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

E.A. Beck, Jr.
1223 Sheridan
Corona, CA 92882-4346

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Barbara Kelley ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1421

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1438

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage P

For delivery information vi
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here

Sent To
Street, Api or PO Box
City, State

Edward Allen Dunbar
P.O. Box 883
Rocksprings, TX 78880

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Edward Allen Dunbar
P.O. Box 883
Rocksprings, TX 78880

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Allan Dunbar ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROCKSPRINGS TX 78880 APR 23 2013 USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5770 1438

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1445

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis
OFFIC

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Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent
Stree
or PC
City,

EG Energy LLC
9204 Cherokee Lane
Leawood, KS 66206

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EG Energy LLC
9204 Cherokee Lane
Leawood, KS 66206

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Pam Williams ☐ Agent ☐ Addressee

B. Received by (Printed Name) Pam Williams C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numt (Transfer fror 7006 0100 0005 5770 1445

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1452

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit o

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MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, A
or PO Bo
City, Sta

Elaine M. Walker & William C.
P.O. Box 11222
Wichita, KS 67211

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 1469

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
USPS SANTA FE, NM 87501

Sent To
Street, Ap
or PO Box
City, State

Eleanor Christie Corrigan
3809 Shenandoah Street
Dallas, TX 75205

PS Form 3800, June 2002

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Eleanor Christie Corrigan
3809 Shenandoah Street
Dallas, TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
4-22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from servic...* 7006 0100 0005 5770 1469

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1476

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I... Coverage Provided)

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Ap... or PO Box
City, State
Elizabeth Blosser
1601 Fernwood Drive
Oakland, CA 94611

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1483

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No...

For delivery information vis: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
SANTA FE, NM 87501

Sent To
Street, Apt... or PO Box
City, State
Elizabeth T. Barry
151 Thompson Drive SE
Cedar Rapids, IA 52403

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Elizabeth T. Barry
151 Thompson Drive SE
Cedar Rapids, IA 52403

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Steve M. Barry
C. Date of Delivery: 4-28-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi...): 7006 0100 0005 5770 1483

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1490

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Apt or PO Box
City, State,

Elwyn Ward White
P.O. Box 918
Greemville, Miss 38702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Elwyn Ward White
P.O. Box 918
Greemville, Miss 38702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[signature] 04/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from se 7006 0100 0005 5770 1490

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1506

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Ap
or PO Bo
City, Stat

Eric J. Coll
P.O. Box 1818
Roswell, NM 88202-1818

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Eric J. Coll
P.O. Box 1818
Roswell, NM 88202-1818

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[signature]

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 23 2013 ROSWELL, NM 88201

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from servi 7006 0100 0005 5770 1506

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1513

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In

For delivery information visit o

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO
City, S

Erma Hoffman
1628 41st Avenue E
Seattle, WA 98112

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1520

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

Sent To
Street, Apt. or PO Box
City, State,

Ernest B. Alexander
P.O. Box 482
Marysville, MO 64468

PS Form 3800, June 2002

7006 0100 0005 5770 1537

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In

For delivery information visit c

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt. N
or PO Box No
City, State, Z

Ernest H. Byers, Jr. & Ruth
McKissack Byers
8805 Royal Harbor Court
Fort Worth, TX 76179

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ernest H. Byers. Jr. & Ruth
McKissack Byers
8805 Royal Harbor Court
Fort Worth, TX 76179

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Ruth Byers ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ruth Byers C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s 7006 0100 0005 5770 1537

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1544

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In

For delivery information visit c

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501
DE VARGAS POST OFFICE

Sent
Stree
or PO
City,

Estate Hilton Sayle
38 South Dearborn Street,
Suite 777
Chicago, IL 60603

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1551

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N…

For delivery information v…

MHF/OXY

OFFI…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS

Sent To
Street, Ap… or PO Bo…
City, Stat…

Estate John P. Cusack, Jr.
P.O. Box 250
Roswell, NM 88202

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF THE RETURN…

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate John P. Cusack, Jr.
P.O. Box 250
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) E.T. Gallegos — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL NM APR 22 2013 88201

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser…) 7006 0100 0005 5770 1551

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1568

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v…

MHF/OXY

OFFI…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS

Sent To
Street, … or PO E…
City, St…

Estate Mona Sayle
38 South Dearborn Street,
Suite 777
Chicago, IL 60603

PS Form 3800, June 2002 — …uctions

7006 0100 0005 5770 1575

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Provided)

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt or PO Box
City, State

Estate of Clara Wright
Tedrick Hal Ussery, Personal Rep.
5018 Eunice Hwy.
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Clara Wright
Tedrick Hal Ussery, Personal Rep.
5018 Eunice Hwy.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Rhonda Ussery ☐ Agent ☐ Addressee

B. Received by (Printed Name) Rhonda Ussery
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5770 1575

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1582

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information
OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Estate of Ruth O. Snowden
Roy E. Brooks, Pers. Rep.
3404 Purdue Place NE
Albuquerque, NM 87106

[illegible] See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Estate of Ruth O. Snowden
Roy E. Brooks, Pers. Rep.
3404 Purdue Place NE
Albuquerque, NM 87106

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Eunice Brooks ☐ Agent ☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic) 7006 0100 0005 5770 1582

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1599

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis — MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...

Sent To
Street, Apt. N or PO Box No
City, State, Zi

Etz Oil Properties, LTD.
P.O. Box 1992
Roswell, NM 88201

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1605

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only

For delivery informatio — MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...

Sent To
Street, Apt or PO Box
City, State

Evrett R. Newby
c/o Brian Newby
715 Jones Street, Apt. 201
Fort Worth, TX 76102-5474

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF THE RETURN

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Evrett R. Newby
c/o Brian Newby
715 Jones Street, Apt. 201
Fort Worth, TX 76102-5474

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery: APR 24 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se) 7006 0100 0005 5770 1605

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1612

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N... Coverage Provided)

For delivery information v...

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO B...
City, St...

ExxonMobil Corp.
P.O. Box 2305
Houston, TX 77252-2305

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ExxonMobil Corp.
P.O. Box 2305
Houston, TX 77252-2305

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) JAMES FELDER — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi...) 7006 0100 0005 5770 1612

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1629

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I... Coverage Provided)

For delivery information visit...

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO B...
City, St...

Fairway Oil & Gas Company
P.O. Box 1747
Midland, TX 79702

PS Form...

7006 0100 0005 5770 1636

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

DE VARGAS POST OFFICE USPS SANTA FE, NM 87501

Sent To
Street, Apt. N
or PO Box N
City, State, Z

Farley Ranch Lowe Family
Partnership LTD
308 Comet
Austin, TX 78734

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1643

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

USPS SANTA FE, NM 87501

Sent To
Street, A
or PO Bo
City, Stat

Featherstone Development
Corp.
P.O. Box 429
Roswell, NM 88202

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Featherstone Development
Corp.
P.O. Box 429
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J. Andazola ☐ Agent ☐ Addressee

B. Received by (Printed Name) Jennifer Andazola C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL, NM APR 22 2013 USPS 88201

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5770 1643

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1650

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here

Sent T
Street, or PO
City, S

Fernand Robidoux
97 Hanover Avenue
Pawtucket, RI 02861

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1667

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Ap
or PO Bo
City, Stat

Finley Production Company LP
1308 Lake Street
Fort Worth, TX 76102

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Finley Production Company LP
1308 Lake Street
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Spencer Todd
C. Date of Delivery 4/22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1667

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1674

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
DE VARGAS ST OFFICE
APR 19 2013
USPS SANTA FE, NM 87594

Sent To
First Baptist Church
of Forrest City
Street, Apt. or PO Box
507 N. Rosser
City, State
Forrest City, AR 76335

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1681

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
DE VARGAS STAT. OFFICE
APR 19 2013
USPS SANTA FE, NM 87594

Sent To
First Roswell Company
Street, Apt. or PO Box
P.O. Box 1797
City, State
Roswell, NM 88202-1797

PS Form 3800, June 2002 See Reverse for Instructions

SENDI CERTIFIED MAIL PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
X Ray Srader ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ray SRader C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 24 2013 ROSWELL, NM

1. Article Addressed to:

First Roswell Company
P.O. Box 1797
Roswell, NM 88202-1797

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1681

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5720 1698

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

DEVARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, /
or PO B
City, Sta

Forest Oil Corp.
3838 North Causeway Blvd.,
Suite 2300
Metairie, LA 70002

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5720 1704

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Coverage Provided)

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

DEVARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO B
City, Sta

Gabrielle Goust Young
4448 South Shore Drive
Anacortes, WA 98221

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1711

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Gail Allen Emory
Street, Apt. No., or PO Box No.
2683 West Ivanhoe Street
City, State, ZIP+4
Chandler, AZ 85524

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 1728

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Gary J. Lamb
Street, Apt. No., or PO Box No.
P.O. Box 3383
City, State, ZIP+4
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gary J. Lamb
P.O. Box 3383
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) Carol Whisler
C. Date of Delivery 4/30/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ ~~Return Receipt for Merchandise~~
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1728

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1735

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State,

Gary Phillips
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gary Phillips
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Erica W
C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5770 1735

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1742

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

Sent To
Street, Apt. or PO Box
City, State

Gene C. & Vikki L. Jameson
987 Island Drive
Somerset, WI 54025

Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gene C. & Vikki L. Jameson
987 Island Drive
Somerset, WI 54025

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Vikki Jameson
☐ Agent
☐ Addressee

B. Received by (Printed Name) Vikki Jameson
C. Date of Delivery APR 23 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

SOMERSET WI 54025

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5770 1742

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1759

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

George H. Etz, Jr., trustee of
the George H. Etz, Sr. Trust
2003 17th Street
Lubbock, TX 79401

PS Form 3800, June 2002

7006 0100 0005 5770 1766

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

George K. Avera
8648 La Gente
El Paso, TX 79907

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

George K. Avera
8648 La Gente
El Paso, TX 79907

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5770 1766

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1773

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

USPS SANTA FE, NM 87504

Sent To
Street, A
or PO B
City, Sta

George Wesley Weir
6 Hope Road
Eaton Town, NJ 07724

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1780

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013 Postmark Here

USPS SANTA FE, NM 87504

Sent To
Street, Ap
or PO Bo
City, State

Glenna Warren
419 East Dunham
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1797

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N… Provided)

For delivery information v…

MHF/OXY

OFFI…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO B…
City, St…

Gordon Nees, III
P.O. Box 119
Graham, TX 76046

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ■ Print your name and address on the reverse so that we can return the card to you.
- ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gordon Nees, III
P.O. Box 119
Graham, TX 76046

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from se…)* 7006 0100 0005 5770 1797

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1803

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; …)

For delivery information…

MHF/OXY

OFFI…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO…
City, S…

Grassland Energy LP
1308 Lake Street
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- ■ Print your name and address on the reverse so that we can return the card to you.
- ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Grassland Energy LP
1308 Lake Street
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) Steve Todd C. Date of Delivery 4/22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from servic…)* 7006 0100 0005 5770 1803

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1810

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

MHF/OXY

For delivery information v
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Ap
or PO Bo
City, Stat

Green River Resources, Inc.
302 Summit Ridge
Leander, TX 78645

PS Form 3800, June 2002

Returned

7006 0100 0005 5770 1827

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

MHF/OXY

For delivery information visit
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 10 2013

Sent To
Street, A
or PO B
City, Sta

Greg & Nancy Vance Family LP,
c/o Production Gathering Company
8080 N. Central Expressway
Dallas, TX 75206

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF THE RETURN

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Greg & Nancy Vance Family LP,
c/o Production Gathering Compan
8080 N. Central Expressway
Dallas, TX 75206

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Num (Transfer fr 7006 0100 0005 5770 1827

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1834

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEL VARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State,

Greg Mauzy trustee of the
MGM Oil & Gas Co.
P.O. Box 891
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Greg Mauzy trustee of the
MGM Oil & Gas Co.
P.O. Box 891
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
GREG MAUZY | 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Numbe
(Transfer from 7006 0100 0005 5770 1834

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1841

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N... Coverage Provided)

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEL VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Street, Ap
or PO Bo
City, Stat

H. Corrigan, III
3809 Shenandoah Street
Dallas, TX 75205

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

H. Corrigan, III
3809 Shenandoah Street
Dallas, TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery
4-27

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Num
(Transfer fr 7006 0100 0005 5770 1841

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1858

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.53
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Ap or PO Bo
City, Stat

H. Edison Ellis, Jr.
P.O. Box 6700707
Dallas, TX 75367

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1865

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.53
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent T
Street, or PO
City, S

H.B. Fuqua
210 Pack Saddle Trail
Fort Worth, TX 76108-4268

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
X JB [illegible] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Fuqua
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

1. Article Addressed to:

H.B. Fuqua
210 Pack Saddle Trail
Fort Worth, TX 76108-4268

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article N (Transfe 7006 0100 0005 5770 1865

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1872

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

H.R. Stasney & Sons, LTD
P.O. Box 3190
Albany, TX 76430

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

H.R. Stasney & Sons, LTD
P.O. Box 3190
Albany, TX 76430

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 1872

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1889

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

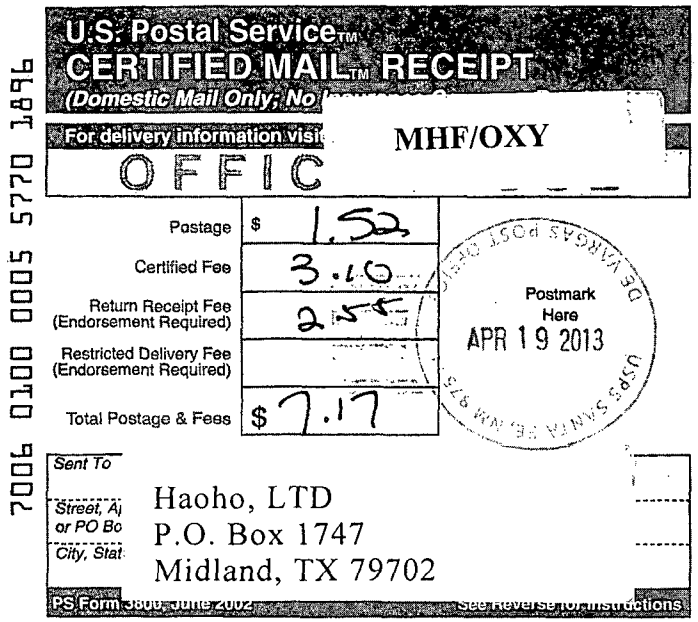
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

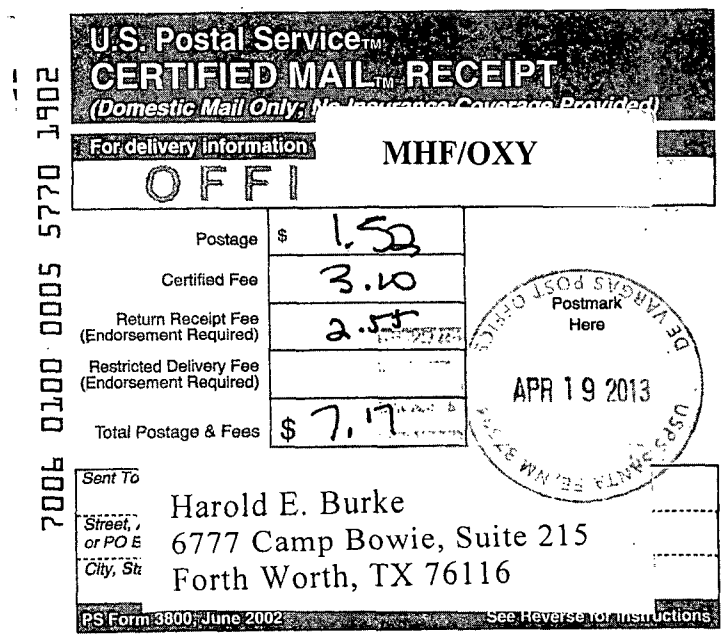
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

HAG Partnership
7311 Creek Bluff Drive
Austin, TX 78750

PS Form 3800, June 2002 — See Reverse for Instructions


7006 0100 0005 5770 1896
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information visit
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87
Sent To
Haoho, LTD
P.O. Box 1747
Midland, TX 79702
PS Form 3800, June 2002
See Reverse for Instructions


7006 0100 0005 5770 1902
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87
Sent To
Harold E. Burke
6777 Camp Bowie, Suite 215
Forth Worth, TX 76116
PS Form 3800, June 2002
See Reverse for Instructions

Returned

7006 0100 0005 5770 1919

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: OFFI — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 — USPS SANTA FE, NM 87504

Sent To: Harvard Energy Partners Ltd.
Street, Apt. / or PO Box N: c/o Andy Grooms
City, State, Z: P.O. Box 936, Roswell, NM 88202

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF THE RETURN ADDR

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harvard Energy Partners Ltd.
c/o Andy Grooms
P.O. Box 936
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Jay Urech — ☐ Agent ☐ Addressee

B. Received by (Printed Name): Jay Urech — C. Date of Delivery: APR 22 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from s): 7006 0100 0005 5770 1919

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1926

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: OFFI — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013

Sent To: Harvey Lee Johnson
Street, / or PO B: 3917 Radcliff
City, St: Abilene, TX 79603

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Harvey Lee Johnson
3917 Radcliff
Abilene, TX 79603

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X — ☐ Agent ☐ Addressee

B. Received by (Printed Name): HARVEY L JOHNSON — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from ser): 7006 0100 0005 5770 1926

PS 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 1933

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.5[illegible]
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501
Postmark Here
APR 10 2013

Sent To
Street, Apt. or PO Box I
City, State,

Hazel Lewelling
702 West Avenue
Levelland, TX 79336

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1940

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.5[illegible]
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501
Postmark Here
APR 10 2013

Sent To
Street, A or PO B
City, Sta

Helen Learmont Bedford Family Trust
Edwin L. Bedford, Trustee
P.O. Box 2047
Newport, OR 97365

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 1957

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

Helm Energy, LLC
1775 Sherman Street,
Suite 1955
Denver, CO 80203

PS Form 3800, June 2002

Returned

7006 0100 0005 5770 1964

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

Henry C. Parsons, Sr. &
Katherine
Proctor Star Route
Williamsport, PA 17701

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 1971

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Herring's Carter Minerals, LLC
Street, Apt. No., or PO Box No. P.O. Box 2036
City, State, ZIP+4 Roswell, NM 88202

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Herring's Carter Minerals, LLC
P.O. Box 2036
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Paul Herring ☐ 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

ROSWELL, NM APR 22 2013 88202

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1971

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1988

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Hickory Timbers LTD
Street, Apt. No., or PO Box No. 810 Houston Street,
City, State, ZIP+4 Suite 2000
Fort Worth, TX 76102

Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hickory Timbers LTD
810 Houston Street,
Suite 2000
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kenia Lacy - Brown ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
APR 22 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 1988

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 1995

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

HNL Royalty Company
P.O. Box 51311
Midland, TX 79710

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2008

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, A
or PO B
City, Sta

Hobbs Oil Syndicate
P.O. Box 2980 MC-3-TR
Milwaukee, WI 53201

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2015

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No ...)

For delivery information: OFFI...

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Hugh A. Thompson
Street, Apt. or PO Box: 6301 Colony Way 1-A
City, State: Edina, MN 55435

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 2022

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; ...)

For delivery information: OFFI...

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Hugh Corrigan III
Street, Apt. or PO Box: 2 Live Oak Dr.
City, State: Midland, TX 79705

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hugh Corrigan III
2 Live Oak Dr.
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery: 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

Marisela Gonzalez

3. Service Type
~~☐ Certified Mail~~ ☐ Express Mail
☐ Registered ~~☐ Return Receipt for Merchandise~~
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from servic...): 7006 0100 0005 5770 2022

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2039

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
USPS SANTA FE, NM 87504

Sent To
Street, Ap
or PO Box
City, State

Hugh Daniel Corrigan
3809 Shenandoah Street
Dallas, TX 75205

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hugh Daniel Corrigan
3809 Shenandoah Street
Dallas, TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4-22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2039

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2046

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
USPS SANTA FE, NM 87504

Sent To
Street, Apt
or PO Box
City, State

Isaacs Family LP
5 Inverness Srive East
Englewood, CO 80112

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2053

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 15 2013
USPS SANTA FE NM

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP+4

J. Cleo Thompson & J.Cleo Thompson Jr. LP
325 North St. Paul, Suite 4300
Dallas, TX 75201

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

J. Cleo Thompson & J.Cleo Thompson Jr. LP
325 North St. Paul, Suite 4300
Dallas, TX 75201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
~~☐ Certified Mail~~ ☐ Express Mail
☐ Registered ~~☐ Return Receipt for Merchandise~~
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2053

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2060

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent To
Street, Apt. or PO Box No.
City, State, ZIP+4

J. Pat Corrigan Family Ltd. Ptsp.
7150 20th St., Suite E
Vero Beach, FL 32966

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

J. Pat Corrigan Family Ltd. Ptsp.
7150 20th St., Suite E
Vero Beach, FL 32966

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) Darlene Dollins | C. Date of Delivery: 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2060

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2077

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87534

Sent To
Street, Ap or PO Box
City, State

J. R. McGinley, Jr., trustee of the J.R. McGinley, Jr.Revocable Trust dated 1/2/1990
P.O. Box 769
Tulsa, OK 74101

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

J. R. McGinley, Jr., trustee of the J.R. McGinley, Jr.Revocable Trust dated 1/2/1990
P.O. Box 769
Tulsa, OK 74101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) J R McGINLEY — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 24 2013
74103-USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se) 7006 0100 0005 5770 2077

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2084

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87534

Sent To
Street, Apt or PO Box
City, State

J.H. Herd
P.O. Box 130
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

CERTIFIED MAIL
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

J.H. Herd
P.O. Box 130
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Marsha L McQuerry ☐ Agent ☐ Addressee

B. Received by (Printed Name) MARSHA L McQUERRY — C. Date of Delivery 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numb (Transfer from service label) 7006 0100 0005 5770 2084

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2091

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, Ap or PO Bo
City, Stat

J.M. White
HC 74, Box 503
Graham, TX 76450

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 2107

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, or PO E
City, St

J.R. McGinley, Jr. Revocable Trust
P.O. Box 769
Tulsa, OK 74101

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) JR McGINLEY
C. Date of Delivery
APR 24 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

1. Article Addressed to:

J.R. McGinley, Jr. Revocable Trust
P.O. Box 769
Tulsa, OK 74101

74103-USPS

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2107

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2114

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt
or PO Box
City, State

Jacqueline Gousy Beattie
200 Old River Road, Apt. 14
Lincoln, RI 02865

PS Form 3800, June 2002

7006 0100 0005 5770 2121

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vist

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt.
or PO Box
City, State,

James B. Thomas
3304 Centenary
Dallas, TX 75225

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James B. Thomas
3304 Centenary
Dallas, TX 75225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) James B. Thomas C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2121

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2138

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street or PO
City, S

James E. Byers & Mattie N. Byers
trustee of the James E. Byers & Mattie
N. Byers Revocable Living Trust
929 Lawnview Lane
Franklin, TN 37064

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2145

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street or PO
City, S

James H.Wilkes
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James H.Wilkes
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sophie Lilgol ☐ Agent ☐ Addressee

B. Received by (Printed Name) SOPHIE LILGOL
C. Date of Delivery 4-23-13

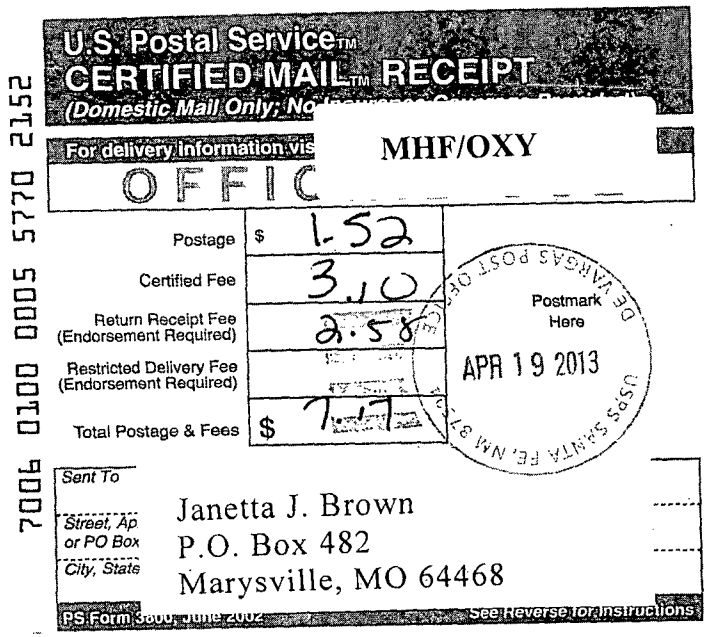
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2145

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

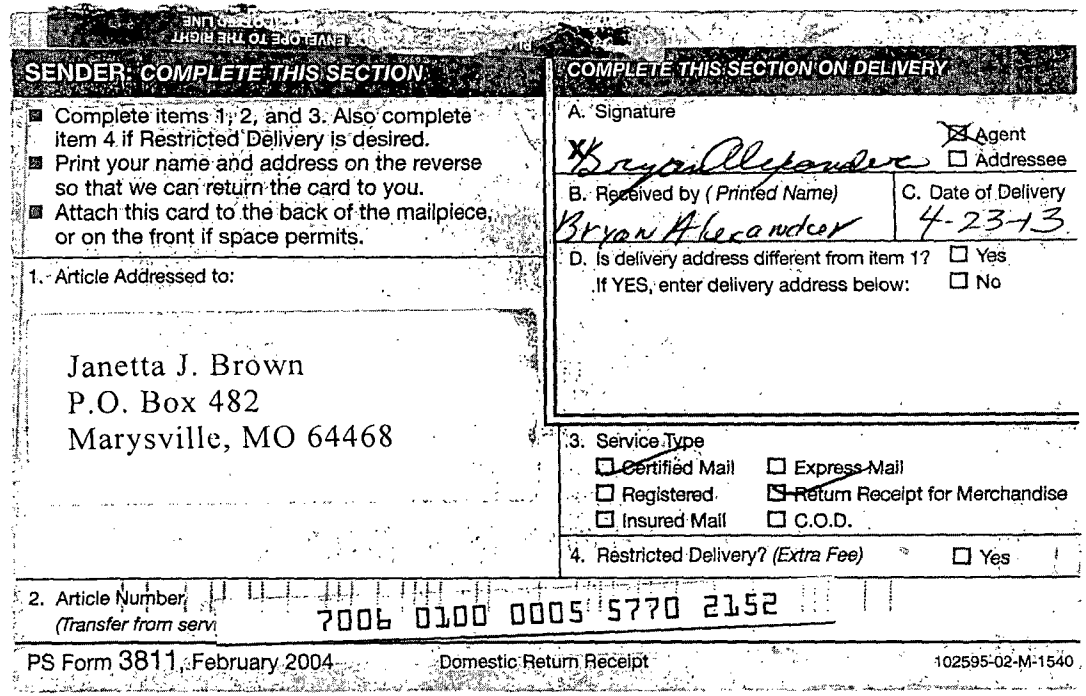
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.58
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87
DE VARGAS POST OFFICE

Sent To
Janetta J. Brown
Street, Ap or PO Box
P.O. Box 482
City, State
Marysville, MO 64468

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2152



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Janetta J. Brown
P.O. Box 482
Marysville, MO 64468

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Bryan Alexander
☒ Agent ☐ Addressee

B. Received by (Printed Name) Bryan Alexander
C. Date of Delivery 4-23-13

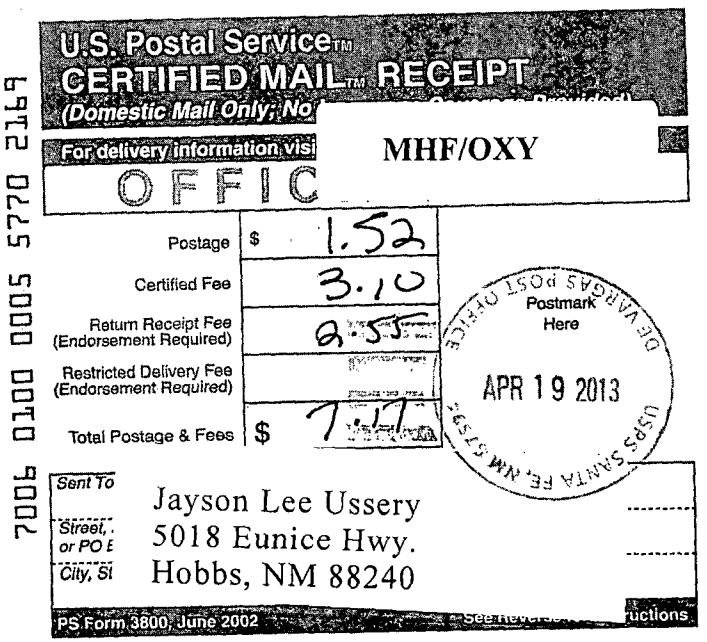
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from serv 7006 0100 0005 5770 2152

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi

MHF/OXY

OFFIC

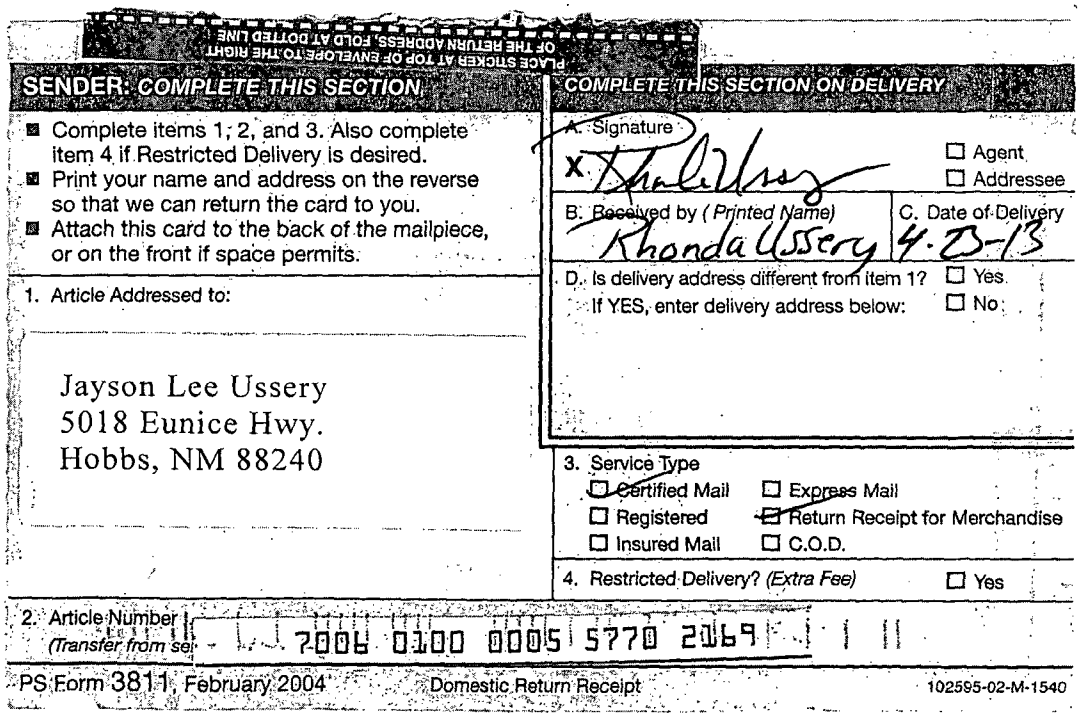
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87592
DE VARGAS POST OFFICE

Sent To
Jayson Lee Ussery
Street, or PO E
5018 Eunice Hwy.
City, St
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 2169



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jayson Lee Ussery
5018 Eunice Hwy.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Rhonda Ussery
☐ Agent ☐ Addressee

B. Received by (Printed Name) Rhonda Ussery
C. Date of Delivery 4-23-13

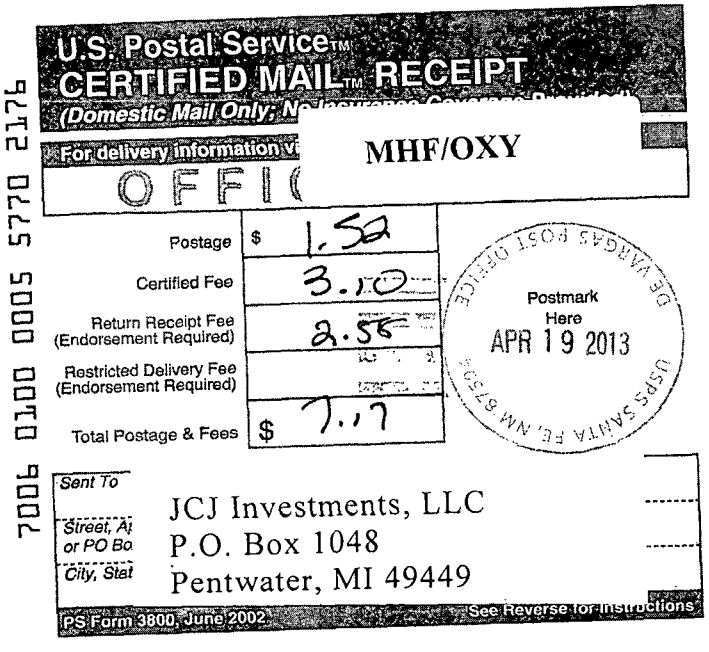
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se 7006 0100 0005 5770 2169

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
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MHF/OXY
OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

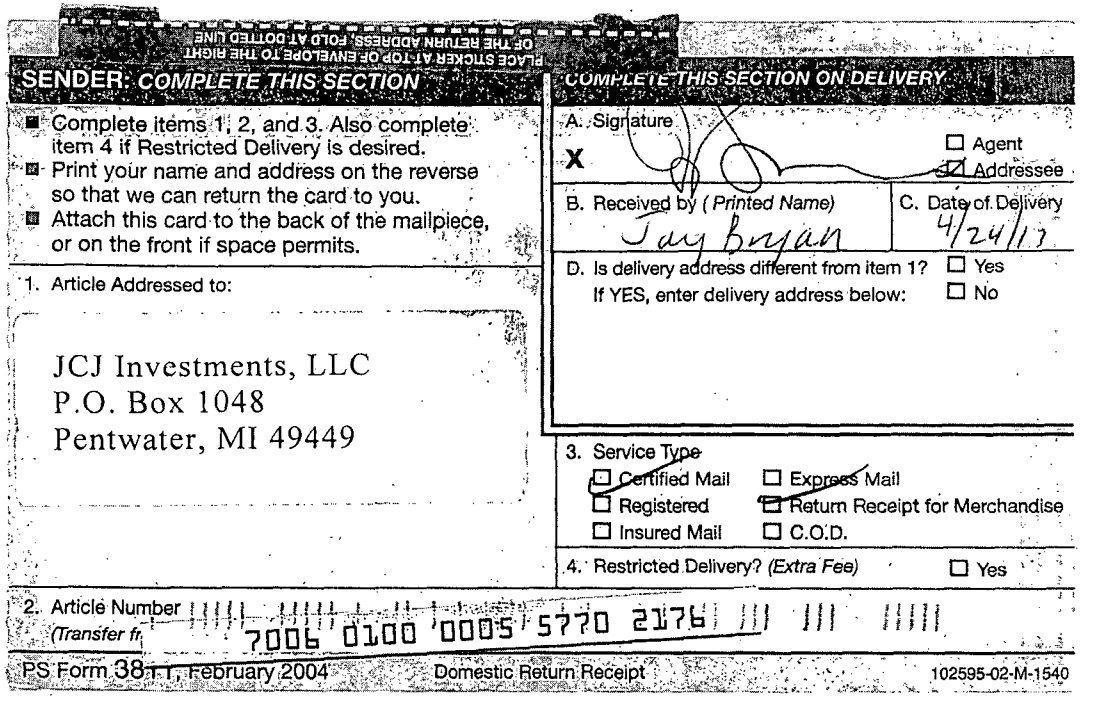
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State

JCJ Investments, LLC
P.O. Box 1048
Pentwater, MI 49449

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2176



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JCJ Investments, LLC
P.O. Box 1048
Pentwater, MI 49449

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☑ Addressee

B. Received by (Printed Name): Jay Bryan
C. Date of Delivery: 4/24/13

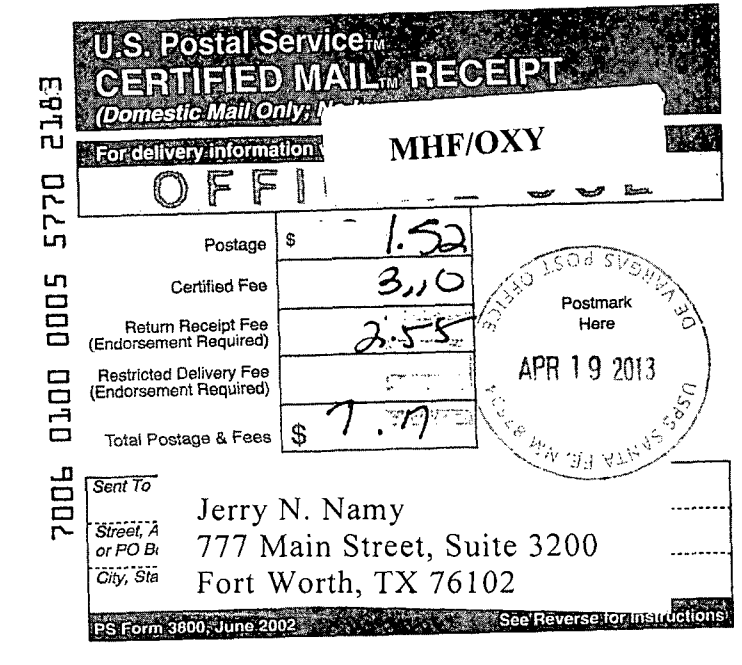
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2176

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540



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OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

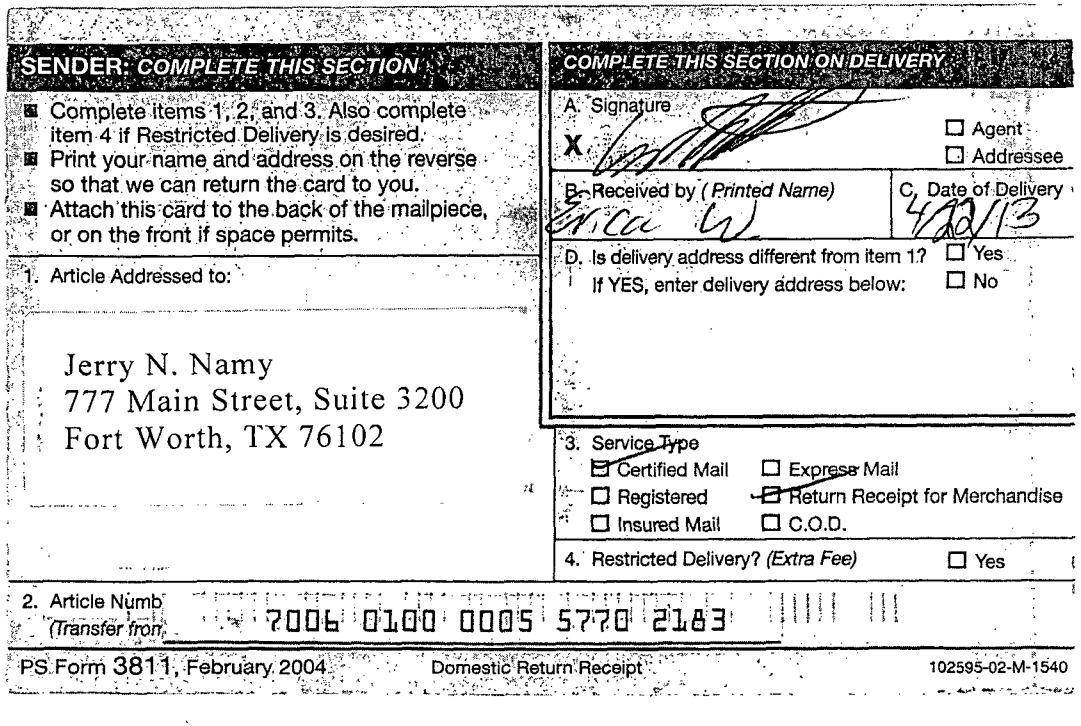
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Street, Apt. or PO Box
City, State

Jerry N. Namy
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2183



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jerry N. Namy
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name): Erica W
C. Date of Delivery: 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2183

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5720 2190

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Jim Allen
Street, or PO
620 East 23rd
City, S
San Angelo, TX 76904

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5720 2206

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Jim R.Williams
Street, Ap or PO Bo
905 West Pine Court
City, State
Midland, TX 79705

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jim R.Williams
905 West Pine Court
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) G WILLIAMS
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5720 2206

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2213

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sen
Stre
or F
City

Jimmie Charles Weir
P.O. Box 777
Jal, NM 88252

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2220

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Street, Apt.
or PO Box
City, State,

JM Bryan Oil LLC
P.O. Box 839
Graham, TX 76450

S Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JM Bryan Oil LLC
P.O. Box 839
Graham, TX 76450

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
APR 19 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

P.O. Box 839
USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfe
7006 0100 0005 5770 2220

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2237

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit: **MHF/OXY**
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 DE VARGAS POST OFFICE USPS SANTA FE, NM 87501

Sent To: Joan Miller Ganz & John William Lytle,
Street, or PO E: Jr. co-trustees u/w/o Mary Duke
City, St: Pearlbrook & Ida Miller
P.O. Box 65
Farmington, NY 11735

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joan Miller Ganz & John William Lytle,
Jr. co-trustees u/w/o Mary Duke
Pearlbrook & Ida Miller
P.O. Box 65
Farmington, NY 11735

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): JOAN GANZ C. Date of Delivery: 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service): 7006 0100 0005 5770 2237

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2244

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit: **MHF/OXY**
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 DE VARGAS POST OFFICE USPS SANTA FE, NM 87501

Sent To: Joe Gieb, III
Street, Apt. or PO Box N: P.O. Box 2434
City, State,: Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joe Gieb, III
P.O. Box 2434
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Edwards ☐ Agent ☐ Addressee

B. Received by (Printed Name): Edwards C. Date of Delivery: 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from): 7006 0100 0005 5770 2244

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2251

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

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OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 875

Sent To
Street, Ap
or PO Bo
City, Stat

John C. Alexander & Diane Alexander
1998 Family Trust u/a 4/21/98
509 Camino Cortez
Yuba City, CA 95911

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John C. Alexander & Diane Alexander
1998 Family Trust u/a 4/21/98
509 Camino Cortez
Yuba City, CA 95911

COMPLETE THIS SECTION ON DELIVERY

A. Signature — ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numb (Transfer fro 7006 0100 0005 5770 2251

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2268

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 875

Sent To
Street,
or PO B
City, Sta

John H. Hendrix Corp.
P.O. Box 3040
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John H. Hendrix Corp.
P.O. Box 3040
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X — ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer fro 7006 0100 0005 5770 2268

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2275

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Provided)

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

Sent To
Street or PO
City, S

John Hays Hammonds, Jr.
2618 Cheverny Drive
McKinney, TX 75070-4745

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John Hays Hammonds, Jr.
2618 Cheverny Drive
McKinney, TX 75070-4745

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) JOHN HAMMONDS | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se) 7006 0100 0005 5770 2275

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2282

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

Sent To
Street, Apt
or PO Box
City, State

John J. Redfern, III
P.O. Box 50890
Midland, TX 79710

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John J. Redfern, III
P.O. Box 50890
Midland, TX 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) [signature] | C. Date of Delivery 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5770 2282

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2299

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE USPS SANTA FE, NM 87501
APR 19 2013 Postmark Here

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

John P. Cusack, III
19945 Kirk Avenue
Eagle River, AK 99573

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John P. Cusack, III
19945 Kirk Avenue
Eagle River, AK 99573

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) John P. Cusack III — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from se) 7006 0100 0005 5770 2299

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2305

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE USPS SANTA FE, NM 87501
APR 19 2013 Postmark Here

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

John R. Bryant
911 Silver
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 9360

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

John Thompson
6209 Minesal Point Road
Madison, WI 53705

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 9377

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, A
or PO Bc
City, Stat

John W. Crotty
18064 Shore Dr.
Flint, TX 75762

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John W. Crotty
18064 Shore Dr.
Flint, TX 75762

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4-26-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Nu (Transfer 7006 0100 0005 5769 9377

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9384

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Johnny W. Finch
Street, A
or PO B
303 Stephanie
City, Sta
Kerrville, TX 78028

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Johnny W. Finch
303 Stephanie
Kerrville, TX 78028

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Johnny Finch
☐ Agent
☐ Addressee

B. Received by (Printed Name) Johnny Finch
C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Num (Transfer fro 7006 0100 0005 5769 9384

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9391

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Jon F.Coll, II
Street, Apt. N
or PO Box Nc
P.O. Box 1818
City, State, Z
Roswell, NM 88202-1818

PS Form 3800, June 2002

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jon F.Coll, II
P.O. Box 1818
Roswell, NM 88202-1818

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

ROSWELL, NM
APR 23 2013
88201

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic 7006 0100 0005 5769 9391

PS Fo 3811, February 2004 Domestic Return Receipt 02595-02-M-1540

7006 0100 0005 5769 9407

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO B
City, St

Jon M. Morgan
P.O. Box 1015
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MA

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jon M. Morgan
P.O. Box 1015
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Debra Kendall ☐ Agent ☐ Addressee

B. Received by (Printed Name) Debra Kendall
C. Date of Delivery 4-30-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5769 9407

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9414

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, or PO B
City, St

Joy F. Davis & Larry C. Davis
Box 53
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 9421

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, Apt. or PO Box
City, State,

Judith O. McGinn
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Judith O. McGinn
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) E Westmoreland
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9421

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9438

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent T
Street, or PO
City, S

Judith O. McGinn
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Judith O. McGinn
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Erica W.
C. Date of Delivery 4/22/13

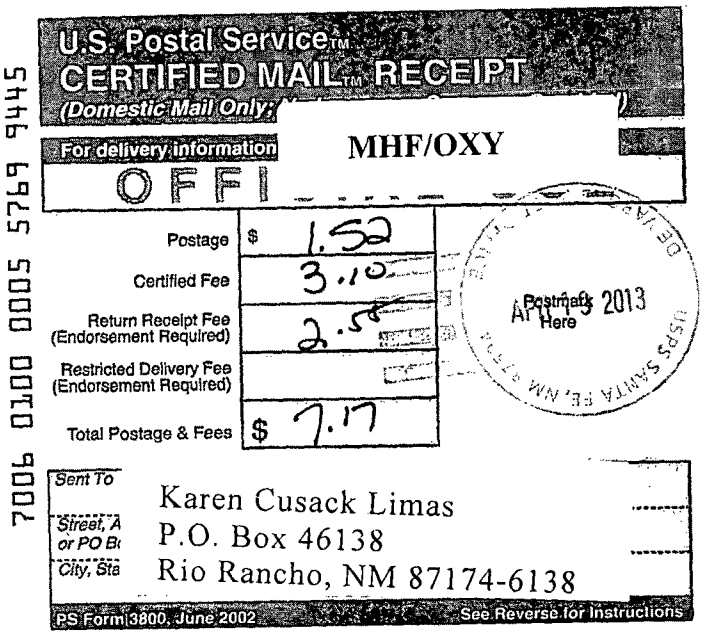
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

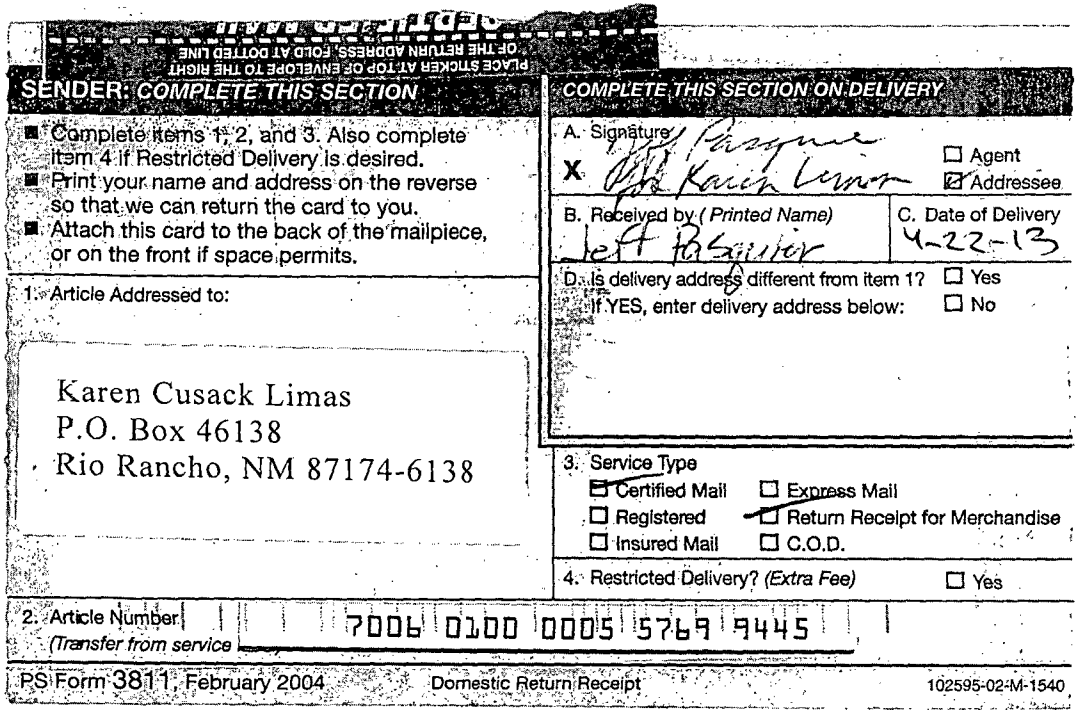
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

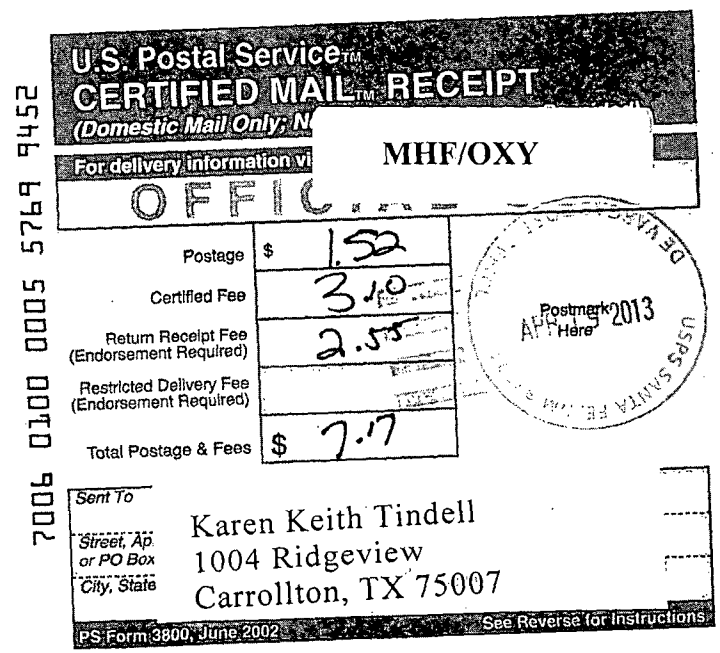
4. Restricted Delivery? (Extra Fee) ☐ Yes

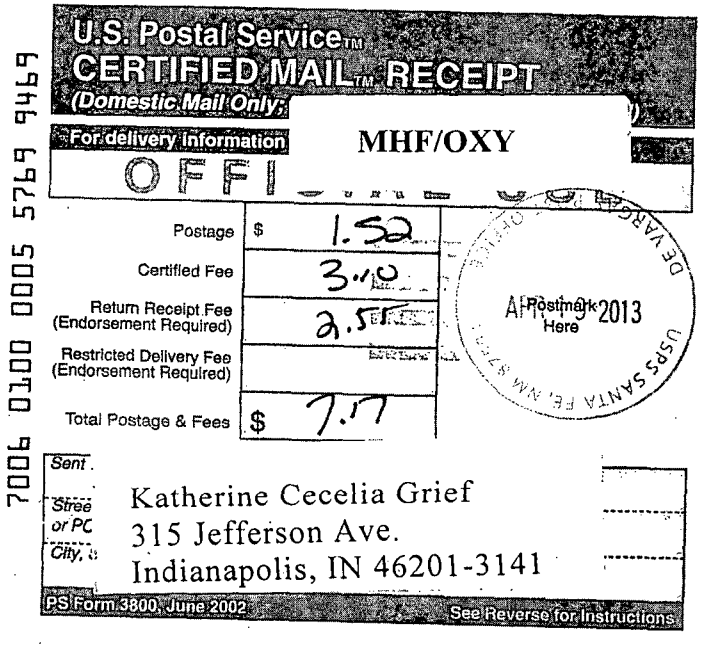
2. Article Number (Transfer from s 7006 0100 0005 5769 9438

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

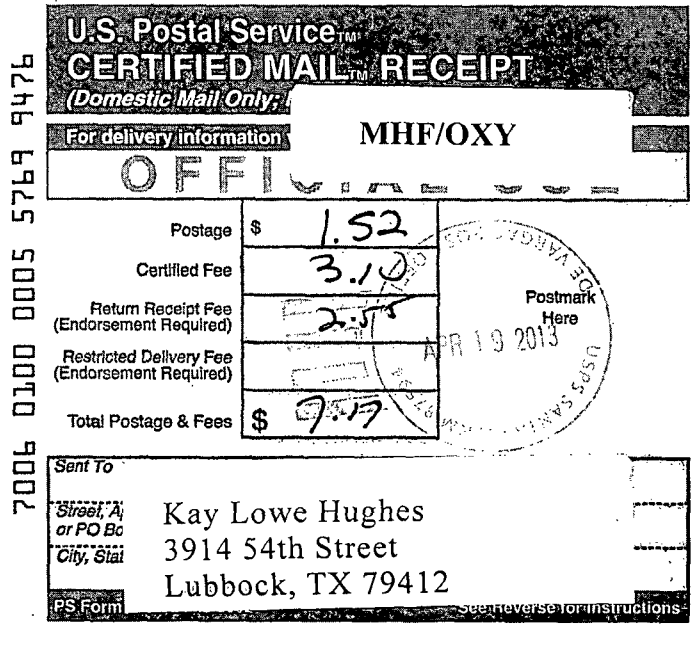

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;
For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 15 2013
USPS SANTA FE, NM
Sent To
Street, A
or PO B
City, Sta
Karen Cusack Limas
P.O. Box 46138
Rio Rancho, NM 87174-6138
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 9445


SENDER: COMPLETE THIS SECTION
COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Karen Cusack Limas
P.O. Box 46138
Rio Rancho, NM 87174-6138
A. Signature
X
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
4-22-13
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
3. Service Type
Certified Mail
Express Mail
Registered
Return Receipt for Merchandise
Insured Mail
C.O.D.
4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service
7006 0100 0005 5769 9445
PS Form 3811, February 2004
Domestic Return Receipt
102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 15 2013
USPS SANTA FE, NM
Sent To
Street, Ap
or PO Box
City, State
Karen Keith Tindell
1004 Ridgeview
Carrollton, TX 75007
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 9452



Returned



Returned

7006 0100 0005 5769 9483

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE NM 87...

Sent To
Kay Salem, as Guardiab of
Street, /
or PO B
Lauren Lowe
4513 13th Street
City, Sta
Lubbock, TX 79416

PS Form 3800, June 2002 ...ctions

7006 0100 0005 5769 9490

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; ... Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS ...
USPS SANTA ...

Sent To
Keith W.Davis
Street, A
or PO Bo
777 Main Street, Suite 3200
City, Sta
Fort Worth, TX 76102

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Keith W.Davis
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-22-13

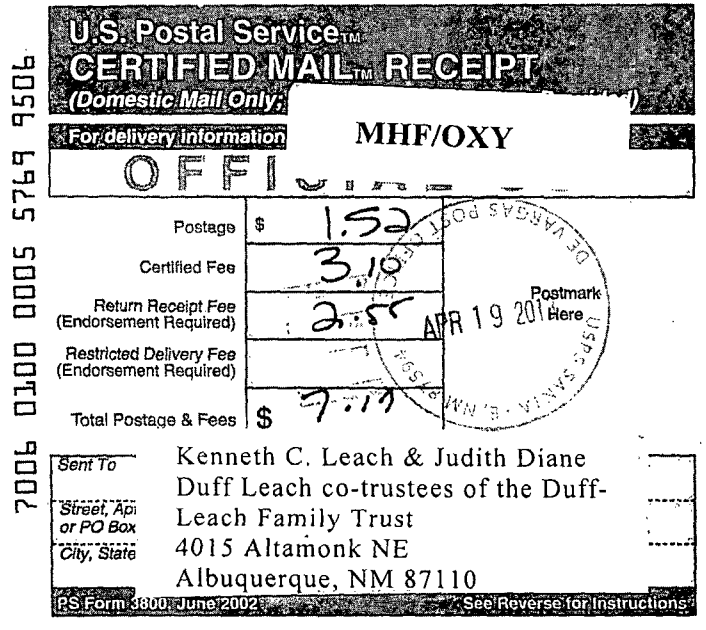
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi...) 7006 0100 0005 5769 9490

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 201

DE VARGAS POST OFFICE
USPS SANTA FE, NM

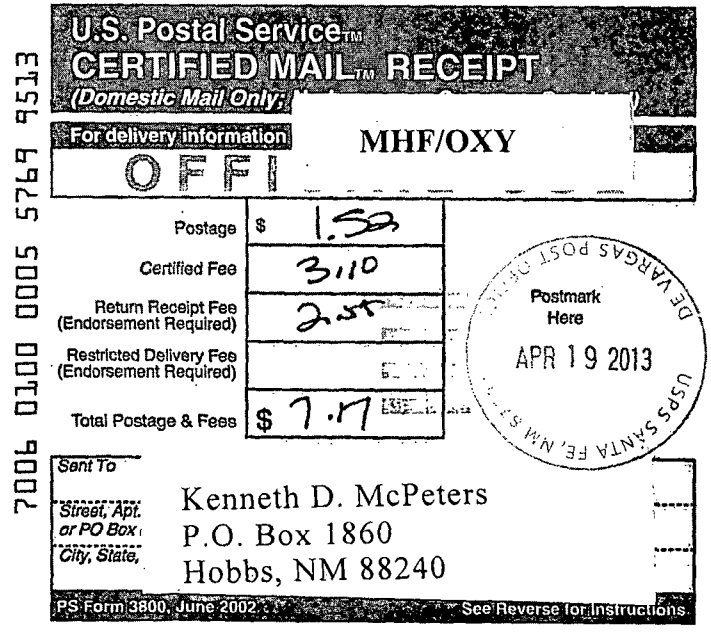
Sent To
Street, Apt. or PO Box
City, State

Kenneth C. Leach & Judith Diane
Duff Leach co-trustees of the Duff-
Leach Family Trust
4015 Altamonk NE
Albuquerque, NM 87110

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9506

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State,

Kenneth D. McPeters
P.O. Box 1860
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9513

Returned

7006 0100 0005 5769 9520

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87

Sent To
Kenneth G. Cone
Street, Apt. or PO Box: P.O. Box 11310
City, State: Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kenneth G. Cone
P.O. Box 11310
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R Shapiro ☑ Agent ☐ Addressee

B. Received by (Printed Name) SHAPIRO C. Date of Delivery 5/3/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 9520

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9537

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
SANTA FE, NM 87

Sent To
Kirby D. Schenck
Street, A or PO B: P.O.Box 1627
City, Sta: Lovington,NM 88260

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kirby D. Schenck
P.O.Box 1627
Lovington,NM 88260

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☑ Agent ☐ Addressee

B. Received by (Printed Name) Paul Cancel C. Date of Delivery 4/22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 9537

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9544

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

MHF/OXY

For delivery information v

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 1 0 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, Apt. I
or PO Box N
City, State, Z

Kirby Minerals LC, c/o Minerals
Acquisition Partners, Inc. GP
100 Park Avenue, Suite 1008
Oklahoma City, OK 73102

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 9551

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

MHF/OXY

For delivery information v

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 2013 Postmark Here

Sent To
Street, Apt.
or PO Box
City, State,

Knackwurst Properties
P.O. Box 10484
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Knackwurst Properties
P.O. Box 10484
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mendy Standridge ☐ Agent ☐ Addressee

B. Received by (Printed Name) Mendy Standridge C. Date of Delivery 4-30-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from se 7006 0100 0005 5769 9551

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87532

7006 0100 0005 5769 7090

Sent To
Street, Apt. or PO Box
City, State,

Kyle L. Stallings
P.O. Box 10217
Midland, TX 79702

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kyle L. Stallings
P.O. Box 10217
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Edwards ☐ Agent ☐ Addressee

B. Received by (Printed Name) Edwards
C. Date of Delivery 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 7090

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 875

7006 0100 0005 5769 7106

Sent To
Street, Apt or PO Box
City, State

Landmark Mineral Corp.
300 Paseo De Peralta,
Suite 100
Santa Fe, NM 87501

PS Form

Returned

7006 0100 0005 5769 7113

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87...

Sent To
Street or PO
City, S

Landreth Company
Stockholders
P.O. Box 277120
Atlanta, GA 30384

PS Form 3800, June 2002 ... ructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Landreth Company
Stockholders
P.O. Box 277120
Atlanta, GA 30384

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser... 7006 0100 0005 5769 7113

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7120

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N... Coverage Provided)

For delivery information v... MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS ... USPS SANTA FE, ...

Sent To
Street, Ap
or PO Bo
City, Stat

Lanroy, Inc.
20 East 5th Street
Tulsa, OK 74103

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lanroy, Inc.
20 East 5th Street
Tulsa, OK 74103

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mary K. Burroughs ☑ Agent ☐ Addressee

B. Received by (Printed Name) Mary K. Burroughs | C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5769 7120

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0110

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis
OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent To
Larry O. Hulsey
Street, Apt. or PO Box
P.O. Box 1143
City, State,
Graham, TX 76046

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Larry O. Hulsey
P.O. Box 1143
Graham, TX 76046

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5770 0110

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7137

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis
OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent To
Larry K. Lowe
Street, Apt. or PO Box
2313 Broadway
City, State
Lubbock, TX 79401

Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Larry K. Lowe
2313 Broadway
Lubbock, TX 79401

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5769 7137

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0127

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, or PO B
City, St

Larry Threadgill
1210 Sellman
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0134

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery informa

MHF/OXY

OFF E

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent
Stre
or P
City,

Lasca, Inc.
500 Throckmorton Street
Fort Worth, TX 76102-3708

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0141

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

Lavon Johnson
c/o Leonard Johnson
3666 Janice Lane
Abilene, TX 79603

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lavon Johnson
c/o Leonard Johnson
3666 Janice Lane
Abilene, TX 79603

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X Leonard Johnson — ☐ Agent ☐ Addressee

B. Received by (Printed Name) Leonard Johnson — C. Date of Delivery 4-24

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0141

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0158

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

LaWayne E. Jones, Mary LuAnn Walker,
Kalkman Habeck Co., Enertree LLC, Carkel
Energy, Dail C. West LP, H.w. Allen
Co.,Frank Dale C/O JWK Minerals
Mangement
P.O. Box 1169
Duncan, OK 73534

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LaWayne E. Jones, Mary LuAnn Walker,
Kalkman Habeck Co., Enertree LLC, Carkel
Energy, Dail C. West LP, H.w. Allen
Co.,Frank Dale C/O JWK Minerals
Mangement
P.O. Box 1169
Duncan, OK 73534

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X — ☐ Agent ☐ Addressee

B. Received by (Printed Name) Amanda Davidson — C. Date of Delivery 4-22-13

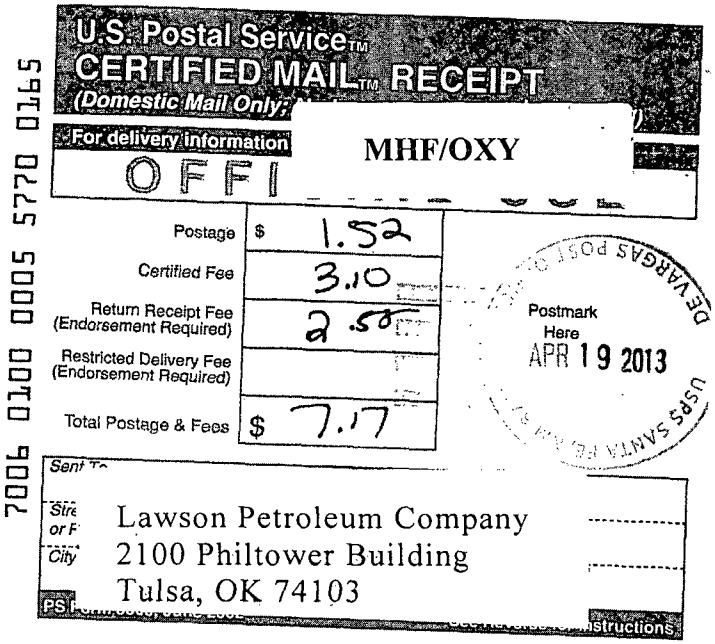
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0158

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

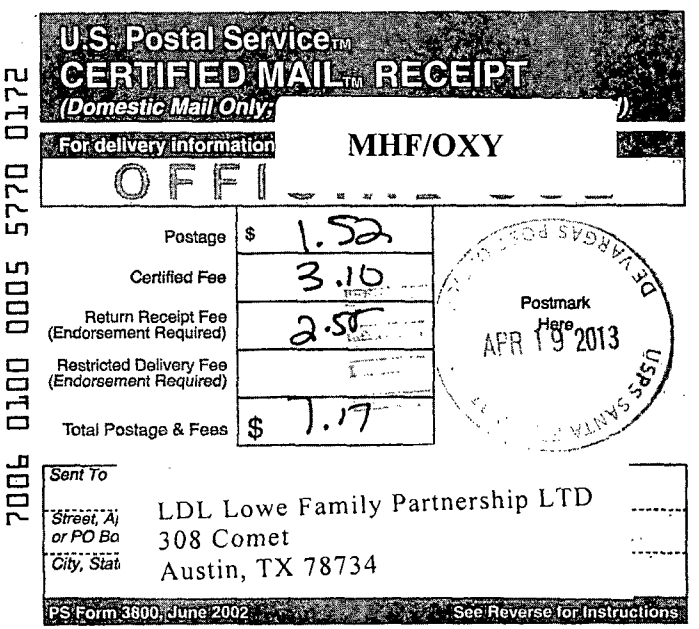
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To

Lawson Petroleum Company
2100 Philtower Building
Tulsa, OK 74103

7006 0100 0005 5770 0165



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To

LDL Lowe Family Partnership LTD
308 Comet
Austin, TX 78734

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0172

Returned

7006 0100 0005 5770 0189

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N…

For delivery information … MHF/OXY
OFFI…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street, Ap… or PO Bo…
City, Stat…

Legacy Reserves Operating, LP
303 West Wall, Suite 1600
Midland, TX 79701

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Legacy Reserves Operating, LP
303 West Wall, Suite 1600
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) KAREN INGLE C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5770 0189

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0196

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No…

For delivery information vis… MHF/OXY
OFFIC…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent T…
Street, or PO …
City, St…

Leo A. Szczotka
2867 Vista Mariana
Carlsbad, CA 92009-7112

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RETURN ADDRESS, FOLD AT D…

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leo A. Szczotka
2867 Vista Mariana
Carlsbad, CA 92009-7112

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) LEONA LALLIER C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

CARLSBAD CA 92009-9998 APR 23 2013

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi… 7006 0100 0005 5770 0196

…rm 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0202

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Leonard Ross Johnson
Street, Apt. No., or PO Box No.
3666 Janice Lane
City, State, ZIP+4
Abilene, TX 79603

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leonard Ross Johnson
3666 Janice Lane
Abilene, TX 79603

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Leonard Johnson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Leonard Johnson
C. Date of Delivery 4-24

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0202

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0219

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.55
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.19

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Lewis Oil & Gas Inc.
Street, Apt. No., or PO Box No.
P.O. Box 80035
City, State, ZIP+4
Midland, TX 79705

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 0226

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Linda B. Parrish & Linda Ann
Parrish Richardson, co-trustees
Street, A
or PO B
u/w/o M.C. Parrish, Jr.
City, Sta
P.O. Box 525
Willis, TX 77328

PS Form 3800, June 2002 ...ctions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Linda B. Parrish & Linda Ann
Parrish Richardson, co-trustees
u/w/o M.C. Parrish, Jr.
P.O. Box 525
Willis, TX 77328

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

WILLIS TX 77378 APR 25 2013 USPS

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s... 7006 0100 0005 5770 0226

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0233

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE

Sent T
Lise Robidoux
Street
or PO
30 Wilson Street
City, S
Pawtucket, RI 02861

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0240

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Coverage Provided)

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 3.10

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, Ap or PO Bo
City, Stat

LM Robinson, LLC
P.O. Box 847
Ruidoso, NM 88255

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LM Robinson, LLC
P.O. Box 847
Ruidoso, NM 88255

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Helen Carr 4-26-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from s* 7006 0100 0005 5770 0240

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0257

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS

Sent To
Street, A or PO B
City, Sta

Lois A. Hankamp
5432 Shelley Way
Carmichael, CA 95608

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0264

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.07

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87

Sent To
Street, Apt. N
or PO Box N
City, State, Z

Lois A.LaMar
230 South State Street, Apt. 28
Zeeland, MI 49464

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lois A.LaMar
230 South State Street, Apt. ~~28~~ 160
Zeeland, MI 49464

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lois Lamar ☐ Agent ☐ Addressee

B. Received by (Printed Name): LOIS LAMAR
C. Date of Delivery: 4-22-13

D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic): 7006 0100 0005 5770 0264

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0271

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi

MHF/OXY

OFFIC

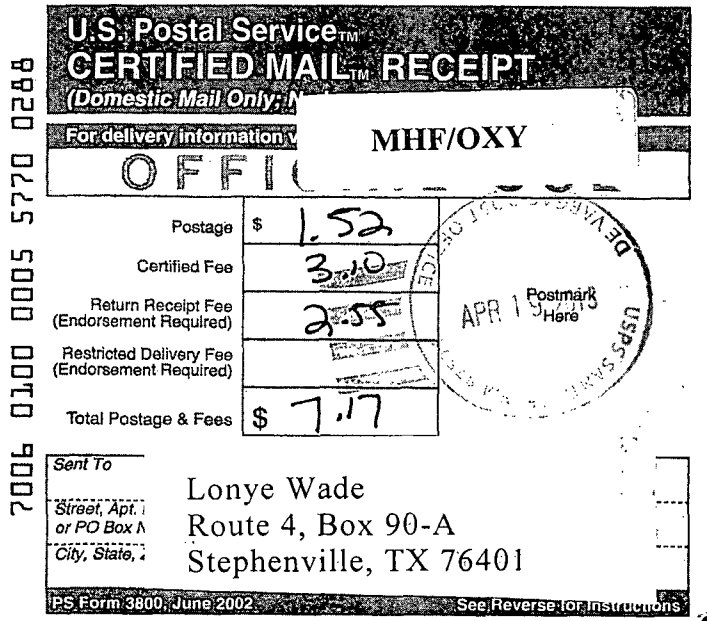
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 19 2013
USPS SANTA FE, NM 87

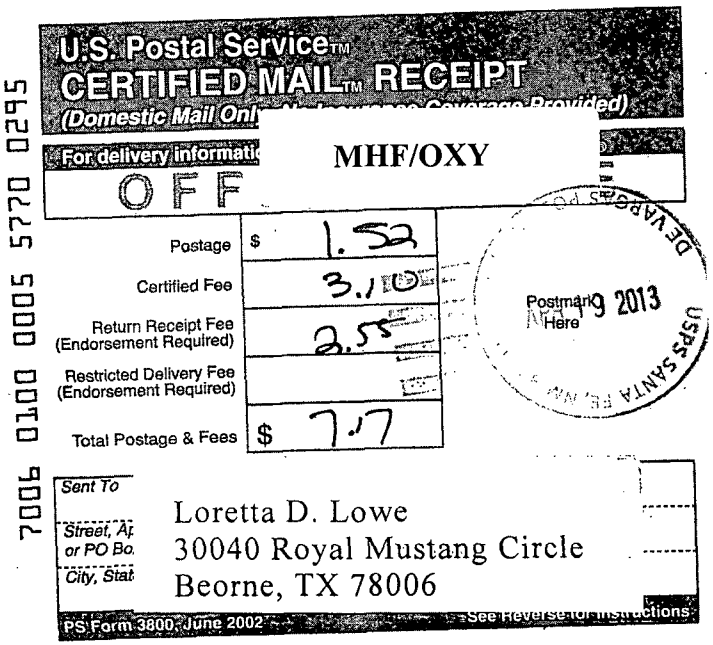
Sent To
Street, Apt.
or PO Box N
City, State,

Lola Carpenter
P.O. Box 31073
El Paso, TX

PS Form 3800, June 2002 — See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 1
Sent To
Street, Apt.
or PO Box
City, State,
Lonye Wade
Route 4, Box 90-A
Stephenville, TX 76401
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5770 0288

Returned


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only
For delivery informati
MHF/OXY
OFF
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
2013
Sent To
Street, Ap
or PO Bo
City, Stat
Loretta D. Lowe
30040 Royal Mustang Circle
Beorne, TX 78006
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5770 0295

7006 0100 0005 5770 0301

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State

Loretta Mary Voss
13 Bellaire Road
Wellesey, MA 02181

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 9315

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State

Lorrauine S. Black Trust
Lorraine S. Black, Trustee
6608 North Western Avenue #262
Oklahoma City, OK 73116

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lorrauine S. Black Trust
Lorraine S. Black, Trustee
6608 North Western Avenue #262
Oklahoma City, OK 73116

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Shyla Fohler — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9315

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9322

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFF

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street or PO
City,

Lyn Kent Jones
547 South Ash
Kermit, TX 79745

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lyn Kent Jones
547 South Ash
Kermit, TX 79745

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lyn Kent Jones ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

USPS APR 2013 KERMIT

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9322

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9339

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO Box
City, State,

M. Dion Lowe
2306 Cypress Point West
Austin, TX 78746

S Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 9346

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible])

For delivery information v[illegible]

MHF/OXY

OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sent To
Street, Ap[illegible]
or PO Bo[illegible]
City, Stat[illegible]

M. Ralph Lowe, Inc.
4600 Post Oak Place, Suite 307
Houston, TX 77027

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 9353

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information

MHF/OXY

OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sent T[illegible]
Street or PO
City, S[illegible]

M.Y. Merchant
P.O. Box 5315
Hobbs, NM 88240

PS Fo[illegible] — ructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

M.Y. Merchant
P.O. Box 5315
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9353

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0356

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent
Stre
or F
City

Mack H. Wooldridge
P.O. Box 3217
Albany, TX 76430

PS

nstructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mack H. Wooldridge
P.O. Box 3217
Albany, TX 76430

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☑ Agent
☐ Addressee

B. Received by (Printed Name) Ken Lawrence
C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service lab) 7006 0100 0005 5770 0356

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0349

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; I

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, Ap
or PO Box
City, State

Marathon Oil Company
P.O. Box 552
Midland,TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0332

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87504

Sent To
Margaret D. Wiley
Street, Apt. or PO Box: P.O. Box #1
City, State: Cape Vincent, NY 13618

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret D. Wiley
P.O. Box #1
Cape Vincent, NY 13618

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4/21/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 0332

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0325

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In

For delivery information visit

OFFIC — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87504

Sent To
Margaret Lewis Lidren
Street, A
or PO B
City, Sta
1243 NE 168th Street
Seattle, WA 98115

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret Lewis Lidren
1243 NE 168th Street
Seattle, WA 98115

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

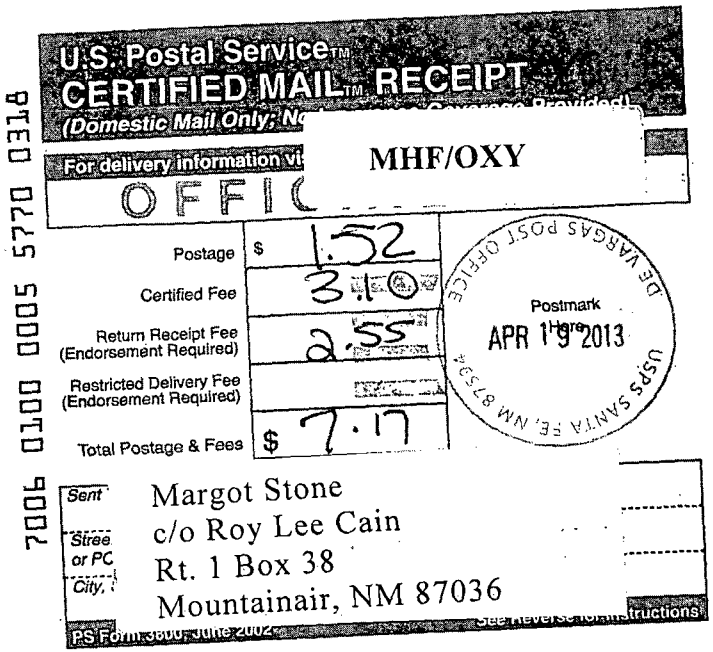
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

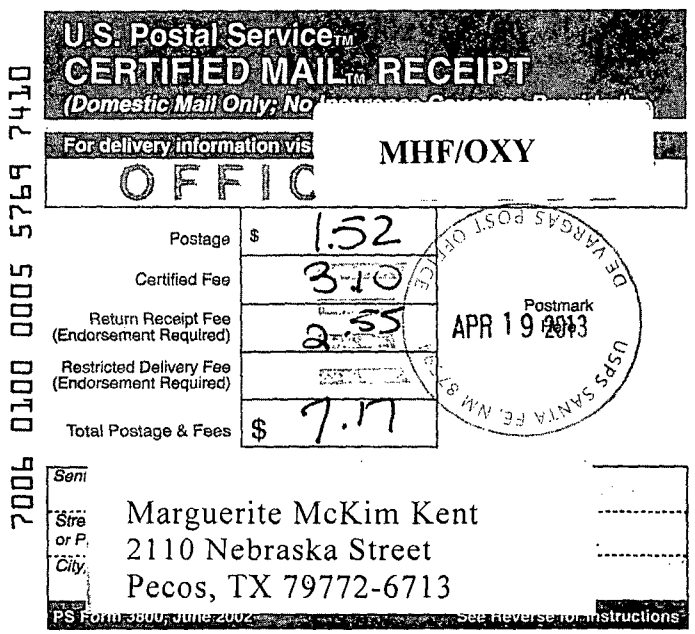
4. Restricted Delivery? (Extra Fee) ☐ Yes

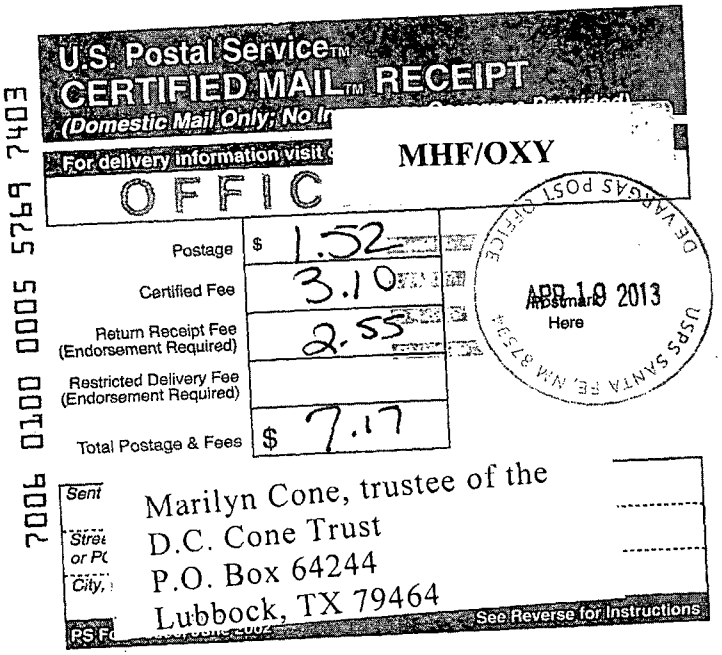
2. Article Number (Transfer from service label): 7006 0100 0005 5770 0325

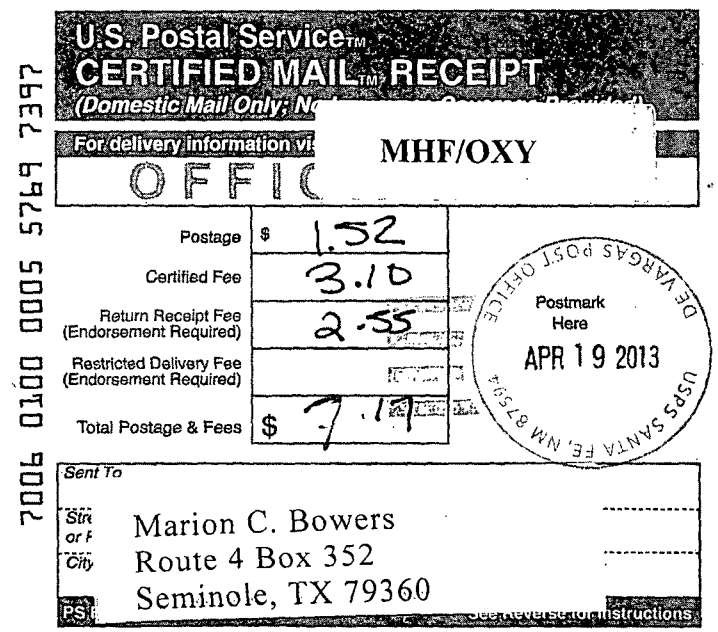
PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Postmark Here
APR 19 2013
7006 0100 0005 5770 0318
Sent
Stree
or PC
City,
Margot Stone
c/o Roy Lee Cain
Rt. 1 Box 38
Mountainair, NM 87036
PS Form 3800, June 2002
See Reverse for Instructions

Returned


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vis
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87
Postmark
APR 19 2013
7006 0100 0005 5769 7410
Sent
Stre
or P
City,
Marguerite McKim Kent
2110 Nebraska Street
Pecos, TX 79772-6713
PS Form 3800, June 2002
See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I
For delivery information visit
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
DE VARGAS POST OFFICE
APR 10 2013
Postmark Here
USPS SANTA FE, NM 87594
7006 0100 0005 5769 7403
Sent
Marilyn Cone, trustee of the
D.C. Cone Trust
P.O. Box 64244
Lubbock, TX 79464
See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
7006 0100 0005 5769 7397
Sent To
Marion C. Bowers
Route 4 Box 352
Seminole, TX 79360

Returned

7006 0100 0005 5769 7380

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible])

For delivery information v[illegible]

MHF/OXY

OFFIC[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent
Stree
or PC
City,

Marjorie Cone Kastman
P. O. Box 5930
Lubbock, TX 79408

PS Form 3800, June 2002 [illegible]structions

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marjorie Cone Kastman
P. O. Box 5930
Lubbock, TX 79408

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Brenda B. Boles ☐ Agent ☐ Addressee

B. Received by (Printed Name) BRENDA B. BOLES
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

DOWNTOWN STATION
APR 23 2013
LUBBOCK, TEXAS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from se[illegible]) 7006 0100 0005 5769 7380

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7373

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No [illegible] Coverage Provided)

For delivery information vi[illegible]

MHF/OXY

OFFIC[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO Bo
City, Stat

Marjory J. Dye Trust
5331 85th Street
Lubbock, TX 79424

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marjory J. Dye Trust
5331 85th Street
Lubbock, TX 79424

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Steve Payton
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number
(Transfer from service) 7006 0100 0005 5769 7373

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7366

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent T
Street
or PO
City, S

Mark Boner
3728 James Rd.
Memphis, TN 38128

PS Form 3800, June 2002 ... tructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mark Boner
3728 James Rd.
Memphis, TN 38128

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] BONER C. Date of Delivery 4 22 13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from se* 7006 0100 0005 5769 7366

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7359

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins *Coverage Provided)*

For delivery information visit ou

MHF/OXY

OFFICI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, A
or PO Bc
City, Stai

Mark P Godsey trustee of the Mark P. Godsey Revocable Trust u/t/a 12/22/1994
3701 S. Orange Circle
Broken Arrow, OK 74011-1103

Form 3800, June 2002 ... See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mark P Godsey trustee of the Mark P. Godsey Revocable Trust u/t/a 12/22/1994
3701 S. Orange Circle
Broken Arrow, OK 74011-1103

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

B. Received by (Printed Name) D[illegible] C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Numbe *(Transfer from* 7006 0100 0005 5769 7359

PS 3811, February 2004 Domestic Return Receipt 2595-02-M-1540

7006 0100 0005 5769 7342

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO Bo
City, Sta

Marshall & Winston, Inc.
P.O. Box 50880
Midland, TX 79710

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marshall & Winston, Inc.
P.O. Box 50880
Midland, TX 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Melanie Aguier ☐ Agent ☐ Addressee

B. Received by (Printed Name) Melanie Aguier C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from serv 7006 0100 0005 5769 7342

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7601

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent T
Street
or PO
City,

Marshall T. Steves trustee of
the Galt Trusts
P.O.Box 171312
San Antonio, TX 782217

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marshall T. Steves trustee of
the Galt Trusts
P.O.Box 171312
San Antonio, TX 782217

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lissa Allen ☐ Agent ☐ Addressee

B. Received by (Printed Name) LISSA ALLEN C. Date of Delivery 5-1-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s 7006 0100 0005 5769 7601

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7595

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM 87504

Sent To
Martha Lou Hester Beaird & Dan L.
Street, or PO I Beaird trustees of th Beaird Revocable
City, S Trust, c/o Oklahoma Foundation
5121 McKinney Avenue
Dallas, TX 75205

PS Form 3800, June 2002 ...ructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martha Lou Hester Beaird & Dan L.
Beaird trustees of th Beaird Revocable
Trust, c/o Oklahoma Foundation
5121 McKinney Avenue
Dallas, TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) John R. Hussen
C. Date of Delivery 04.22.13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from servic...* 7006 0100 0005 5769 7595

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7588

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Martha Maki
Street, or PO B 5942 46th Avenue SW
City, St Seattle, WA 98136

PS Form 3800, June 2002 ...ructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Martha Maki
5942 46th Avenue SW
Seattle, WA 98136

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery 4.22.13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from ...* 7006 0100 0005 5769 7588

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7571

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information
OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Marx Robidoux
Street, Apt. or PO Box
30 Bellevue Avenue
City, State,
Cumberland, RI 02864

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marx Robidoux
30 Bellevue Avenue
Cumberland, RI 02864

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service: 7006 0100 0005 5769 7571

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5772 0002

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; Coverage Provided)
For delivery information
OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Sent To
Mary Birdwell
Street, Ap
Box 157
or PO Bo
City, Stat
Dimmitt, TX 79027

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 6918

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Mary Carol Lay Jackson
Street, Apt. No., or PO Box No.
81 Deerwoods Lane
City, State, ZIP+4
Brevard, NC 28712

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 6901

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Mary Lee Saunders
Street, Apt. No., or PO Box No.
210 Calhoun Street
City, State, ZIP+4
Cuero, TX 77954-4719

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Lee Saunders
210 Calhoun Street
Cuero, TX 77954-4719

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mary Lee Saunders ☐ Agent ☐ Addressee

B. Received by (Printed Name) Mary Lee Saunders
C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 6901

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 8745

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

MHF/OXY

For delivery information visit
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO Bc
City, Stat

Mary Matthews
1239 Stillwell
Wichita, KS 67213

PS Form [illegible] See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Matthews
1239 Stillwell
Wichita, KS 67213

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mary A. Matthews ☐ Agent ☐ Addressee

B. Received by (Printed Name) Mary A Matthews C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 8745

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 8752

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N Coverage Provided)

MHF/OXY

For delivery information v
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Street, Apt. N
or PO Box N
City, State, Z

Mary Worthington & Joe
715 Grant Avenue
Dimmitt, TX 79027-3109

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 8356

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM
DE VARGAS POST

Sent To
Street, Apt. No., or PO Box
City, State

Max W. Coll, III
7625-2 El Centro Blvd.
Las Cruces, NM 88012

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Max W. Coll, III
7625-2 El Centro Blvd.
Las Cruces, NM 88012

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Max Coll
C. Date of Delivery 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8356

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 8349

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 10 2013
USPS SANTA FE NM
DE VARGAS POST

Sent To
Street, Apt. No., or PO Box
City, State

McCaw & Nix c/o William J.
McCaw
P.O. Box 376
Artesia, NM 88211

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

McCaw & Nix c/o William J.
McCaw
P.O. Box 376
Artesia, NM 88211

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) ANDREA WATTS
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ARTESIA NM 88210
APR 22 2013

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 8349

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6895

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here: APR 19 2013 — DE VARGAS POST OFFICE — USPS SANTA FE, NM

Sent To
Melanie Coll DeTempe
Street, Apt. or PO Box: 5653 Tobias Avenue
City, State: Van Nuys, CA 91411

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Melanie Coll DeTempe
5653 Tobias Avenue
Van Nuys, CA 91411

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

VAN NUYS CA USPS FEB 22 2013 REGISTRY

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 6895

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0363

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 — DE VARGAS POST OFFICE — USPS SANTA FE, NM

Sent To
Metcalfe Oil, LP
Street, Apt. or PO Box: 1308 Lake Street
City, State: Fort Worth, TX 76102

PS Form — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Metcalfe Oil, LP
1308 Lake Street
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Jesse Todd ☑ Agent ☐ Addressee

B. Received by (Printed Name): Jesse Todd | C. Date of Delivery: 4/22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 0363

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0370

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87534

Sent To
Street, Apt. or PO Box
City, State

Michael C. Dean
6006 Balcones #32
El Paso, TX 79912

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael C. Dean
6006 Balcones #32
El Paso, TX 79912

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J. Dean ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s) 7006 0100 0005 5770 0370

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0387

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87534

Sent To
Street, Apt. or PO Box
City, State

Michael E. Chapman
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael E. Chapman
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Soph L Sl ☒ Agent ☒ Addressee

B. Received by (Printed Name) SOPHIE CHEL — C. Date of Delivery 4-25-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numl (Transfer fro) 7006 0100 0005 5770 0387

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501
Postmark Here
APR 16 2013

Sent To
Michael F. Cusack, II
Street or PO
6003 Valkeith
City,
Houston, TX 77096

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5720 0394

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael F. Cusack, II
6003 Valkeith
Houston, TX 77096

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Michael F Cusack
C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5720 0394

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501
Postmark Here
APR 16 2013

Sent To
Michael F. Gilmer
Street or PO
P.O. Box 384
City,
Columbia, TN 38402

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5720 0400

Returned

7006 0100 0005 5770 0417

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87
DE VARGAS POST OFFICE

Sent To
Street, A
or PO B
City, Sta

Michael Harrison Moore 2006 Trust
Michael Harrison Moore, Trustee
P.O. Box 51570
Midland, TX 79710

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Michael Harrison Moore 2006 Trust
Michael Harrison Moore, Trustee
P.O. Box 51570
Midland, TX 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Terri Turner ☐ Agent ☐ Addressee

B. Received by (Printed Name) Terri Turner
C. Date of Delivery 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5770 0417

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0424

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87
DE VARGAS POST OFFICE

Sent To
Street, A
or PO B
City, Sta

Middle Bay Oil Company
115 South Dearborn Street
Mobile, AL 36602

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0431

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street, A
or PO Bo
City, Stat

Mildred M. Welch
P.O. Box 4308
Parkersburg, WV 26101

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mildred M. Welch
P.O. Box 4308
Parkersburg, WV 26101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Mary Welch ☐ Agent ☐ Addressee

B. Received by (Printed Name) Mary Welch C. Date of Delivery 4.23.13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from ser) 7006 0100 0005 5770 0431

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0448

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

Sent To
Street, Apt or PO Box
City, State,

Minnie Mae Dalmont Cartlidge
P.O. Box 14119
Albuquerque, NM

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 0455

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 — DE VARGAS POST OFFICE — USPS SANTA FE, NM 87...

Sent To: MJK Mineral Partners Ltd.
Street, Apt. No., or PO Box No.: 500 W. Texas Ave., Suite 1230
City, State, ZIP+4: Midland, TX 79701

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MJK Mineral Partners Ltd.
500 W. Texas Ave., Suite 1230
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4-22

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0455

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0462

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here: APR 19 2013 — DE VARGAS POST... — USPS SANTA FE, NM 87...

Sent To: Mohammed Yamin Merchant
Street, Apt. No., or PO Box No.: P.O. Box 5970
City, State, ZIP+4: Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mohammed Yamin Merchant
P.O. Box 5970
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0462

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5720 0479

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Ap
or PO Box
City, State

Moranco
P.O. Box 1860
Hobbs, NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5720 0486

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Ap
or PO Box
City, State

Moss M. Kent
907 Shoshoni
Cheyenne, WY 82009

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 0493

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87594
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE

Sent To
Street, Ap
or PO Bo
City, State

Mrs. M.J. Baker
c/o Tedrick Hal Ussery
5018 Eunice Hwy.
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mrs. M.J. Baker
c/o Tedrick Hal Ussery
5018 Eunice Hwy.
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Rhonda Ussery
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0493

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0509

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vi

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

SANTA FE, NM 87594
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE

Sent To
Street, A
or PO Bo
City, Stat

Namy Energy, LP
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Namy Energy, LP
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible]
C. Date of Delivery [illegible]

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5770 0509

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0516

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
APR 19 2013
DE VARGAS POST OFFICE

Sent To
Nancy L. Thompson
Street, Apt. No., or PO Box No. 320 Pleasant Drive SE
City, State, ZIP+4 Cedar Rapids, IA 52403

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nancy L. Thompson
320 Pleasant Drive SE
Cedar Rapids, IA 52403

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) M.O. VALERIO C. Date of Delivery 4/16/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0516

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0523

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
APR 19 2013
DE VARGAS POST OFFICE

Sent To
Nell P. Lowe
Street, Apt. No., or PO Box No. P.O. Box 53775
City, State, ZIP+4 Lubbock, TX 79453

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nell P. Lowe
P.O. Box 53775
Lubbock, TX 79453

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MEGARON CLERK APR 19 2013 LUBBOCK TX

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 0523

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0530

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
VARGAS POST OFFICE

Sent To
Street, Ap
or PO Box
City, State

Nowery J. Smith
16420 Park Ten Place,
Suite 415
Houston, TX 77084

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nowery J. Smith
16420 Park Ten Place,
Suite 415
Houston, TX 77084

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Nowery Smith C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Num (Transfer fr 7006 0100 0005 5770 0530

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0547

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N Coverage Provided)

For delivery information v

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
VARGAS POST OFFICE

Sent To
Street, Ap
or PO Box
City, State

Odell L. Lowe
P.O. Box 53775
Lubbock, TX 79453

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Odell L. Lowe
P.O. Box 53775
Lubbock, TX 79453

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5770 0547

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0554

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

APR 19 2004

DEVARS POST OFFICE

Sent To
Street, Apt. No.
or PO Box No
City, State, Zi

Opal Scallon
1706 Alexander
Pueblo, CO 81001

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5770 0066

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here

Sent To
Street, Ap
or PO Bo
City, Stat

Optometric Extension Program
Foundation, Inc.
1921 East Carnegie Avenue,
Suite 3-L
Santa Ana, CA 92705-5510

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Optometric Extension Program
Foundation, Inc.
1921 East Carnegie Avenue,
Suite 3-L
Santa Ana, CA 92705-5510

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 0066

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 0073

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 3 2013 USPS SANTA FE, NM

Sent To: Orval Dalmont
Street, Apt. or PO Box: Route 1, Box 95
City, State: McAllister, OK 74501

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 0080

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 USPS SANTA FE, NM 87594 DE VARGAS POST OFFICE

Sent To: Overton Energy Investments VI, LLC
Street, Apt. or PO Box: 4265 San Felipe #800
City, State: Houston, TX 77027

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Overton Energy Investments VI, LLC
4265 San Felipe #800
Houston, TX 77027

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): Moore — C. Date of Delivery

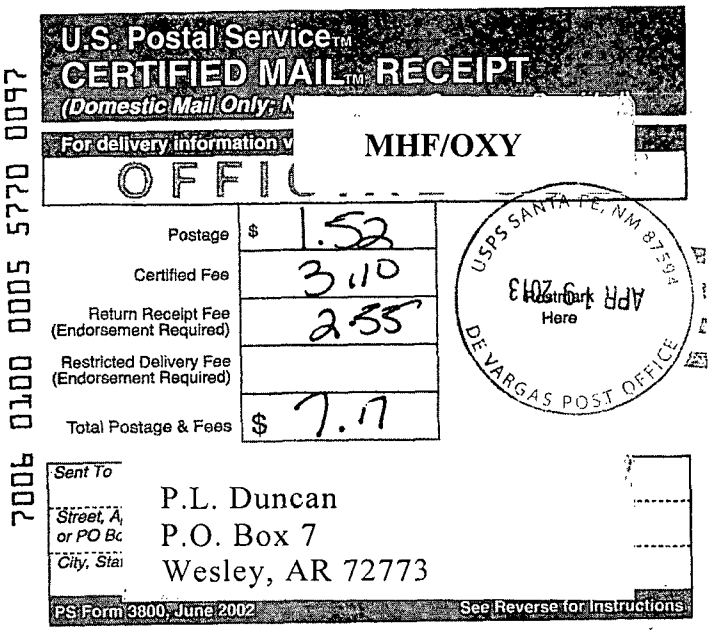
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servic): 7006 0100 0005 5770 0080

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v
OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87594
APR 9 2013
Postmark Here
DE VARGAS POST OFFICE

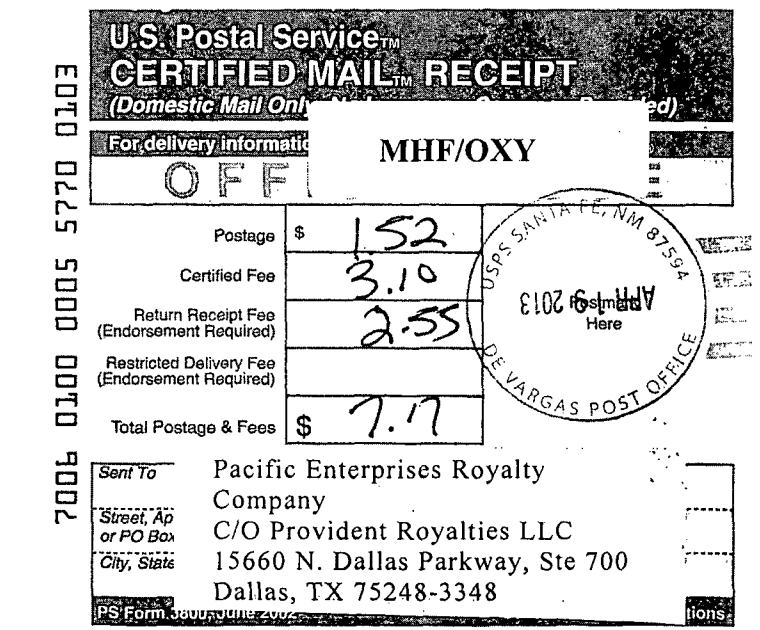
Sent To
Street, A
or PO Bc
City, Sta

P.L. Duncan
P.O. Box 7
Wesley, AR 72773

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5720 0097

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Onl ed)
For delivery informatic
OFF
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87594
APR 9 2013
Postmark Here
DE VARGAS POST OFFICE

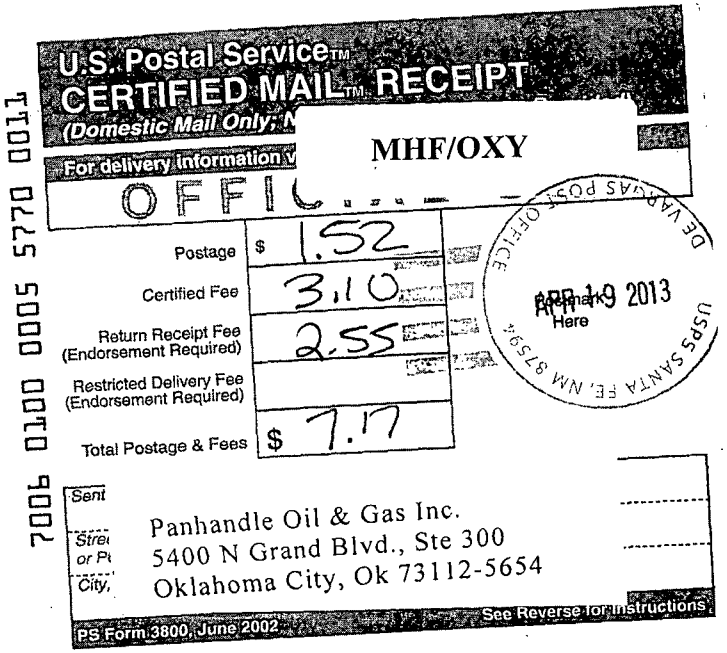
Sent To
Street, Ap
or PO Box
City, State

Pacific Enterprises Royalty Company
C/O Provident Royalties LLC
15660 N. Dallas Parkway, Ste 700
Dallas, TX 75248-3348

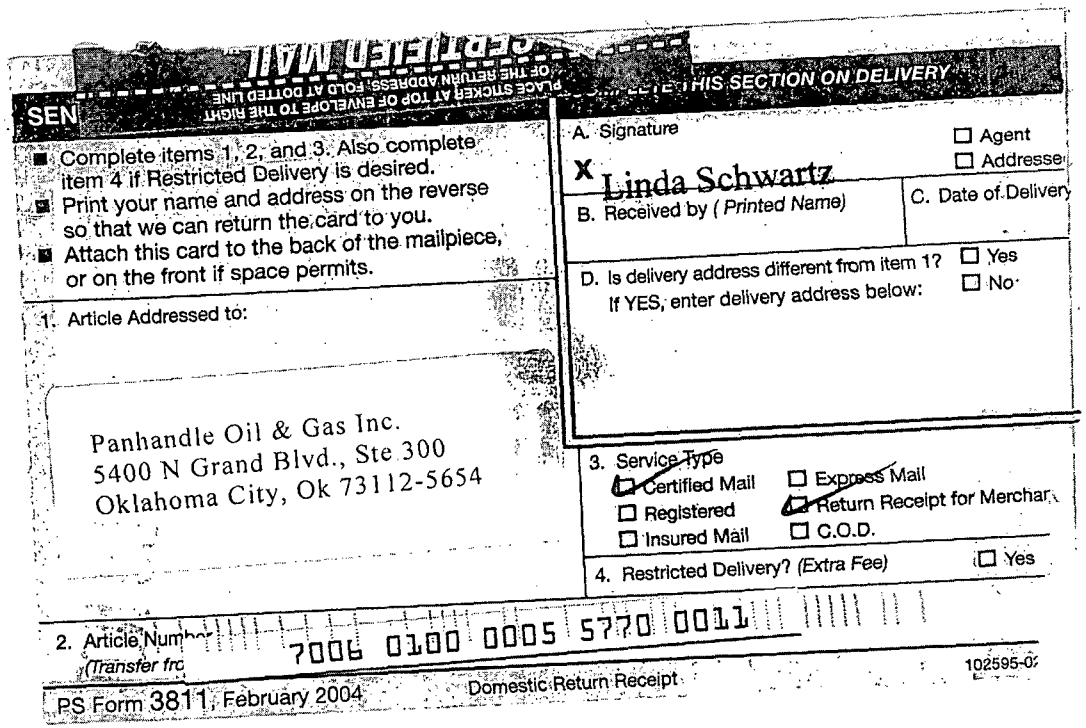
PS Form 3800, June 200 tions

7006 0100 0005 5720 0103

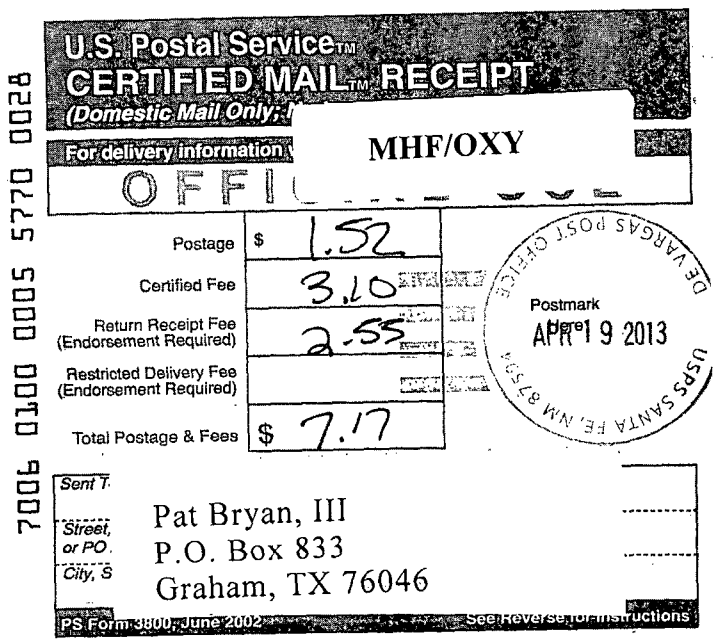
Returned



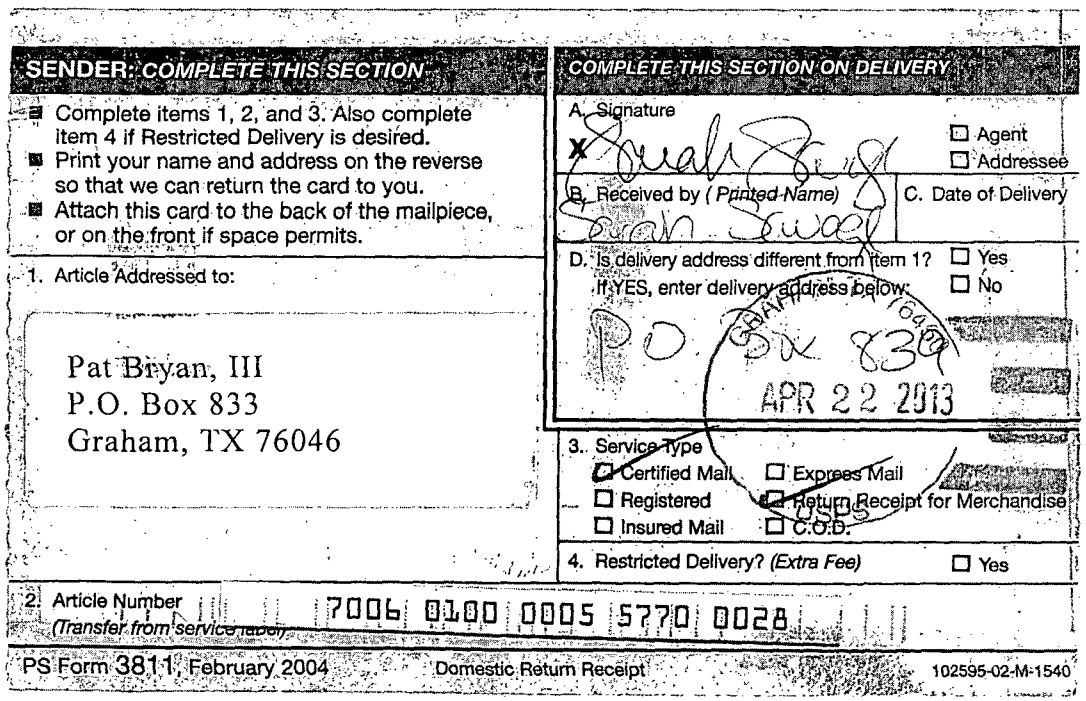
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594
Sent
Stree
or P
City,
Panhandle Oil & Gas Inc.
5400 N Grand Blvd., Ste 300
Oklahoma City, Ok 73112-5654
7006 0100 0005 5770 0011
PS Form 3800, June 2002
See Reverse for Instructions



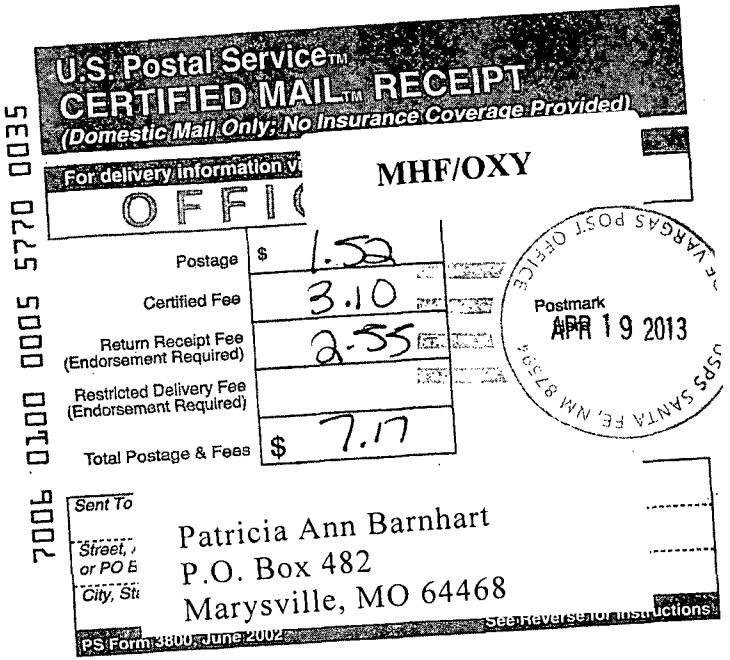
SEN
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE
COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Panhandle Oil & Gas Inc.
5400 N Grand Blvd., Ste 300
Oklahoma City, Ok 73112-5654
A. Signature
X Linda Schwartz
☐ Agent
☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchar
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Numb (Transfer fro 7006 0100 0005 5770 0011
PS Form 3811, February 2004 Domestic Return Receipt 102595-0



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;
For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594
Sent T
Street, or PO
City, S
Pat Bryan, III
P.O. Box 833
Graham, TX 76046
7006 0100 0005 5770 0028
PS Form 3800, June 2002
See Reverse for Instructions



SENDER: COMPLETE THIS SECTION
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Pat Bryan, III
P.O. Box 833
Graham, TX 76046
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
P.O. Box 833
GRAHAM TX 76046
APR 22 2013
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7006 0100 0005 5770 0028
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark
APR 19 2013

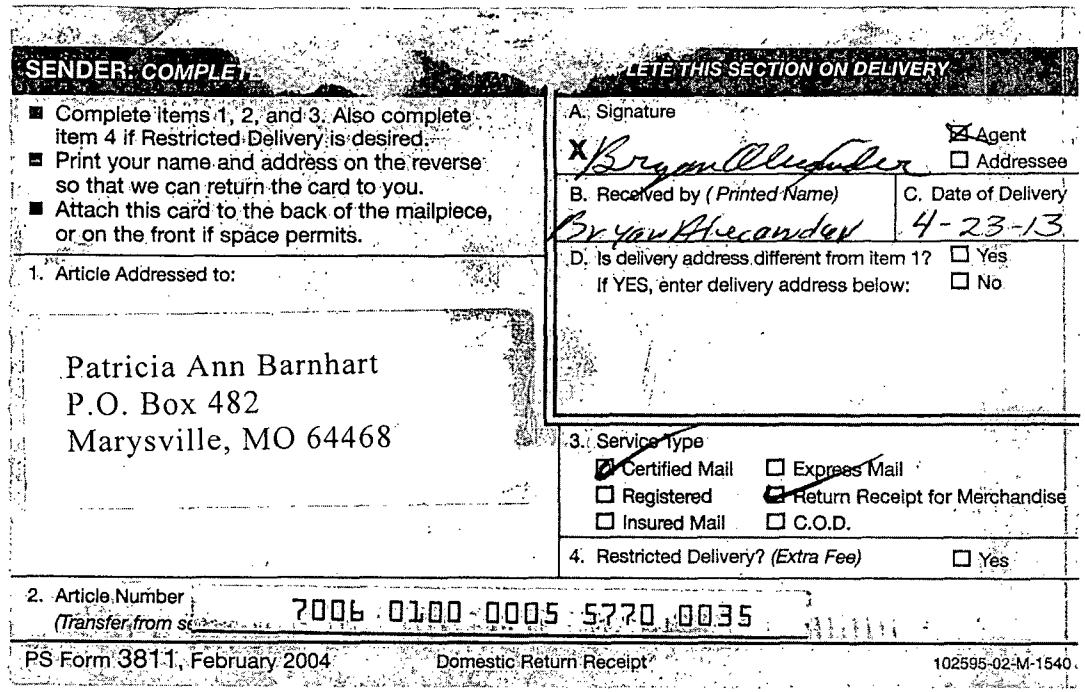
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, or PO B
City, St

Patricia Ann Barnhart
P.O. Box 482
Marysville, MO 64468

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 0035



SENDER: COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Patricia Ann Barnhart
P.O. Box 482
Marysville, MO 64468

A. Signature
X Bryan Alexander
☒ Agent ☐ Addressee

B. Received by (Printed Name) Bryan Alexander
C. Date of Delivery 4-23-13

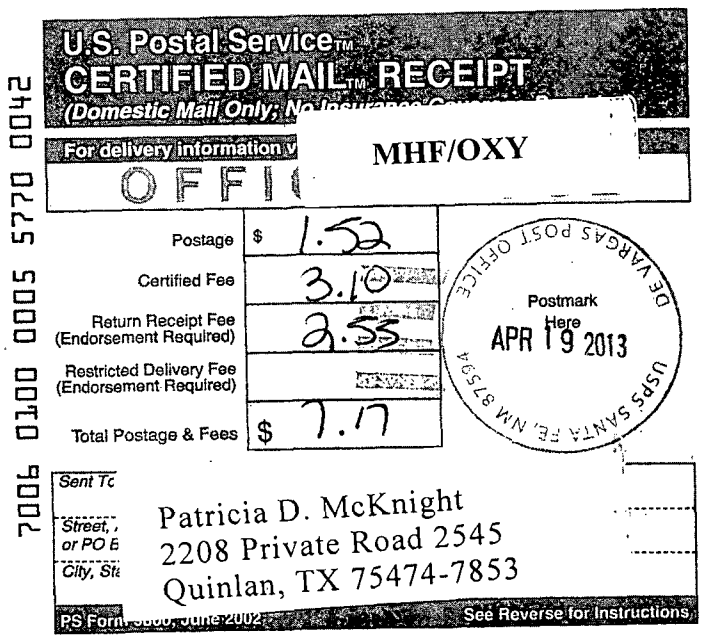
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se 7006 0100 0005 5770 0035

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information v

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

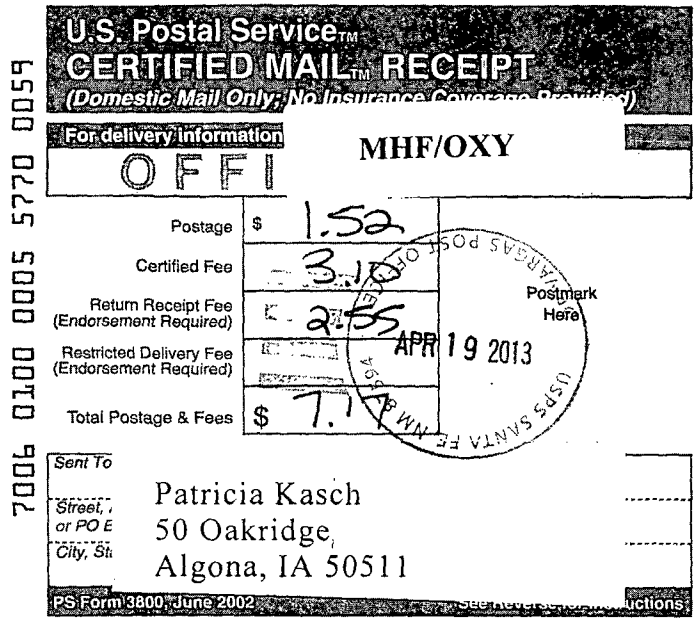
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To
Street, or PO B
City, St

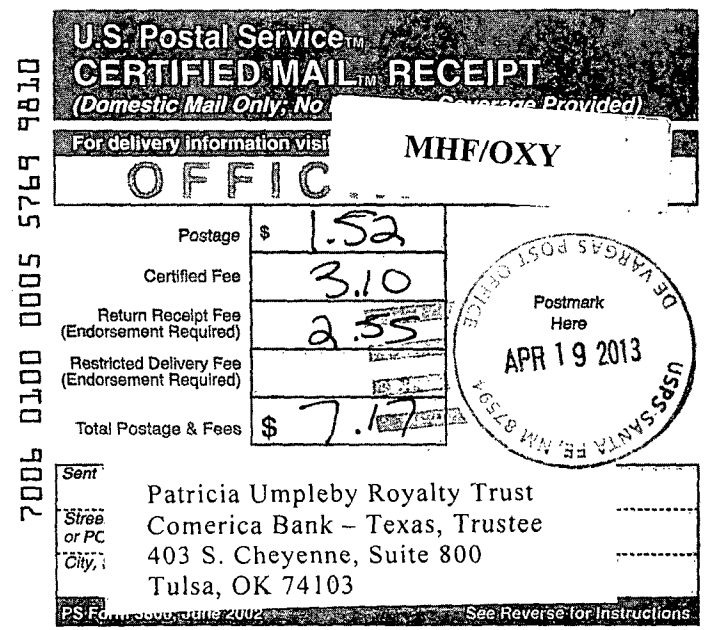
Patricia D. McKnight
2208 Private Road 2545
Quinlan, TX 75474-7853

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 0042



Returned



Returned

7006 0100 0005 5769 9827

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 8750

Sent
Stree
or P
City,

Patrick A. McGinley
Revocable Trust
P.O. Box 3126
Tulsa, OK 74101

PS Form 3800, June 2002 ... structions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Patrick A. McGinley
Revocable Trust
P.O. Box 3126
Tulsa, OK 74101

IIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

DOWNTOWN STATION
APR 24 2013
74103 USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5769 9827

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9834

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 8750

Sent T
Street, or PO
City, S

Patrick Cusack
1837 South Dunsmuir Avenue
Los Angeles, CA 90019

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9841

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent To
Street, Ap
or PO Box
City, State

Pauline B.Lowe
317 Atlantic
Austin, TX 78734

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9858

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only

For delivery informatio

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Sent T
Street,
or PO
City, S

Pauline Dunbar Erekson
P.O. Box 264
Rocksprings, TX 78880

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pauline Dunbar Erekson
P.O. Box 264
Rocksprings, TX 78880

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Paula E Epperson ☐ Agent ☐ Addressee

B. Received by (Printed Name) Paula E Epperson
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

USPS ROCKSPRINGS TX 78880

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s 7006 0100 0005 5769 9858

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9865

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE USPS SANTA FE, NM 87501
APR 19 2013
Postmark Here

Sent To
Street or PO
City, S

Pauline R. Lucas
504 Shadylawn Avenue
Nokomis, FL 34275

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pauline R. Lucas
504 Shadylawn Avenue
Nokomis, FL 34275

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X P Lucas ☐ Agent ☐ Addressee

B. Received by (Printed Name) P LUCAS C. Date of Delivery 4-19-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5769 9865

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9872

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE USPS SANTA FE, NM 87501
APR 19 2013
Postmark Here

Sent To
Street, or PO B
City, Sta

Phillip J. Pennington
9239 Rowan Lane
Houston, TX 77036

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RETURN ADDRESS FOLD

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Phillip J. Pennington
9239 Rowan Lane
Houston, TX 77036

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Bettie Jane Pennington ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

DEMOSS STATION HOUSTON TEXAS
APR 22 2013

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from) 7006 0100 0005 5769 9872

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9889

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, or PO
City, St

Phyllis Audrey Hennessee
Route 1 Box 1174
Elkhart, TX 75839

PS Form 3800, June 2002 ... uctions

Returned

7006 0100 0005 5769 9896

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, Ap
or PO Box
City, State

Pogo Producing Company
700 Milam, Suite 3100
Houston, TX 77002

PS Form 3800, June 2002 ... See Reverse ... tions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pogo Producing Company
700 Milam, Suite 3100
Houston, TX 77002

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) John Stroeh
C. Date of Delivery 4-23

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 23 2013

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s) 7006 0100 0005 5769 9896

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9902

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Ponderosa Royalty LLC
Street, or PO
P.O. Box 10428
City, S
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ponderosa Royalty LLC
P.O. Box 10428
Midland, TX 79702

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

PO B 10425

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from ser...)* 7006 0100 0005 5769 9902

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9919

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Preglar Oil Company, LLC
Street, A
or PO Bo
P.O. Box 1722
City, Stat
Tulsa, OK 74101

PS Form 3800, June 2002 [illegible] tions

STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Preglar Oil Company, LLC
P.O. Box 1722
Tulsa, OK 74101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) CW
C. Date of Delivery 4.24.13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from s...)* 7006 0100 0005 5769 9919

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9926

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.65
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE [illegible] DEVARGAS POST OFFICE

Sent To
Street, Ap
or PO Bo
City, Stat

Preston G. Northrup
C/O Trinity Univeristy
1 trinity Place
San Antonio TX 78212-4674

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Preston G. Northrup
C/O Trinity Univeristy
1 trinity Place
San Antonio TX 78212-4674

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X M Butler ☐ Agent ☐ Addressee

B. Received by (Printed Name) M Butler C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s 7006 0100 0005 5769 9926

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9933

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE [illegible] DEVARGAS POST OFFICE

Sent
Street
or PO
City,

Quail Creek Royalty LLC
13831 Quail Pointe Drive
Oklahoma City, OK 73134

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Quail Creek Royalty LLC
13831 Quail Pointe Drive
Oklahoma City, OK 73134

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

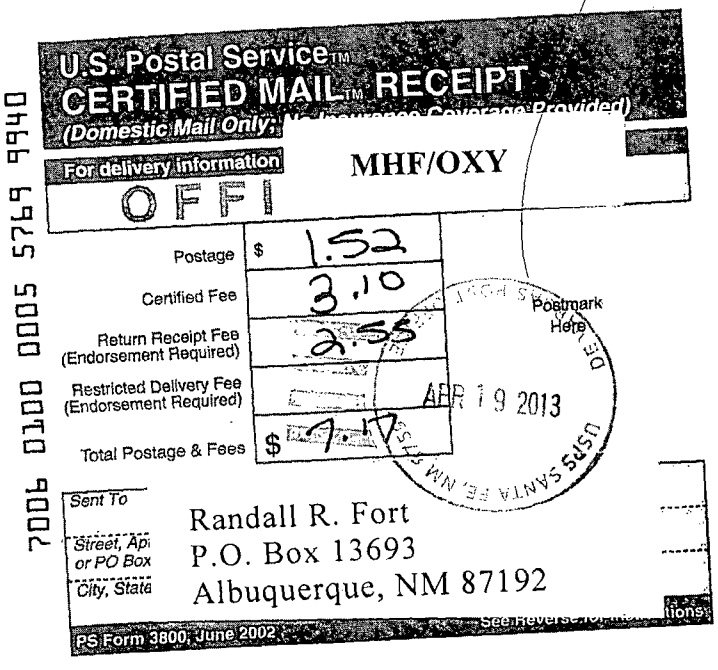
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

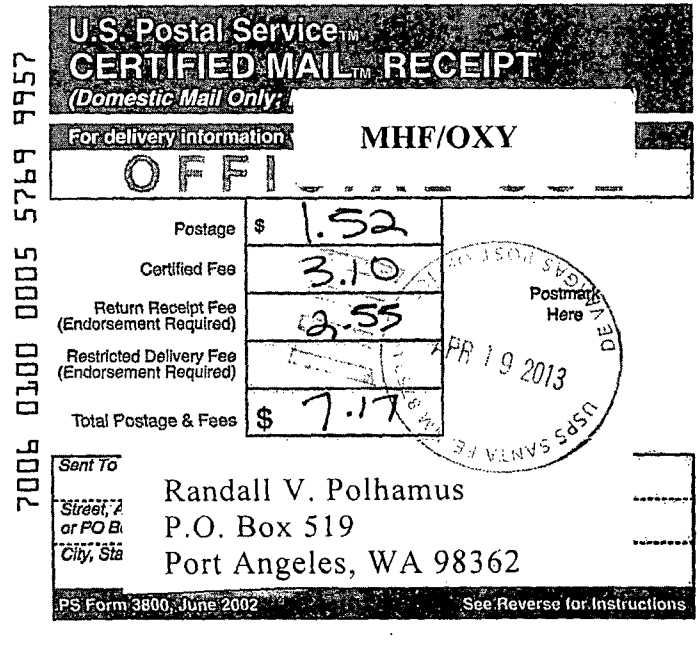
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5769 9933

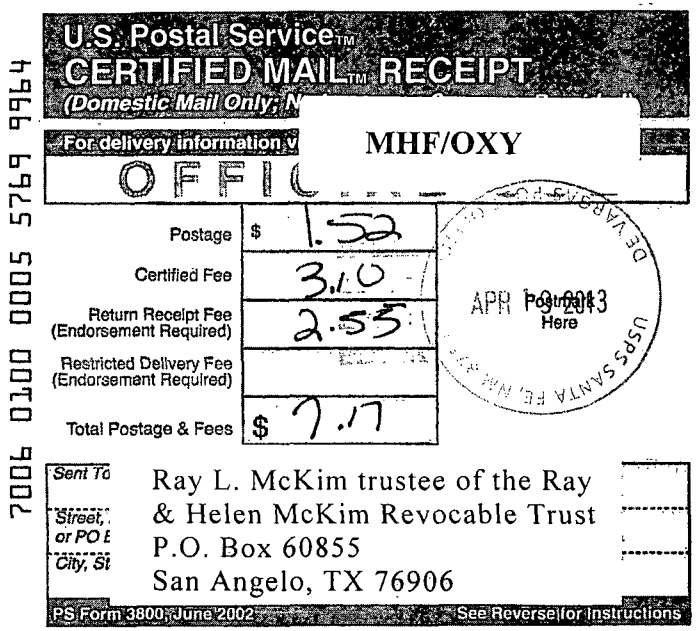
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



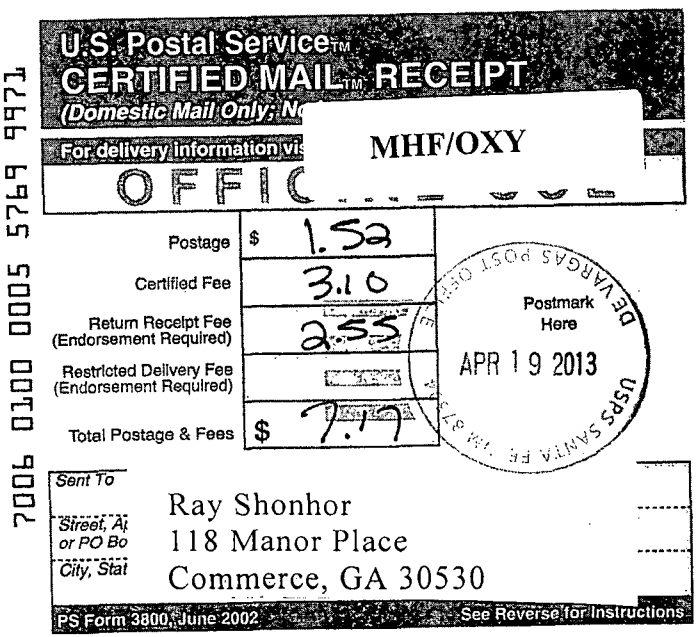
Returned



Returned


7006 0100 0005 5769 9964
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
APR 19 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87
Sent To
Street, Apt. or PO Box
City, St
Ray L. McKim trustee of the Ray
& Helen McKim Revocable Trust
P.O. Box 60855
San Angelo, TX 76906
PS Form 3800, June 2002
See Reverse for Instructions

Returned


7006 0100 0005 5769 9971
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
APR 19 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87
Sent To
Street, Apt. or PO Box
City, Stat
Ray Shonhor
118 Manor Place
Commerce, GA 30530
PS Form 3800, June 2002
See Reverse for Instructions

7006 0100 0005 5769 9988

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE USPS SANTA FE, NM 87501
APR 19 2013
Postmark Here

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP+4

Realeza Del Spear LP
P.O. Box 1684
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Realeza Del Spear LP
P.O. Box 1684
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): LORI SAUNDERS C. Date of Delivery: 4/29/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

Service Type
☑ Certified Mail ☐ Express Mail
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 9988

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9995

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DEVARGAS POST OFFICE USPS SANTA FE, NM 87501
APR 19 2013
Postmark Here

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP+4

Rebel Oil Company
P.O. Box 1684
Midland, TX 79702-1684

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rebel Oil Company
P.O. Box 1684
Midland, TX 79702-1684

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): LORI SAUNDERS C. Date of Delivery: 4/29/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

Service Type
☑ Certified Mail ☐ Express Mail
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)*: 7006 0100 0005 5769 9995

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 0004

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N… Coverage Provided)

For delivery information v…

MHF/OXY

OFFIC…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87

Sent To
Street, A… or PO Bo…
City, Stat…

Rector Oil Ltd.
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rector Oil Ltd.
777 Main Street, Suite 3200
Fort Worth, TX 76102

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Erica W. — C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from se…) 7006 0100 0005 5770 0004

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9575

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N… Coverage Provided)

For delivery information v…

MHF/OXY

OFFIC…

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

Richard L. Lutrell
P.O. Box 2421
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard L. Lutrell
P.O. Box 2421
Midland, TX 79702

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X R. Clayton Lutrell ☐ Agent ☐ Addressee

B. Received by (Printed Name) R. Clayton Lutrell — C. Date of Delivery 4/29/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ~~☑ Return Receipt for Merchandise~~
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9575

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9568

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible] Coverage Provided)

For delivery information v[illegible]

MHF/OXY

OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST
USPS SANTA FE, NM

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIF

Richard Lyons Moore 2006 Trust
Richard Lyons Moore, Trustee
1150 N. Carroll Ave.
Southlake, TX 76092

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Lyons Moore 2006 Trust
Richard Lyons Moore, Trustee
1150 N. Carroll Ave.
Southlake, TX 76092

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Liz Pena C. Date of Delivery 4-19-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9568

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9582

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[illegible] Coverage Provided)

For delivery information [illegible]

MHF/OXY

OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST
USPS SANTA FE, NM

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIF

Richard Lyons Moore et al
P. O. Box 94077
Southlake TX 76092

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard Lyons Moore et al
P. O. Box 94077
Southlake TX 76092

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Liz Pena C. Date of Delivery 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from [illegible]) 7006 0100 0005 5769 9582

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9599

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...
APR 19 2013
Postmark Here

Sent To
Street, Ap or PO Bo
City, Stat

Rio Grande Investment
Partners Inc.
P.O. Box 290748
Kerrville, TX 78029

PS Form ...tions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rio Grande Investment
Partners Inc.
P.O. Box 290748
Kerrville, TX 78029

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) Walter Ford C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☑ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Nu (Transfer fr 7006 0100 0005 5769 9599

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9605

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...
Postmark Here
APR 19 2013

Sent To
Street, or PO B
City, St

Robert C. Crotty
3521 S. Western
Dallas, TX 75225

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert C. Crotty
3521 S. Western
Dallas, TX 75225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-27-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9605

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9612

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501

Sent To
Street, Apt. or PO Box
City, State,

Robert G. Polhamus
9321 McCabe
El Paso, TX 79925

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9629

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501

Sent T
Street, or PO
City, S

Robert Hannifin
P.O. Box 218
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert Hannifin
P.O. Box 218
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cindy Blair ☐ Agent ☐ Addressee

B. Received by (Printed Name) Cindy Blair
C. Date of Delivery 4-30-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9629

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9636

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

Robert Hooper
P.O. Box 733
Roswell, NM 88202

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert Hooper
P.O. Box 733
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sharon Howell ☒ Agent ☐ Addressee

B. Received by (Printed Name) SHARON HOWELL C. Date of Delivery APR 29 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

88201

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 9636

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9643

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit our website at www.usps.com

MHF/OXY

OFFIC

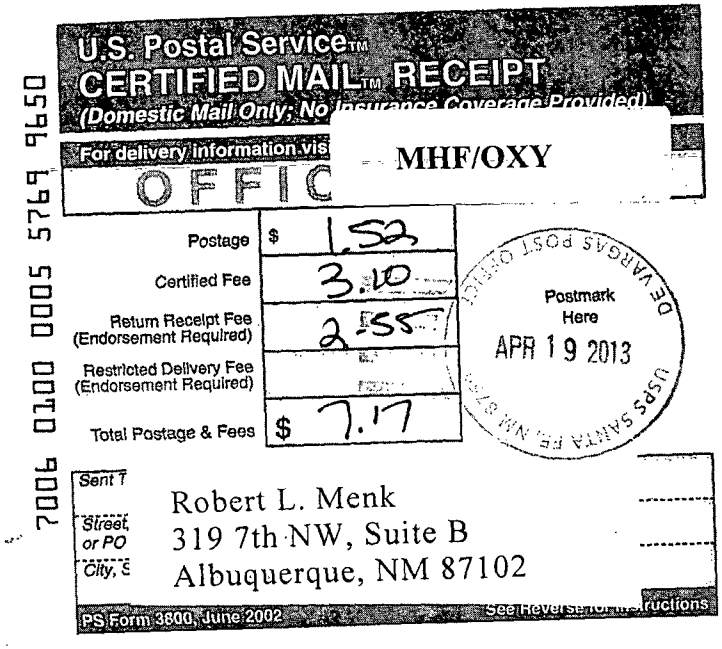
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM 87501

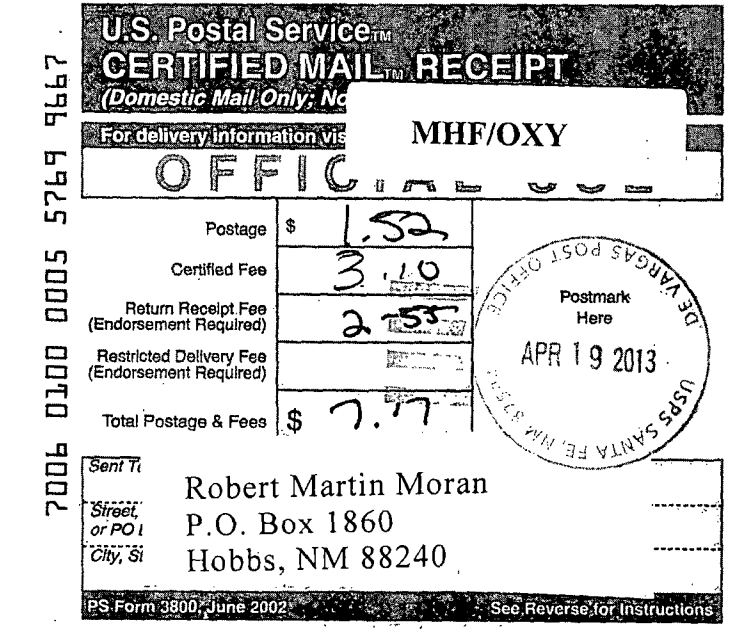
Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

Robert J. Anderson
31 Skyline Drive
Wellesey, MA 02181

PS Form 3800, June 2002 — See Reverse for Instructions



Returned



Returned

7006 0100 0005 5769 9674

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO B
City, Sta

Robert O. Lane, Individually and
Trustee of Virginia Bell Lane Family
Trust
13845 Creekside Place
Dallas, TX 75240

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 9681

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO Bo
City, Stat

Robert R. Dean
6006 Balcones #32
El Paso, TX 79912

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert R. Dean
6006 Balcones #32
El Paso, TX 79912

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 4/22

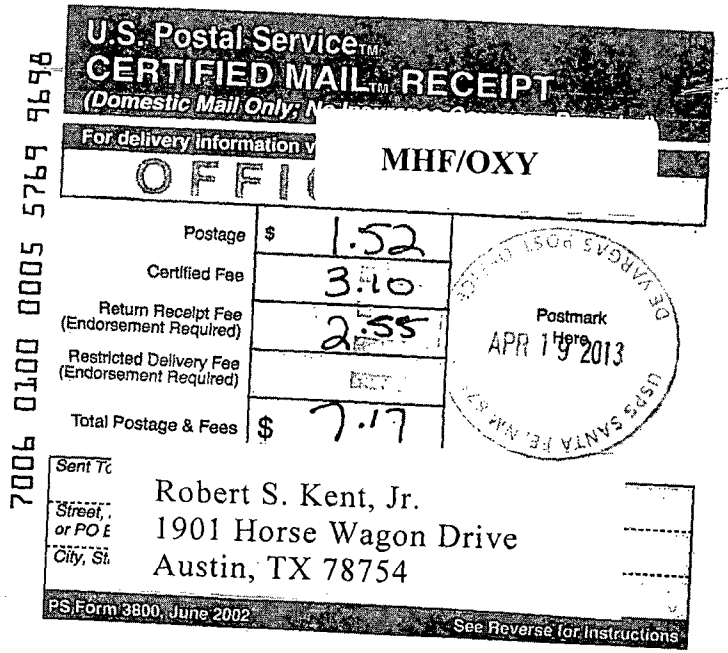
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

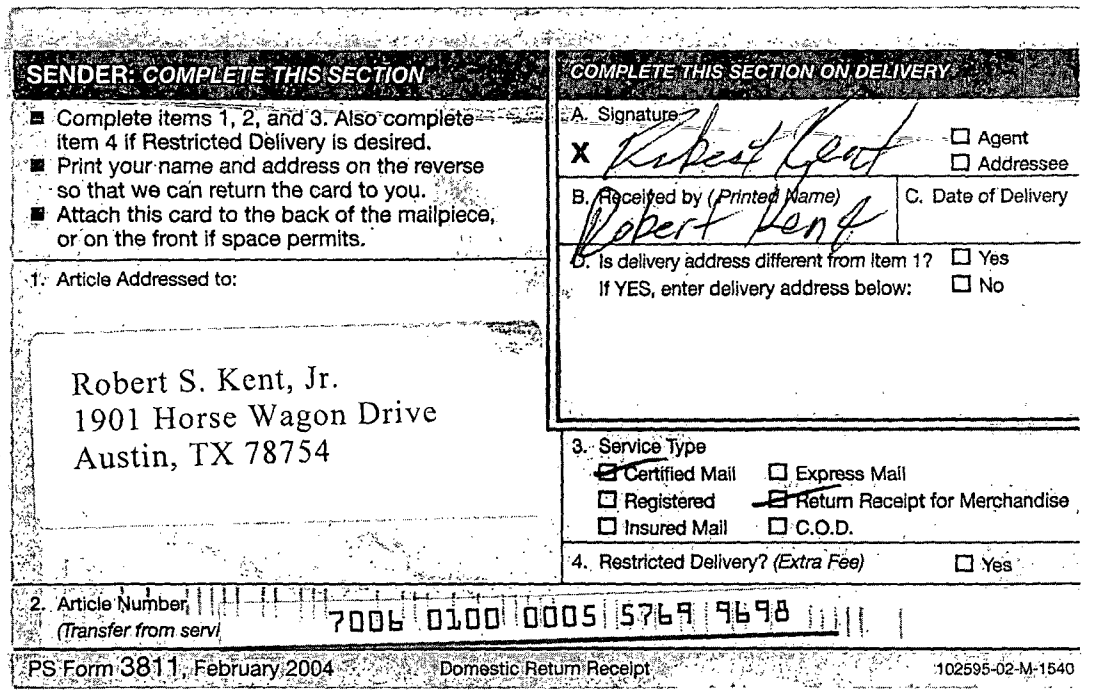
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

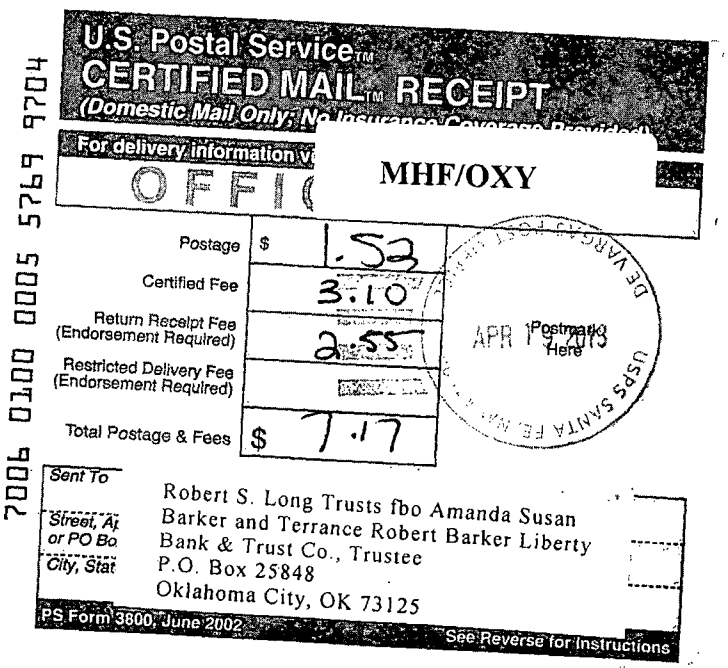
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s 7006 0100 0005 5769 9681

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
OFFICIAL USE
MHF/OXY
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM
Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4
Robert S. Kent, Jr.
1901 Horse Wagon Drive
Austin, TX 78754
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 9698


SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Robert S. Kent, Jr.
1901 Horse Wagon Drive
Austin, TX 78754
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X Robert Kent
Agent
Addressee
B. Received by (Printed Name) Robert Kent
C. Date of Delivery
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
3. Service Type
Certified Mail
Express Mail
Registered
Return Receipt for Merchandise
Insured Mail
C.O.D.
4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from servi 7006 0100 0005 5769 9698
PS Form 3811, February 2004
Domestic Return Receipt
102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com
OFFICIAL USE
MHF/OXY
Postage $ 1.53
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM
Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4
Robert S. Long Trusts fbo Amanda Susan Barker and Terrance Robert Barker Liberty Bank & Trust Co., Trustee
P.O. Box 25848
Oklahoma City, OK 73125
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 9704

7006 0100 0005 5769 9711

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Robert T. Hartley
Street, Apt. No., or PO Box No.
P.O. Box 1402
City, State, ZIP+4
Clovis, NM 88101

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert T. Hartley
P.O. Box 1402
Clovis, NM 88101

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Robert T. Hartley ☐ 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

CLOVIS NM APR 23 2013 88101 - USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9711

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9728

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Roberts Family Living Trust f/b/o
Street, Apt. No., or PO Box No.
W.V. & Earldeen Roberts
P.O. Box 3636
City, State, ZIP+4
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roberts Family Living Trust f/b/o
W.V. & Earldeen Roberts
P.O. Box 3636
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cheryl Lindsay ☐ Agent ☐ Addressee

B. Received by (Printed Name) Cheryl Lindsay C. Date of Delivery 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9728

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9735

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information V

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Street, Apt. or PO Box I
City, State,

Robertson Resources Inc.
P.O. Box 9415
Midland, TX 79708

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robertson Resources Inc.
P.O. Box 9415
Midland, TX 79708

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☑ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser 7006 0100 0005 5769 9735

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9742

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Street, Ap or PO Bo
City, Stat

Rocky Mountain Resources
3310 Dentcrest
Midland, TX 79707

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 9759

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 — USPS SANTA FE, NM — DE VARGAS

Sent To: Roger Dale Johnson c/o
Street, Apt. or PO Box: Leonard Johnson
City, State: 3666 Janice Lane
Abilene, TX 79603

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roger Dale Johnson c/o
Leonard Johnson
3666 Janice Lane
Abilene, TX 79603

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Leonard Johnson — ☐ Agent ☐ Addressee

B. Received by (Printed Name): Leonard Johnson — C. Date of Delivery: 4-24

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 9759

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9766

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 — USPS SANTA FE, NM — DE VARGAS

Sent To: Roger L. Gousy
Street, Apt. or PO Box: 1038 Old River Road
City, State: Manville, RI

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roger L. Gousy
1038 Old River Road
Manville, RI

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X Michael T. Beattie — ☐ Agent ☐ Addressee

B. Received by (Printed Name): MICHAEL T. BEATTIE — C. Date of Delivery

D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

385 Old River Road
Manville RI 02838

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from): 7006 0100 0005 5769 9766

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 9773

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Street, Ap or PO Bo
City, Stat

Ronnie Westbrook
P.O. Box 3171
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ronnie Westbrook
P.O. Box 3171
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) MERLYN WESTBROOK C. Date of Delivery 5-3-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service) 7006 0100 0005 5769 9773

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 9780

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Onl[y] [ed])

For delivery informati: MHF/OXY

OFF

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

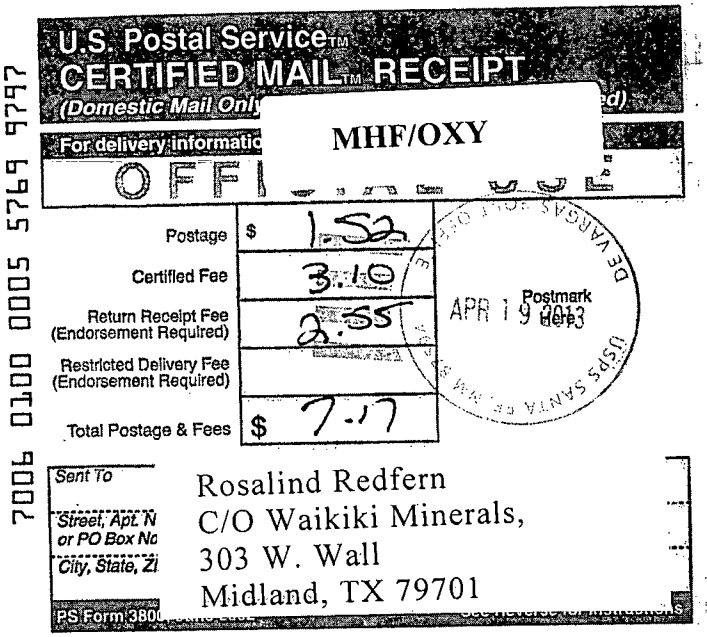
APR 19 20[illegible] Postmark Here
USPS SANTA FE, NM

Sent To
Street, / or PO B
City, St

Ronny P.Lowe
6400 Coors Road, NW
Albuquerque, NM 87120

PS Form [illegible] — [illegible]uctions

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

MHF/OXY

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DEVARGAS STATION
USPS SANTA FE NM

Sent To
Rosalind Redfern
Street, Apt. No. or PO Box No.
C/O Waikiki Minerals,
City, State, ZIP+4
303 W. Wall
Midland, TX 79701

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9797

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosalind Redfern
C/O Waikiki Minerals,
303 W. Wall
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X J Busbee ☐ Agent ☐ Addressee

B. Received by (Printed Name) J. Busbee
C. Date of Delivery 4-22-13

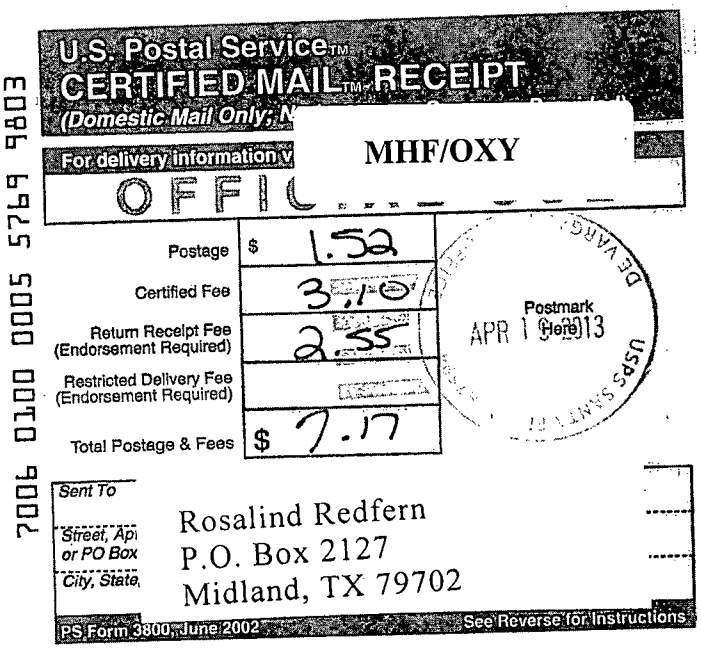
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9797

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

MHF/OXY

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DEVARGAS STATION
USPS SANTA FE NM

Sent To
Rosalind Redfern
Street, Apt. No. or PO Box No.
P.O. Box 2127
City, State, ZIP+4
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 9803

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rosalind Redfern
P.O. Box 2127
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Elaine E Love ☐ Agent ☐ Addressee

B. Received by (Printed Name) Elaine E Love
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 9803

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7427

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.58
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt. or PO Box
City, State,

Roy Barton, Jr.
1919 North Turner Street
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roy Barton, Jr.
1919 North Turner Street
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Brenda Stewart ☐ Agent ☐ Addressee

B. Received by (Printed Name) Brenda Stewart C. Date of Delivery 9-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7427

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7434

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.58
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+4

Roy E. Brooks etux Connie
3404 Purdue Place NE
Albuquerque, NM 87106

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roy E. Brooks etux Connie
3404 Purdue Place NE
Albuquerque, NM 87106

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Connie Brooks ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7434

PS Form 3811, February 2004 Domestic Return Receipt 5-02-M-1540

7006 0100 0005 5769 7441

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFF

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS PO
USPS SANTA FE

Sent To
Roy G. Barton & Opal Barton
Revocable Trust Roy G. Barton Jr.,
Trustee
Street, or PO E
1919 N. Turner
City, St
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roy G. Barton & Opal Barton
Revocable Trust Roy G. Barton Jr.,
Trustee
1919 N. Turner
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Brenda Stewart ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7441

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7458

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS PO
USPS SANTA FE

Seni
Roy G. Barton, Jr. trustee Roy
G.Barton, Sr. & Opal Barton
Stre or P
Revocable Trust
City,
P.O. Box 978
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 7465

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins[illegible] Provided)

For delivery information visit ou[r website]

MHF/OXY

OFFICI[AL USE]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS STATION

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP

Roy Lee Cain Revocable Trust
Roy Lee Cain, Trustee
Rt. 1 Box 38
Mountainair, NM 87036

PS Form 3800

Returned

7006 0100 0005 5769 7472

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail On[ly; No Insurance Coverage Provided])

For delivery informat[ion visit our website]

MHF/OXY

OFF[ICIAL USE]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS STATION

Sent To
Street, Apt. No. or PO Box No.
City, State, ZIP

Ruth Elizabeth Nordyke
19120 West Melvin
Buckeye, AZ 85326

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 7489

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent To
Street, Apt. or PO Box
City, State,

S.B. Crabtree
702 Sahara Drive
Greenville, TX 75402-4016

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

S.B. Crabtree
702 Sahara Drive
Greenville, TX 75402-4016

LETE THIS SECTION ON DELIVERY

A. Signature
X Penny Crabtree ☐ Agent ☐ Addressee

B. Received by (Printed Name) Penny Crabtree
C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer fr 7006 0100 0005 5769 7489

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7496

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent To
Street, Ap
or PO Bo
City, Stat

Sabine Royalty Corp.
P.O. Box 840887
Dallas, TX 75284

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLE

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sabine Royalty Corp.
P.O. Box 840887
Dallas, TX 75284

PLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery APR 22 20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7496

rm 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7502

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.58
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DEL VARGAS POST OFFICE
USPS SANTA FE, NM 87

Sent To
Street, Apt. No.; or PO Box No.
City, State, ZIP+

Saga Petroleum Corp.
415 West Wall, Suite 1900
Midland, TX 79701

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 6925

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.58
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
VARGAS POST OFFICE
SANTA FE, NM 87

Sent To
Street, Apt
or PO Box
City, State

Salient Zarvona Energy Fund
4265 San Felipe #800
Houston, TX 77027

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Salient Zarvona Energy Fund
4265 San Felipe #800
Houston, TX 77027

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Mavet
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numb (Transfer from 7006 0100 0005 5769 6925

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6932

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No ...)

For delivery information vi... MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Post... & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM ... DE VARGAS POST...

Sent To: Sally Rodgers
Street, Apt. or PO Box: 152 Arroyo Hondo Road
City, State, ZIP+4: Santa Fe, NM 87505

PS Form 3800, June 2002 — See Reverse for Instructions

...OF ENVELOPE TO THE RIGHT
...ESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sally Rodgers
152 Arroyo Hondo Road
Santa Fe, NM 87505

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent ☐ Addr...

B. Received by (Printed Name) | C. Date of Delivery: 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from servi...): 7006 0100 0005 5769 6932

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 6949

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; ...)

For delivery information MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
SANTA FE, NM 87... GAS POST OFFICE

Sent To: Sam Dalmont & Mary
Street, Ap... or PO Box: Josephine Dalmont
City, State: 17087 Century Plant Road
Apple Valley, CA 92307

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sam Dalmont & Mary
Josephine Dalmont
17087 Century Plant Road
Apple Valley, CA 92307

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Liz Dalmont
☐ Agent ☐ Addressee

B. Received by (Printed Name): Liz Dalmont | C. Date of Delivery

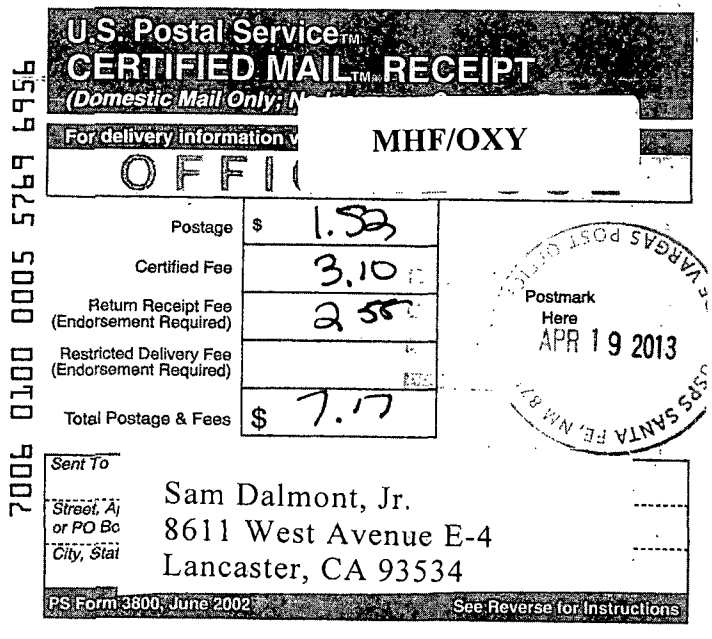
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 6949

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N
For delivery information v
OFFI
MHF/OXY

Postage	$ 1.53
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

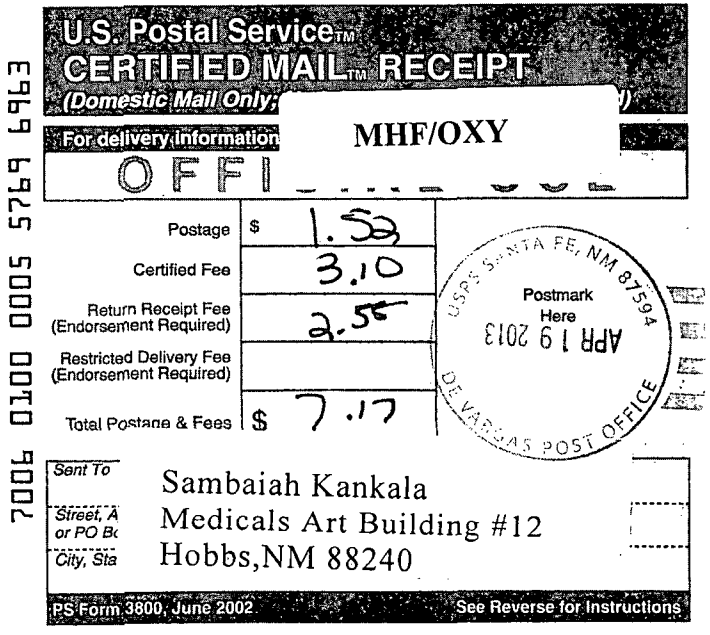
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87
DE VARGAS POST OFFICE

Sent To
Street, Ap or PO Bo
City, Stat
Sam Dalmont, Jr.
8611 West Avenue E-4
Lancaster, CA 93534

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 6956

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;
For delivery information
OFFI
MHF/OXY

Postage	$ 1.53
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

USPS SANTA FE, NM 87594
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE

Sent To
Street, A or PO Bo
City, Sta
Sambaiah Kankala
Medicals Art Building #12
Hobbs,NM 88240

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 6963

Returned

7006 0100 0005 5769 6970

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE

Sent To
Samuel Edwin Beatty
Street, Ap or PO Bo 6531 FM 1488 RD
City, Stat Magnolia, TX 77354-3266

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 6987

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA

Sent T
Schumacher Partners II Ltd.
Street or PO 777 Main Street, Suite 3200
City, S Fort Worth, TX 76102

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Schumacher Partners II Ltd.
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Erica W
C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 6987

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6994

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS

Sent To
Street, Apt. or PO Box
City, State

Scott Johnson
c/o Leonard Johnson
3666 Janice Lane
Abilene, TX 79603

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Print your name and address on the reverse so 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:

Scott Johnson
c/o Leonard Johnson
3666 Janice Lane
Abilene, TX 79603

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Leonard Johnson — ☐ Agent ☐ Addressee

B. Received by (Printed Name): Leonard Johnson — C. Date of Delivery: 4-24

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 6994

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7007

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS

Sent To
Street, Apt. or PO Box
City, State

Scott Little
1508 Pecan Place
Andrews, TX 79714

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Scott Little
1508 Pecan Place
Andrews, TX 79714

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lisa Little — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery: 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 7007

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7014

U.S. Postal Service™
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For delivery informatic

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Postmark Here
APR 19 2013

Sent To
Street, A
or PO B
City, Sta

Shana Lowe Conine
405 Oak Forrest Circle
Waco, TX 76710

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 7021

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information v

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Postmark Here
APR 19 2013

Sent To
Street, Apt. N
or PO Box N
City, State, Z

Shane Harvey
P.O. Box 1449
Denver City, TX 79323

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 7038

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I

For delivery information visit
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent T
Street or PO
City, S

Shea Oil & Gas Royalties, LLC
198 Mills Street
Morristown, NJ 07960

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Shea Oil & Gas Royalties, LLC
198 Mills Street
Morristown, NJ 07960

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Vincent Shea ☐ Agent ☐ Addressee

B. Received by (Printed Name) VINCE Shea
C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

MORRISTOWN, NJ APR 23 2013

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from 7006 0100 0005 5769 7038

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7045

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis
OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

Sent To
Street, or PO
City, St

Sherry Alexander Morin
P.O. Box 482
Marysville, MO 64468

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION **COMPLETE THIS SECTION ON DELIVERY**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sherry Alexander Morin
P.O. Box 482
Marysville, MO 64468

A. Signature
X Ernest Bryan Alexander ☐ Agent ☐ Addressee

B. Received by (Printed Name) Ernest Bryan Alexander
C. Date of Delivery 4-23-13

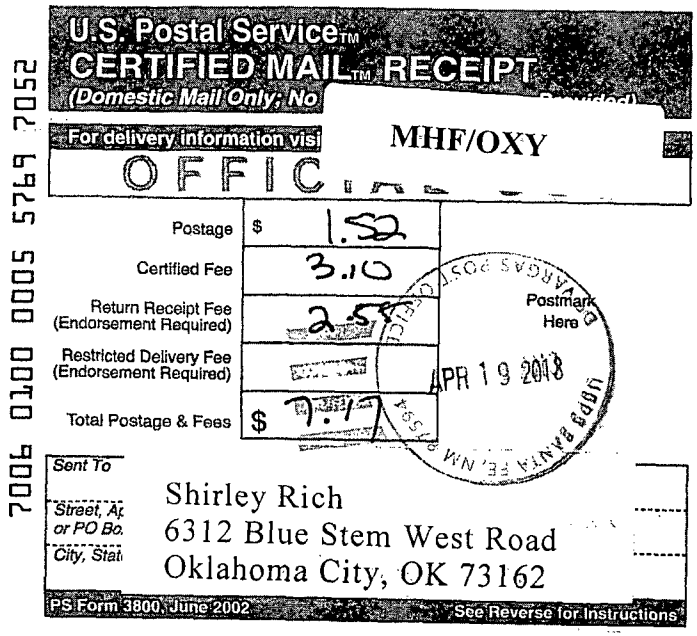
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

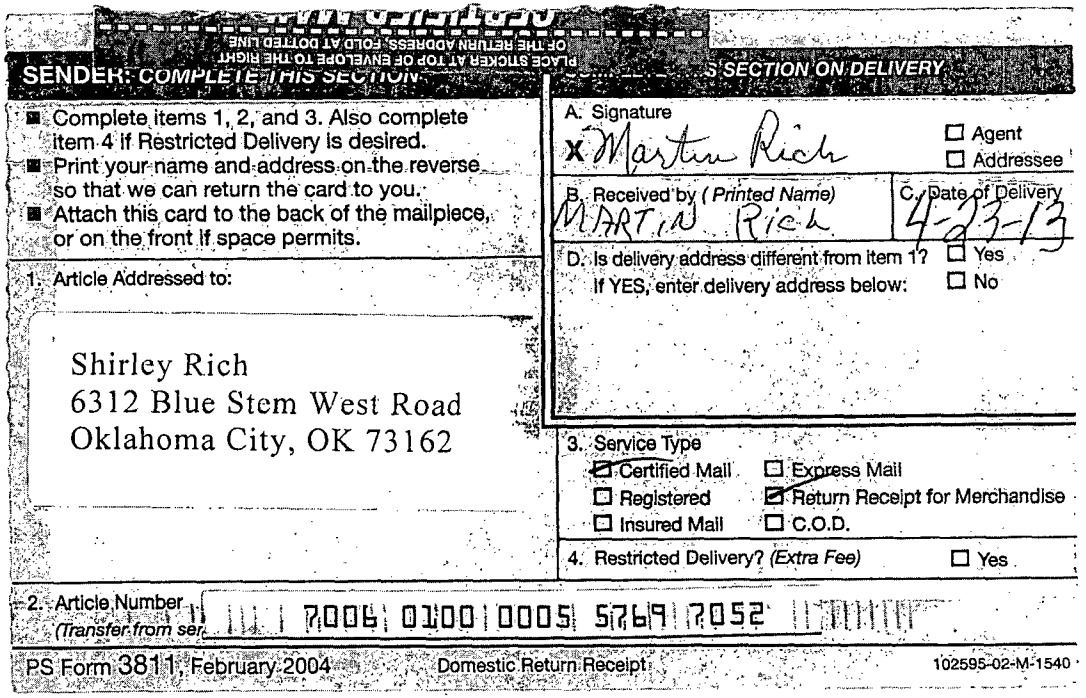
3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

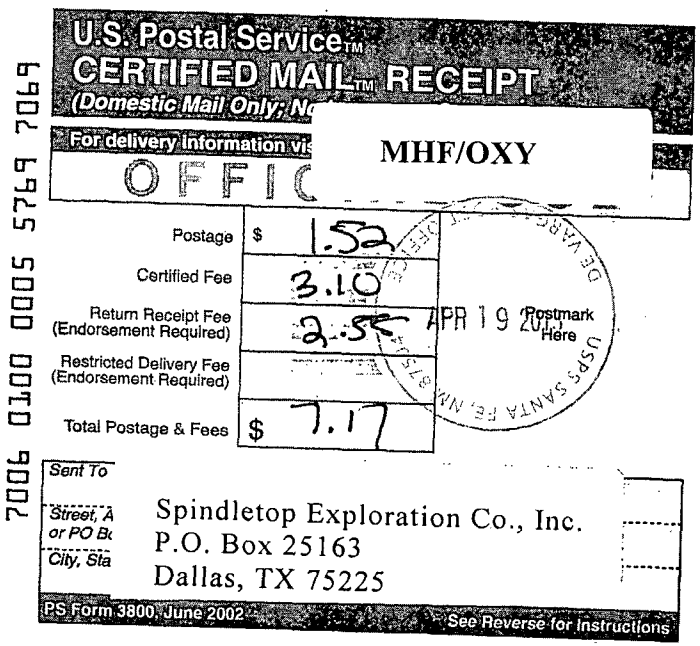
4. Restricted Delivery? (Extra Fee) ☐ Yes

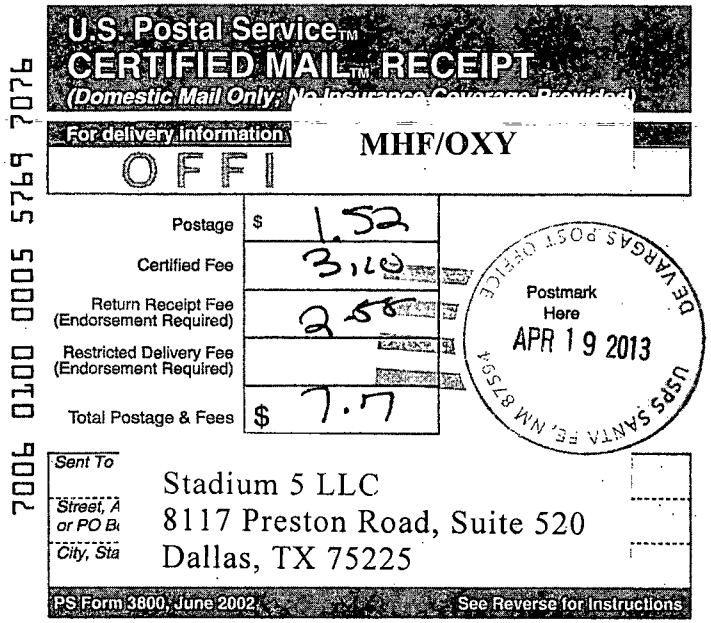
2. Article Number (Transfer from servi 7006 0100 0005 5769 7045

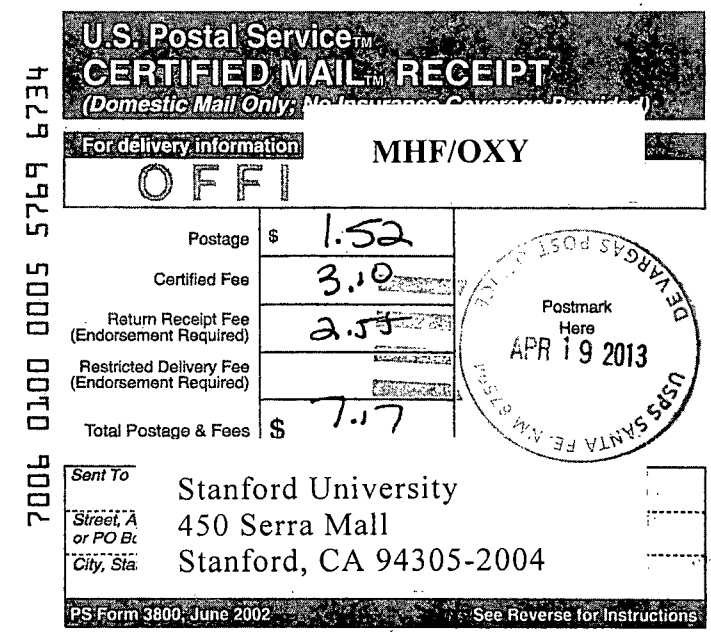
PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information visi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
Sent To
Shirley Rich
6312 Blue Stem West Road
Oklahoma City, OK 73162
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 7052


SENDER: COMPLETE THIS SECTION
COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.
A. Signature
X Martin Rich
Agent
Addressee
B. Received by (Printed Name)
MARTIN Rich
C. Date of Delivery
4-23-13
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
1. Article Addressed to:
Shirley Rich
6312 Blue Stem West Road
Oklahoma City, OK 73162
3. Service Type
Certified Mail
Express Mail
Registered
Return Receipt for Merchandise
Insured Mail
C.O.D.
4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from ser
7006 0100 0005 5769 7052
PS Form 3811, February 2004
Domestic Return Receipt
102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
Sent To
Spindletop Exploration Co., Inc.
P.O. Box 25163
Dallas, TX 75225
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 7069


7006 0100 0005 5769 7076
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Sent To
Street, A or PO Bo
City, Sta
Stadium 5 LLC
8117 Preston Road, Suite 520
Dallas, TX 75225
PS Form 3800, June 2002
See Reverse for Instructions


7006 0100 0005 5769 6734
U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information
MHF/OXY
OFFI
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Sent To
Street, A or PO Bo
City, Sta
Stanford University
450 Serra Mall
Stanford, CA 94305-2004
PS Form 3800, June 2002
See Reverse for Instructions

7006 0100 0005 5769 6741

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MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE
APR 19 2013

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

Stephanie Coy Dosher
209 NE Ave. E
Seminole, TX 79360

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stephanie Coy Dosher
209 NE Ave. E
Seminole, TX 79360

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Stephanie Dosher ☐ Agent ☐ Addressee

B. Received by (Printed Name) S dosher
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 6741

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6758

U.S. Postal Service™
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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE
APR 19 2013

Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4

Steve Cusack
2910 Anna J Drive
Roswell, NM 88201

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Steve Cusack
2910 Anna J Drive
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Steven C Cusack ☐ Agent ☐ Addressee

B. Received by (Printed Name) Steven Cusack
C. Date of Delivery 4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 6758

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6765

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I...

For delivery information v...

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.12

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87...
DE VARGAS POST OFFICE

Sent To
Street, ...
or PO B...
City, Sta...

Stuart A. Umpleby
4007 49th Sr. NW
Washington DC 20016-2339

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 6772

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No I...

For delivery information visit

MHF/OXY

OFFIC...

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87...
DE VARGAS POST OFFICE

Sent T...
Street ...
or PO ...
City, ...

Stuart A. Umpleby, et al
4141 North Henderson Road
Arlington, VA 22203

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION — **COMPLETE THIS SECTION ON DELIVERY**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stuart A. Umpleby, et al
4141 North Henderson Road
Arlington, VA 22203

A. Signature
X [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: 4/24/13

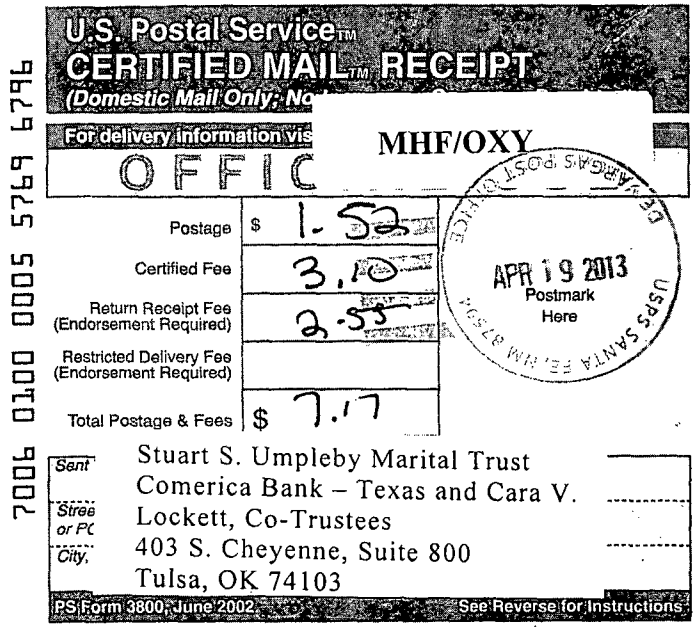
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from s...): 7006 0100 0005 5769 6772

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540



U.S. Postal Service™
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OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

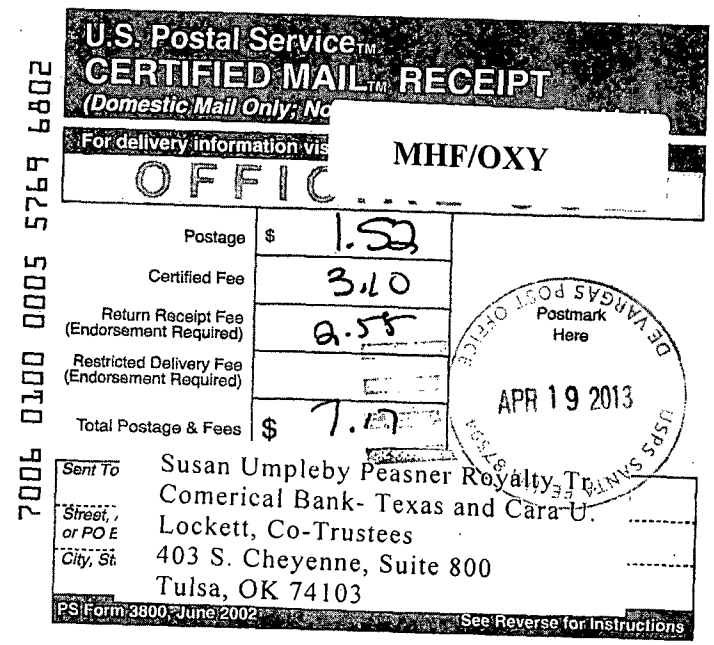
7006 0100 0005 5769 6796

Sent
Stree
or PC
City,

Stuart S. Umpleby Marital Trust
Comerica Bank – Texas and Cara V.
Lockett, Co-Trustees
403 S. Cheyenne, Suite 800
Tulsa, OK 74103

PS Form 3800, June 2002 See Reverse for Instructions

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vis
OFFIC
MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

APR 19 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

7006 0100 0005 5769 6802

Sent To
Street,
or PO E
City, St

Susan Umpleby Peasner Royalty Tr.
Comerical Bank- Texas and Cara U.
Lockett, Co-Trustees
403 S. Cheyenne, Suite 800
Tulsa, OK 74103

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 6819

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information v

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Sent To
Synergex Inc.
Street, or PO
3750 W. Memorial Rd.,
City, St
Suite 1401
Oklahoma City, OK 73134

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Synergex Inc.
3750 W. Memorial Rd.,
Suite 1401
Oklahoma City, OK 73134

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
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 6819

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6826

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 3.10

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Teddy L. Hartley
Street, or PO
P.O. Box 309
City, S
Clovis, NM 88101

PS Form 3800, June 2002 — See Reverse for Instructions

RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Teddy L. Hartley
P.O. Box 309
Clovis, NM 88101

COMPLETE THIS SECTION ON DELIVERY

A. Signature X ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
APR 22 2013

D. Is delivery address different from item 1? ☑ Yes
If YES, enter delivery address below: ☐ No

MPO, NM 88101 - USPS

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Numb (Transfer from 7006 0100 0005 5769 6826

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 6833

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87504

Sent To
Terrence Scott Blankenship
Street, Apt. or PO Box: 2109 County Road 301 S
City, State: Dayton, TX 77535-3943

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Terrence Scott Blankenship
2109 County Road 301 S
Dayton, TX 77535-3943

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name): TERRANCE BLANKENSHIP — C. Date of Delivery: 4-24-2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 6833

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 6840

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE USPS SANTA FE, NM 87504

Sent To
The Allar Company
Street, Apt. or PO Box: P.O. Box 630
City, State: Graham, TX 76046

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

The Allar Company
P.O. Box 630
Graham, TX 76046

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X MB ☑ Agent ☐ Addressee

B. Received by (Printed Name): Melanie Barrett — C. Date of Delivery: 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5769 6840

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 6857

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent T
Street or PO
City, S

The Cochran Trust,
c/o D. A.Cochran
P.O. Box 145
Hobbs, NM 88241

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

The Cochran Trust,
c/o D. A.Cochran
P.O. Box 145
Hobbs, NM 88241

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X D A Cochran ☐ Agent ☐ Addressee

B. Received by (Printed Name) D. A Cochran | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

APR 22 2013
USPS 97240

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from serv* 7006 0100 0005 5769 6857

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 6864

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Sent To
Street, or PO
City, St

The Long Trusts
118 South Kilgore Street
Kilgore, TX 75663

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER

ECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

The Long Trusts
118 South Kilgore Street
Kilgore, TX 75663

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Numbe *(Transfer from* 7006 0100 0005 5769 6864

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 6871

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To / Street, Apt. No., or PO Box No. / City, State, ZIP+4:
The Long Trusts
P.O. Box 3069
Kilgore, TX 75663

PS Form 3800, June 2002 — See Reverse for Instructions

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION — COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: X Kathy Anderson — ☐ Agent ☐ Addressee

B. Received by (Printed Name): KATHY ANDERSON — C. Date of Delivery: APR 23 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

KILGORE TX 8698

1. Article Addressed to:
The Long Trusts
P.O. Box 3069
Kilgore, TX 75663

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from): 7006 0100 0005 5769 6871

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7618

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87594

Sent To / Street, Apt. No., or PO Box No. / City, State, ZIP+4:
The University of Oklahoma
Foundation, Inc.
100 Timberdell Road
Norman, OK 73019

PS Form 3800, June 2002 — See Reverse for Instructions

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION — COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: X Tina Burke — ☑ Agent ☐ Addressee

B. Received by (Printed Name): Tina Burke — C. Date of Delivery: 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

1. Article Addressed to:
The University of Oklahoma
Foundation, Inc.
100 Timberdell Road
Norman, OK 73019

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser): 7006 0100 0005 5769 7618

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7625

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Tidemark Corporation
Street, Apt. or PO Box
6116 N. Central Expressway
City, State
Dallas, TX 75206-5162

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 7632

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Sent To
Tierra Oil Company LLC
Street, Apt. or PO Box
P.O. Box 700968
City, State,
San Antonio, TX 78270

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL™
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: CO... ...N ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery 4-23-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☑ No

1. Article Addressed to:

Tierra Oil Company LLC
P.O. Box 700968
San Antonio, TX 78270

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7632

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7649

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street, A
or PO Bc
City, Stai

Timothy C. Williams
3931 Tall Birch Cove
Memphis, TN 38115

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 7656

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information visit

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013

Sent To
Street,
or PO E
City, St

Timothy J. Cusack
P.O. Box 250
Roswell, NM 88202

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Timothy J. Cusack
P.O. Box 250
Roswell, NM 88202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) E T Gallegos
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

ROSWELL, NM
APR 22 2013
88201

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number (*Transfer from servic*
7006 0100 0005 5769 7656

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7519

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM

Sent To
Tom R. Cone
Street, Apt. No., or PO Box
P.O. Box 400
City, State
Southwest City, MO 64863

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tom R. Cone
P.O. Box 400
Southwest City, MO 64863

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sue Cone ☐ Agent ☐ Addressee

B. Received by (Printed Name) Sue Cone
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7519

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7526

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N

For delivery information vi

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

Sent T
Tom R. Cone
Street or PO
P.O. Box 778
City, S
Jay, OK 74346

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 7533

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sent To
Street, A
or PO Bo
City, Sta

Tommy L.Fort
P.O. Box 2044
Midland, TX 79702

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 7540

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

OFFI

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504

Sen
Stre
or F
City

Toni H. Beare
189 S. Rembert St.
Memphis, TN 38104

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5769 7557

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; [illegible])

MHF/OXY

For delivery information
OFFI[illegible]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 875[illegible]

Sent To
Street, A[illegible]
or PO Bo[illegible]
City, Sta[illegible]

Trilogy Operatong Company
P.O. Box 7606
Midland, TX 79708

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Trilogy Operatong Company
P.O. Box 7606
Midland, TX 79708

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Gary Miller ☐ Agent ☐ Addressee

B. Received by (Printed Name) GARY Miller C. Date of Delivery 4/24/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from ser[illegible]) 7006 0100 0005 5769 7557

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7564

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only [illegible] Provided)

MHF/OXY

For delivery informatio[illegible]
OFFI[illegible]

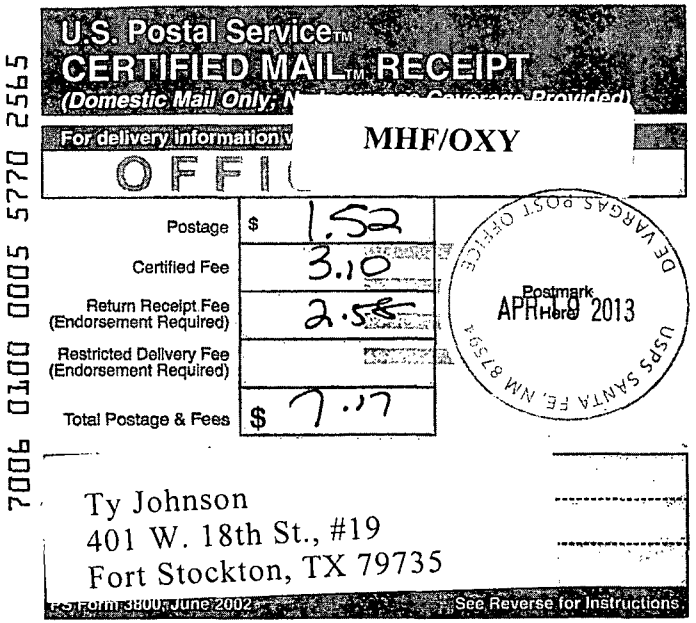
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 875[illegible]

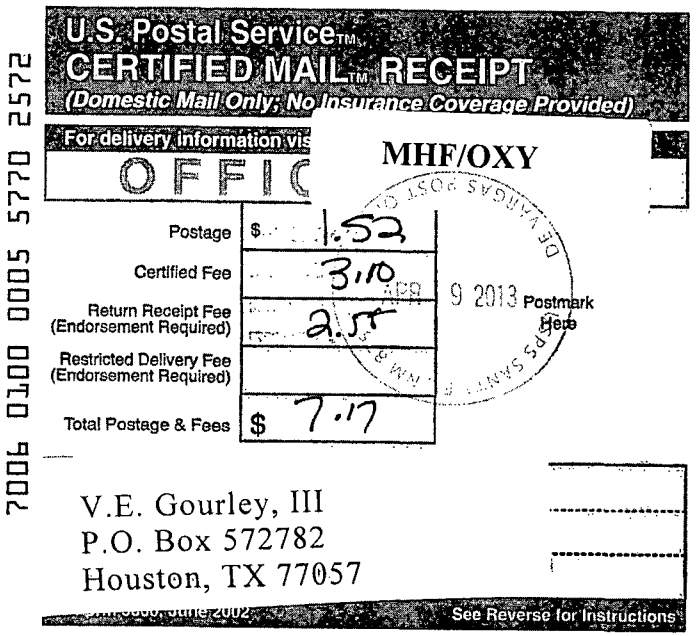
Sent To
Street, A[illegible]
or PO Bo[illegible]
City, Sta[illegible]

Troy D. Blackburn successor
trusteeof theBlack Irrevocable Trusts
247 Blackburn Road
Abilene, TX 79602

PS Form 3800, June 2002 — See Reverse for Instructions


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N... Coverage Provided)
For delivery information v...
MHF/OXY
OFFI...
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
DE VARGAS POST OFFICE USPS SANTA FE, NM 87594
Postmark Here APR 10 2013
7006 0100 0005 5770 2565
Ty Johnson
401 W. 18th St., #19
Fort Stockton, TX 79735
PS Form 3800, June 2002
See Reverse for Instructions

Returned


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information vis...
MHF/OXY
OFFIC...
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.55
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
DE VARGAS POST OFF... NM 8...
APR 9 2013 Postmark Here
7006 0100 0005 5770 2572
V.E. Gourley, III
P.O. Box 572782
Houston, TX 77057
...June 2002
See Reverse for Instructions

7006 0100 0005 5770 2589

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...

Veja Inc.
6300 NW Grand Blvd.
Oklahoma City, OK 73116

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 2596

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87...

Verna Runnels
48 Hobart, Space #7
Canadian, TX 79014

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5770 2602

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No In[surance Provided])

For delivery information visit [our website]

MHF/OXY

OFFIC[E]

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.58
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE

Virginia C. Hinman
2334 Chriswood
Toledo, OH 43617

PS Form 3800, June 2002 — See Reverse for Instructions

PEEL AT DOTTED LINE TO RETURN THIS CARD
PLACE LABEL AT RIGHT OF ENVELOPE, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Virginia C. Hinman
2334 Chriswood
Toledo, OH 43617

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Virginia C. Hinman ☐ Agent ☐ Addressee

B. Received by (Printed Name) Virginia C. Hinman
C. Date of Delivery 5/3/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

TOLEDO, OH 435 — MAY – 3 2013 — USPS

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2602

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2619

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N[o Insurance Provided])

For delivery information v[isit our website]

MHF/OXY

OFFI[CE]

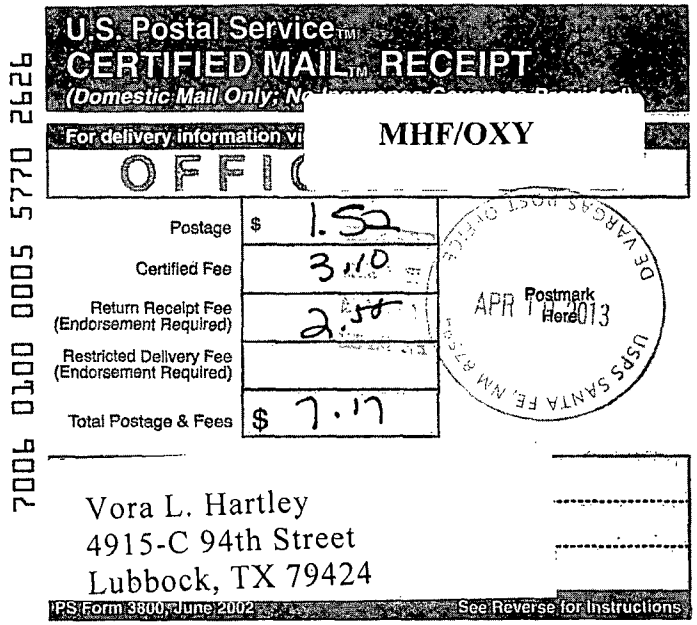
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 1[9] 2013
USPS SANTA FE, NM 87[594]
DE VARGAS POST OFFICE

Vivian Lowe Anseimi
1500 Broadway, Suite 1230
Lubbock, TX 79401

PS Form 3800, June 2002 — [See Reverse] for Instructions

Returned



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

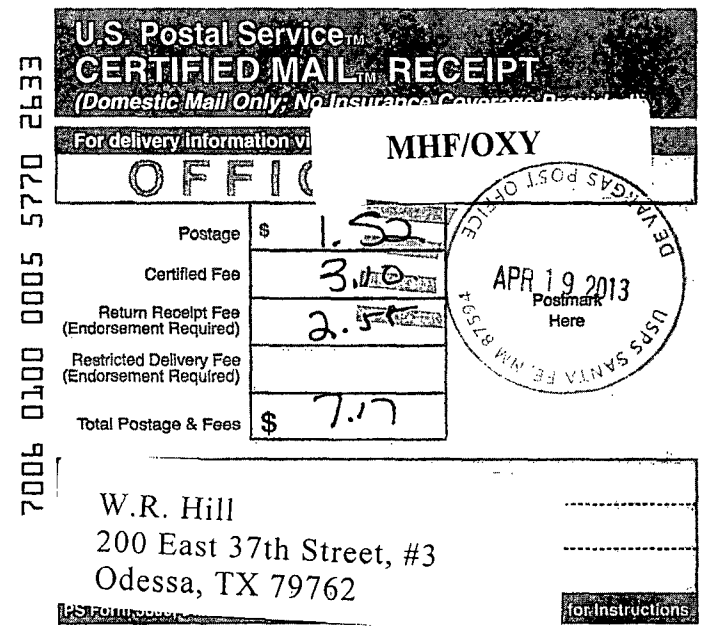
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
APR 19 2013
Postmark Here

7006 0100 0005 5770 2626

Vora L. Hartley
4915-C 94th Street
Lubbock, TX 79424

PS Form 3800, June 2002 See Reverse for Instructions



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MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
APR 19 2013
Postmark Here

7006 0100 0005 5770 2633

W.R. Hill
200 East 37th Street, #3
Odessa, TX 79762

PS Form 3800, June 2002 See Reverse for Instructions

Returned

7006 0100 0005 5770 2640

U.S. Postal Service™
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OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE USPS SANTA FE, NM 87504
Postmark Here
APR 19 2013

Waikiki Partners, LP
P.O. Box 2127
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Waikiki Partners, LP
P.O. Box 2127
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X [signature] — ☐ Agent ☐ Addressee

B. Received by (Printed Name) ELAINE LOVE — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2640

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2657

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For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE USPS SANTA FE, NM 87504
Postmark Here
APR 19 2013

Wayne A. Bissett
P.O. Box 2101
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wayne A. Bissett
P.O. Box 2101
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X [signature] — ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] — C. Date of Delivery 4-29-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☑ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2657

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2664

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
APR 19 2013
Postmark Here
USPS SANTA FE, NM 87504

Weslynn McCallister Holway
7350 S. Tamiami Trial,
Apt. 229
Sarasota, FL 34231-7004

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Weslynn McCallister Holway
7350 S. Tamiami Trial,
Apt. 229
Sarasota, FL 34231-7004

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery: 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2664

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2671

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Ins...

For delivery information

MHF/OXY

OFFI ... USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST OFFICE
Postmark Here
APR 19 2013
USPS SANTA FE, NM 87...

Wes-Tex Drilling Company
P.O. Box 3739
Abilene, TX 79604

...for Instructions
PS Form 3800, June 2002

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wes-Tex Drilling Company
P.O. Box 3739
Abilene, TX 79604

COMPLETE THIS SECTION ON DELIVERY

A. Signature — X — ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2671

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2688

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MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

WFM Minerals, LTD
P.O. Box 339
Bridger, Montana 59014

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

WFM Minerals, LTD
P.O. Box 339
Bridger, Montana 59014

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X W F McNeill ☐ Agent ☐ Addressee

B. Received by (Printed Name) WF McNeill
C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2688

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2695

U.S. Postal Service™
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MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

White Star Energy, Inc.
P.O. Box 51108
Midland, TX 79710

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

White Star Energy, Inc.
P.O. Box 51108
Midland, TX 79710

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

4/23/13

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2695

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2701

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 USPS SANTA FE, NM DE VARGAS POST OFFICE

Wilbur C. Bradley trustee of the
O.E. Bradley Trust
One Main Place, Suite 608
Wichita, KS 67202

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wilbur C. Bradley trustee of the
O.E. Bradley Trust
One Main Place, Suite 608
Wichita, KS 67202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x R. Miller ☐ Agent ☐ Addressee

B. Received by (Printed Name) R. Miller

C. Date of Delivery 4/23/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5770 2701

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2718

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013 USPS SANTA FE, NM DE VARGAS POST OFFICE

Wilda C.Collins
East 431 Dalby Road
Union, WA 98592

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 2725

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

William E. Walker trustee of the
William E. Walker Living Trust
P.O.Box 113
Wichita, KS 67201

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5770 2732

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OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504

William F. Pendleton
777 Main Street, Suite 3200
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William F. Pendleton
777 Main Street, Suite 3200
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Erica W C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5770 2732

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5770 2749

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Windlands Corp.
P.O. Box 591
Midland, TX 79702

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Windlands Corp.
P.O. Box 591
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature: X W Dow Hamm, Jr. ☐ Agent ☐ Addressee

B. Received by (Printed Name): WILLIAM H AMM, Jr. C. Date of Delivery:

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label): 7006 0100 0005 5770 2749

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5770 2756

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE NM

Winnie Dalmont Menk
P.O. Box 14110
Albuquerque, NM 87125

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 7144

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No

For delivery information vis

MHF/OXY

OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

USPS SANTA FE, NM

Winnie Pearl Hale as trustee of
the Hale Family Trust
4007 15th Street
Lubbock, TX 79416

PS Form 3800, June 2002 for Instructions

7006 0100 0005 5769 7151

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only;

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

USPS SANTA FE, NM

Woodland P. Saunders
8404 Goodnight Trail
Amarillo, TX 79110-5030

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Woodland P. Saunders
8404 Goodnight Trail
Amarillo, TX 79110-5030

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7151

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 0100 0005 5769 7168

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

Xeric Oil & Gas Corp.
P.O. Box 51311
Midland, TX 79710

PS Form 3800, June 2002 — See Reverse for Instructions

7006 0100 0005 5769 7175

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information

MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87501

XTO Energy Inc.
810 Houston St., Suite 2000
Fort Worth, TX 76102

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

XTO Energy Inc.
810 Houston St., Suite 2000
Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Shawn Lackey ☐ Agent ☑ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7175

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7182

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; N...

For delivery information v...

MHF/OXY

OFFI(

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

ZPZ Delaware I LLC
2000 Post Oak Blvd.,
Suite 100
Houston, TX 77056

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ZPZ Delaware I LLC
2000 Post Oak Blvd.,
Suite 100
Houston, TX 77056

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
4-22-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7182

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7199

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No...

For delivery information vis...

MHF/OXY

OFFICIAL

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
DE VARGAS POST OFFICE
USPS SANTA FE, NM

ZPZ Delaware I LLC
P.O. Box 840133
Dallas, TX 75284

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ZPZ Delaware I LLC
P.O. Box 840133
Dallas, TX 75284

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
APR 22 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7199

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7205

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST... APR 19 2013 Postmark Here USPS SANTA FE, NM 875...

Cochran Family Trust
PO Box 145
Hobbs, NM 88241

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cochran Family Trust
PO Box 145
Hobbs, NM 88241

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X D. A. Cochran ☐ Agent ☐ Addressee

B. Received by (Printed Name) D. A. Cochran | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

USPS 87240 APR 27 2013

3. Service Type
☑ Certified Mail ☑ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7205

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7212

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information: MHF/OXY

OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

DE VARGAS POST... Postmark Here APR 19 2013 USPS SANTA FE, NM 875...

Coombs, M R
1015 N Dal Paso
Hobbs, NM 88240

PS Form 3800, June 2002 — ... for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Coombs, M R
1015 N Dal Paso
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Harriett Coombes ☐ Agent ☑ Addressee

B. Received by (Printed Name) Harriett Coombes | C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7212

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7229

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

DE VARGAS POST OFFICE USPS SANTA FE, NM 87...

Legacy Reserves Operating, LP
PO Box 5677
Abilene, TX 79608

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RETURN ADDRESS, FOLD

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Legacy Reserves Operating, LP
PO Box 5677
Abilene, TX 79608

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) — C. Date of Delivery: APR 23 2013

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7229

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7236

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE — MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here APR 19 2013

DE VARGAS POST OFFICE USPS SANTA FE, NM 87...

Enterprise Crude Oil LLC
PO Box 4018
Houston, TX 77210

PS Form 3800, June 2002 — ... for Instructions

7006 0100 0005 5769 7243

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

Scarborough, Steven
411 E Baja
Hobbs, NM 88240

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Scarborough, Steven
411 E Baja
Hobbs, NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Susan L Selma ☐ Agent ☐ Addressee

B. Received by (Printed Name) Susan L Selma — C. Date of Delivery 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7243

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7250

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MHF/OXY

OFFICIAL USE

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87504
DE VARGAS POST OFFICE

DCP Midstream LP
5718 Westheimer Suite 1900
Houston, TX 77057

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DCP Midstream LP
5718 Westheimer Suite 1900
Houston, TX 77057

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Henry Cobb — C. Date of Delivery 4/22/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7250

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7267

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit

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MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Patterson Drilling Company LP
200 S 10th St.
Richmond, TX 77469

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Patterson Drilling Company LP
200 S 10th St.
Richmond, TX 77469

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Janice Bartos ☐ Agent ☐ Addressee

B. Received by (Printed Name) JANICE BARTOS
C. Date of Delivery 4-24-13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7006 0100 0005 5769 7267

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

7006 0100 0005 5769 7274

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit

OFFIC

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501
DE VARGAS POST OFFICE

Commissioner of Public Lands
State Land Office
P.O. Box 1148
Santa Fe, NM 87504-1148

PS Form 3800, June 2002 — See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Commissioner of Public Lands
State Land Office
P.O. Box 1148
Santa Fe, NM 87504-1148

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

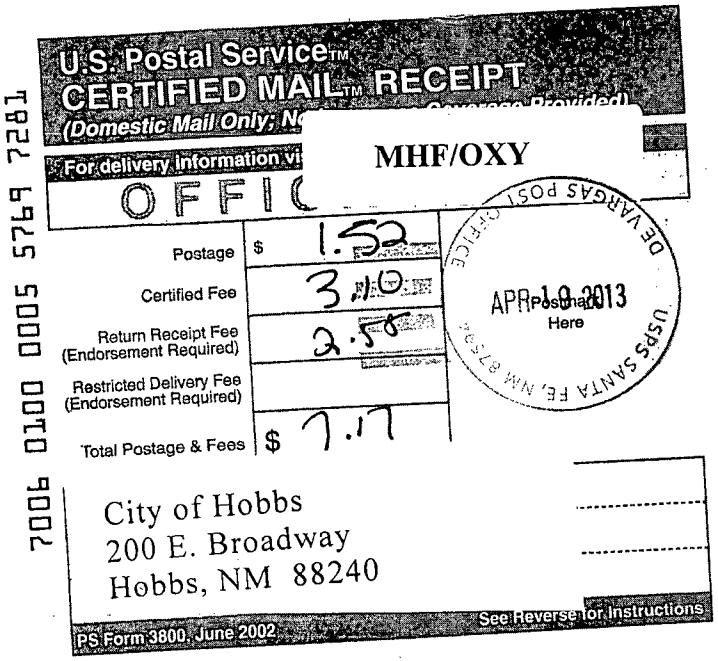
USPS SANTA FE, NM 87501 APR 22 2013 SANTA FE POST OFFICE

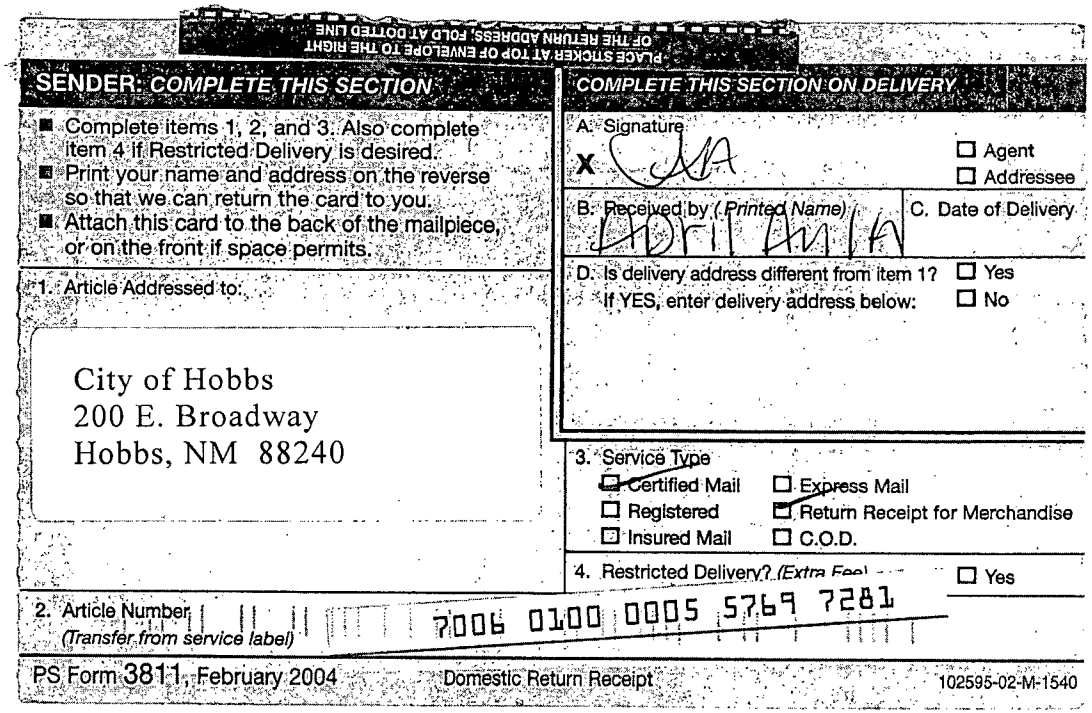
3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

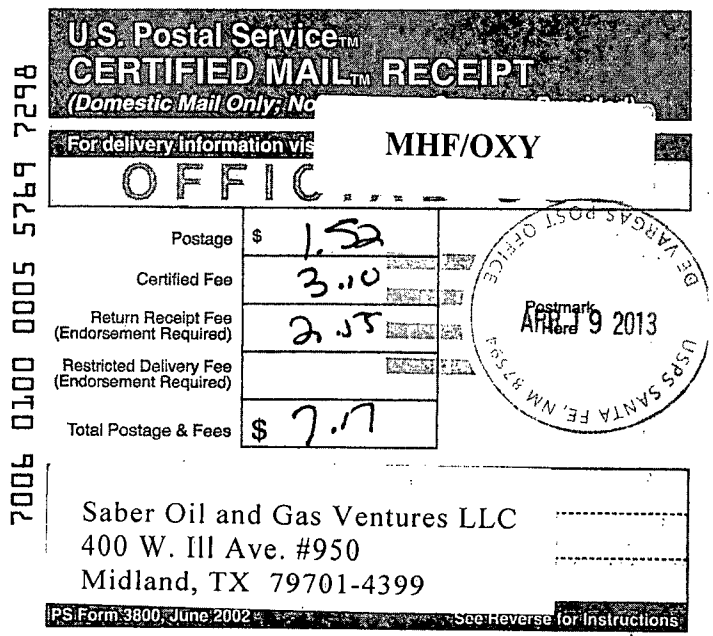
4. Restricted Delivery? (Extra Fee) ☐ Yes

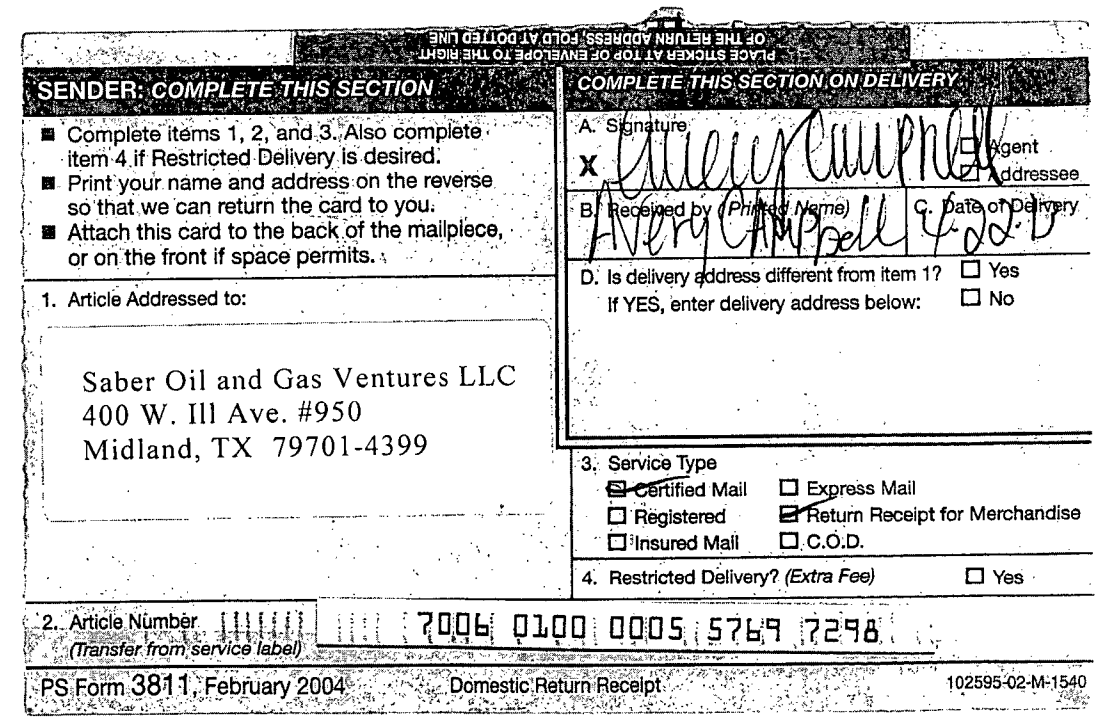
2. Article Number (Transfer from service label) 7006 0100 0005 5769 7274

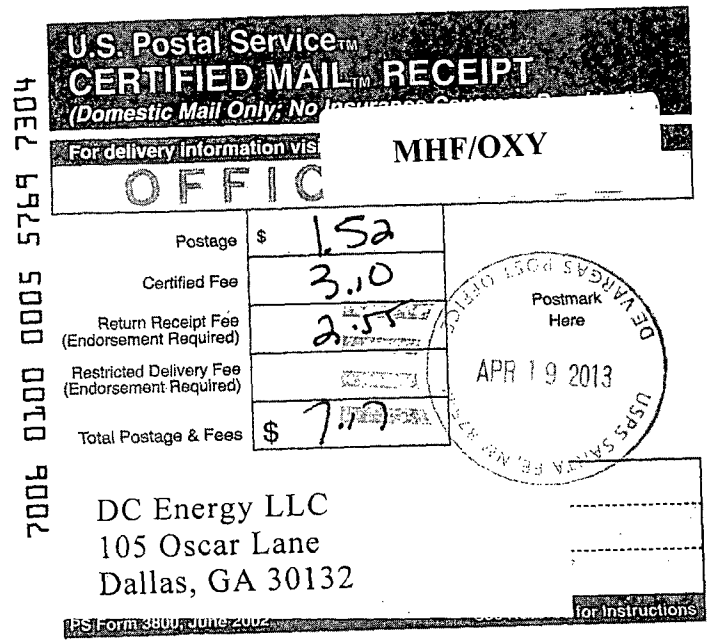
PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vi
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.50
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
APR 10 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
City of Hobbs
200 E. Broadway
Hobbs, NM 88240
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 7281


PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
City of Hobbs
200 E. Broadway
Hobbs, NM 88240
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
3. Service Type
Certified Mail
Express Mail
Registered
Return Receipt for Merchandise
Insured Mail
C.O.D.
4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7006 0100 0005 5769 7281
PS Form 3811, February 2004
Domestic Return Receipt
102595-02-M-1540


U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No
For delivery information vis
MHF/OXY
OFFIC
Postage $ 1.52
Certified Fee 3.10
Return Receipt Fee (Endorsement Required) 2.35
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $ 7.17
APR 19 2013
Postmark Here
DE VARGAS POST OFFICE
USPS SANTA FE, NM 87504
Saber Oil and Gas Ventures LLC
400 W. Ill Ave. #950
Midland, TX 79701-4399
PS Form 3800, June 2002
See Reverse for Instructions
7006 0100 0005 5769 7298


PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Saber Oil and Gas Ventures LLC
400 W. Ill Ave. #950
Midland, TX 79701-4399
COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
3. Service Type
Certified Mail
Express Mail
Registered
Return Receipt for Merchandise
Insured Mail
C.O.D.
4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7006 0100 0005 5769 7298
PS Form 3811, February 2004
Domestic Return Receipt
102595-02-M-1540



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

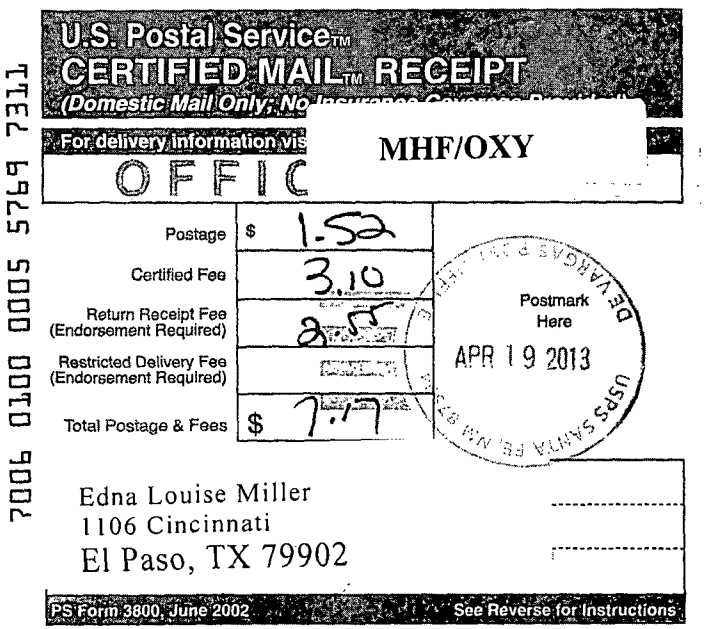
Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

7006 0100 0005 5769 7304

DC Energy LLC
105 Oscar Lane
Dallas, GA 30132

PS Form 3800, June 2002 See Reverse for Instructions



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

MHF/OXY

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM
DE VARGAS POST OFFICE

7006 0100 0005 5769 7311

Edna Louise Miller
1106 Cincinnati
El Paso, TX 79902

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 5769 7328

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit: MHF/OXY
OFFIC

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Frank J. Redfern
P.O. Box 50890
Midland, TX 79710

PS Form 3800, June 2002 — See Reverse for Instructions

Returned

7006 0100 0005 5769 7335

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only)

For delivery information: MHF/OXY
OFFI

Postage	$ 1.52
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$ 7.17

Postmark Here
APR 19 2013
USPS SANTA FE, NM 87501

Gary L. Finch, Jr.
P.O. Box 12
Stowell, TX 77661

PS Form 3800, June 2002 — See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gary L. Finch, Jr.
P.O. Box 12
Stowell, TX 77661

ECTION ON DELIVERY

A. Signature
X Myrna Finch ☒ Agent ☐ Addressee

B. Received by (Printed Name): Myrna Finch
C. Date of Delivery: 4-23-20[illegible]

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Transfer from service label)* 7006 0100 0005 5769 7335

PS Form 3811, February 2004 — Domestic Return Receipt — 102595-02-M-1540

Affected Parties with No Address

Name
Atlantic Oil Production
Bob White
Bona Lou Taylor
Carol J. Pacheco
Charles N. Welch
Charon Oil Group
Clifford Cone
Clift Bates
D.B. Golden
D.C. Tust
David Donoghue
Dawn Kelley
Don Poage
Don R. Morgan
Dr. Robert P. Sayle
Edwin D. Smith
Ella Jones
Estate Elizabeth Sayle
Estate George A. Lay
Estate Mary E. Granburg
Evel R. Williams & Christine Williams
Evelyn Lowe Riddle & Robert
F. Bennett Watts
Fred J. Wegg trustee
Garth Monroes Taylor
Gary J. Allen & Myles Mario Allen
Grady Thompson
Greg Allen
Gwen Allen Gonzales
Harris Co. Inc.
Harry Eaves
Herbert Flackman
High Country LLC
Hobart Earl Taylor
Ivan J. Fenn
Ivan J. Fenn & Ruth
J.D. Thompson
J.E. Elliott
James G. White
Jean Holloway
Jean Sherrill

Affected Parties with No Address

Name
Jenny Roberts Schimpff Trust, Catherine G. Roberts Trust, Barry Coates Roberts Trust, Stieren Hardeman Trust, George L. Stieren Trust, Wendy Stieren Daniel Trust, Kelly Stieren Daniel Trust, Amy E. Stieren Trust: Arthur T. Stieren & Betty S. Kelso co-trustees
Joan & Pat Holloway
Joe P. Crawford etux Ila
John Richard Pfenning
Kathleen M. Cone
Kathleen M. Cone
Kenneth G. Cone
Kenneth McIntosh
Lena Griswald
Lewis Production Company
Lila Cochran Allen & James
Lillian Hill Young
Lorraine Harris
M.W. Evans
Mabelle K. Stewart
Maggie Morrison
Margaret Artis
Margaret D. Watson
Marguerite S. White
Martin J.Flackman
Mary D. Ames
Mary E. Thompson
Mary Maxine Welch
Maurice A. Charon
Merlyn S. Erickson
Myrtle Freeman Taylor
O.L. Taylor, Jr.
Ola Addington
Pat Murphy
R.L. Hacky
R.T. Jones
Raleigh E. Thomspon
Ruth Newby Jones, Elaine Newby Shepard, David Newby, Rosemary Newby Mullen
S. R. Payton
S.A. Shrader
S.A. Thompson
Stanley W. Greer
The Robert Goodrich Trust f/b/o Robert R. Goodrich, David E. Goodrich, Gavin R. Goodrich
Thomas R. James
W. H. Payton

Affected Parties with No Address

Name
W. O. Cochran
W.B. Thompson
Wallace A. Phillips
Walter Tomlinson & Christine Williams
William B. Watson
William F. Pfenning, Jr.