

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

**IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION FOR
THE PURPOSE OF CONSIDERING:**

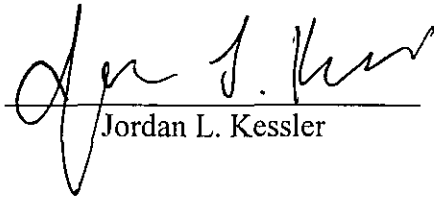
**APPLICATION OF COG OPERATING LLC
FOR A NON-STANDARD SPACING AND
PRORATION UNIT AND COMPULSORY
POOLING, LEA COUNTY, NEW MEXICO.**

CASE NO. 15112

AFFIDAVIT

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

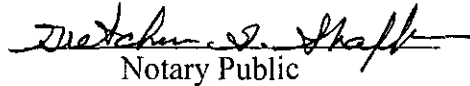
Jordan L. Kessler, attorney in fact and authorized representative of COG Operating, LLC,
the Applicant herein, being first duly sworn, upon oath, states that the above-referenced
Application was provided under the notice letter and proof of receipt attached hereto.



Jordan L. Kessler

SUBSCRIBED AND SWORN to before me this 24th day of June 2014 by Jordan L.

Kessler.



Notary Public

Commission Expires 7/26/2016

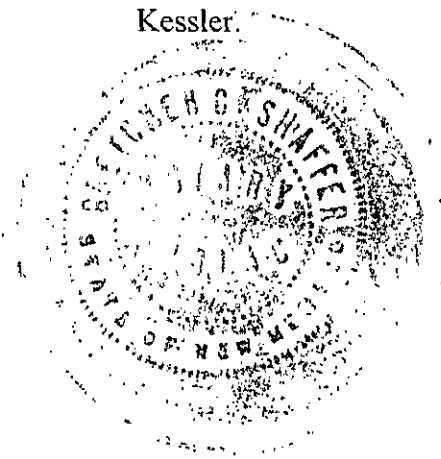
BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico

Exhibit No. 8

Submitted by: COG OPERATING LLC

Hearing Date: June 26, 2014



**IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION FOR
THE PURPOSE OF CONSIDERING:**

CASE NO. 15112

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


Jordan L. Kessler

Kessler:

Deborah S. Shaff
Notary Public

Commission Expires 7/26/2016



MODRALL SPERLING

LAWYERS

March 18, 2014

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

TO: POOLED PARTIES LISTED ON EXHIBIT A

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

Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard location, a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on April 17, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-Hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above-specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to hearing.

Sincerely,

Jordan L. Kessler
Attorney for COG Operating LLC

Modrall Sperling
Roehl Harris & Sisk P.A.

Bank of America Centre
500 Fourth Street NW
Suite 1000
Albuquerque,
New Mexico 87102

PO Box 2168
Albuquerque,
New Mexico 87103-2168

Tel: 505.848.1800
www.modrall.com

EXHIBIT A
COG OPERATING LLC NOTICE LIST

Parties to be pooled:

Ross Duncan Properties, LLC
P.O. Box 647
Artesia, New Mexico 88211-0647

Davis Partners, Ltd.
P.O. Box 271
Midland, Texas 79702

F. Ferrell Davis
P.O. Box 3061
Midland, Texas 79702

Mineral interest owners

Bank of America, N.A., Trustee of the
Robert O. Erwin and Virginia McKnight
Erwin Trust a/k/a the Erwin Marital Trust
P.O. Box 830308
Dallas, Texas 75283-0308

Katherine Hartig Elmore, Derill G. Elmore, Jr., and Frank H. Elmore, III,
Trustees under the Will of Derrill G. Elmore
Derrill G. Elmore, Jr.
400 Elenburg Rd.
Perrin, TX 76486

Elizabeth Raymond a/k/a Betsy Raymond
13357 Forest River Drive SE
Lowell, MI 49331

Frederic D. Brownell
11703 Neering Drive
Dallas, TX 75218

William S. Deniger, Jr.
4061 Mawr Drive
Dallas, TX 75225

David B. Deniger
16479 Dallas Parkway, Suite 400
Addison, TX 75001

John T. McCall, Jr.
6641 Wakefield Drive, Apt. 513
Alexandria, Virginia 22307

Thomas Screven McCall, SSP
10481 FM 344 West
Bullard, TX 75757

SDH 2009 Investments, L.P.
2906 University Blvd.
Dallas, Texas 75205

The Allar Company
P.O. Box 1567
Graham, Texas 76450

Bertha C. McCall and Belmont Trust Company
Co-Trustees of the Hobby H. McCall Living Trust
25 St. Laurent Place
Dallas, Texas 75225
-and-

Comerica Bank
c/o Glen Malan – MC-3320
P.O. Box 75000
Detroit, MI 48275

Randolph D. McCall
800 Ox Eye Trail
West Lake Hills, TX 78746

Rebecca McCall Landis Baird, SSP
332 East Terra Alta
San Antonio, Texas 78209

Nuevo Seis Limited Partnership
P.O. Box 2588
Roswell, New Mexico

Barbara E. Hannifin, SSP
P.O. Box 182
Roswell, New Mexico 88202

Texas Vanguard Oil Company
P.O. Box 50820
Midland, Texas 79710

Mrs. Mary Hampton Elliot
c/o Logan Knapp
2755 Shadowdale Drive
Houston, TX 77043

Joe J. Wallace and wife, Patricia Wallace
111 Ellis St, 5th Floor
San Francisco, CA 94102

Mary Iva Campbell Trust,
Carol Anne Crook Kryder, Trustee
3722 Tree Manor Lane
Kingwood, TX 77345

Baloney Feathers, Ltd.
P.O. Box 1586
Lubbock, Texas 79403

Richard D. Jones, Jr.
200 North Gaines Road
Cedar Creek, Texas 78612

Southard Properties, Ltd., whose Sole
General Partner is Southard Management Co.
1101 Scott Street, Suite 17
Wichita Falls, Texas 76301

ChivoOil, LLC
P.O. Box 3061
Midland, Texas 79702

Paul Davis, Ltd.
P.O. Box 871
Midland, Texas 79702

Gene L. Dalmont, SSP
1498 Scipio Lane
McAlester, OK 74501

Estate of Catherine H. Ragsdale c/o Douglass Nichols
4713 Chiappero Trail
Austin, TX 78731

Peter B. Tyson, SSP
c/o Tyson Properties, LLC
P.O. Box 3786
Midland, TX 79702

CASE NO. _____: Application of COG Operating LLC for a non-standard spacing and proration unit, compulsory pooling and a non-standard location, Lea County, New Mexico. COG requests a hearing at 8:15 a.m. on _____, 2014, to consider this application. Applicant seeks an order from the Division: (1) authorizing a non-standard location; (2) creating a non-standard 160-acre, more or less, oil spacing and proration unit in the Bone Spring formation, comprised of the W/2 W/2 of Section 8, Township 19 South, Range 35 East, NMPM, Lea County, New Mexico; and (3) pooling all mineral interests in the Bone Spring formation underlying this proposed non-standard spacing and proration unit. This proposed non-standard spacing and proration unit will be the project area for the Tomcat Fee Com. Well No. 1H, to be horizontally drilled. The producing area for this well will be 330 feet from the project area boundary. Also to be considered will be the cost of drilling and completing said well, the allocation of these costs as well as the actual operating costs and charges for supervision, designation of COG Operating LLC as operator of the well, and a 200% charge for risk involved in drilling said well. Said area is located approximately 22 miles west of Hobbs, New Mexico.



MODRALL SPERLING
LAWYERS

April 23, 2014

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

TO: POOLED PARTIES LISTED ON EXHIBIT A

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

Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard location, a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on May 15, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-Hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above-specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to hearing.

Sincerely,

Jordan L. Kessler
Attorney for COG Operating LLC

Modrall Sperling
Roehl Harris & Sisk P.A.
Bank of America Centre
500 Fourth Street NW
Suite 1000
Albuquerque,
New Mexico 87102

PO Box 2168
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Derrill G. Elmore, Jr.
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-and-

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800 Ox Eye Trail
West Lake Hills, Texas 78746

John Allison, Individually and as Executor of the Katherine McCall Martin Estate
3230 Marquette
Houston, Texas 77005



MODRALL SPERLING

L A W Y E R S

May 20, 2014

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jik@modrall.com

TO: POOLED PARTIES LISTED ON EXHIBIT A

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

Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard location, a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on June 26, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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-and-

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800 Ox Eye Trail
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John Allison, Individually and as Executor of the Katherine McCall Martin Estate
3230 Marquette
Houston, Texas 77005



MODRALL SPERLING

L A W Y E R S

May 28, 2014

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Jordan L. Kessler
505.848.1849
Fax: 505.449.9710
jlk@modrall.com

TO: POOLED PARTIES LISTED ON EXHIBIT A

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

Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking a non-standard location, a non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on June 26, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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Attorney for COG Operating LLC

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800 Ox Eye Trail
West Lake Hills, Texas 78746

MaeDell Dalmont, heir and/or devisee of Orville L. Dalmont
Rte 1 Box 193
McCalester, OK 74501

Wilson W. Crook, III
3722 Tree Manor Lane
Kingwood, TX 77345

Carol Anne Kryder
5927 Hillcrest Avenue
Dallas, TX 75225

Elisabeth Sinak
3024 Hanover Street
Dallas, TX 75225

First National Bank and Trust Company of Okmulgee, Oklahoma as successor Trustee of the
Patricia Boyle Young Trust
610 E. 8th Street
P.O. Box 1037
Okmulgee, OK 74447

Bank of America, successor trustee under the Robert O. Erwin and Virginia McKnight Erwin
Revocable Trust Agreement
PO Box 26900
Albuquerque, NM 87125

Nancy Hay
7804 Brook Meadow Ln
Ft. Worth, Texas 76133

Rebecca Garrison
501 Kingsgate
Willow Park, Texas 76008

Lynne Moon
2714 Southwood
Dallas, Texas 75233

John Allison, Individually and as Executor of the Katherine McCall Martin Estate
4230 Marquette
Houston, Texas 77005

John Allison, Individually and as Executor of the Katherine McCall Martin Estate
Vice President, BP Energy Company
201 Helios Way
Houston, TX 77079

CERTIFIED MAIL RECEIPT – COG OPERATING LLC NOTICE LIST (TOMCAT)

Pooled Party	USPS Article No.	Date Returned
Ross Duncan Properties, LLC P.O. Box 647 Artesia, New Mexico 88211-0647	7013 0600 0000 9380 5541	3/24/14
Davis Partners, Ltd. P.O. Box 271 Midland, Texas 79702	7013 0600 0000 9380 5558	4/9/14
F. Ferrell Davis P.O. Box 3061 Midland, Texas 79702	7013 0600 0000 9380 5565	4/9/14
Bank of America, N.A., Trustee of the Robert O. Erwin and Virginia McKnight Erwin Trust a/k/a the Erwin Marital Trust P.O. Box 830308 Dallas, Texas 75283-0308	7013 0600 0000 9380 5572	3/28/14
Katherine Hartig Elmore, Derill G. Elmore, Jr., and Frank H. Elmore, III, Trustees under the Will of Derrill G. Elmore Derrill G. Elmore, Jr. 400 Elenburg Rd. Perrin, TX 76486	7013 0600 0000 9380 5589	Returned 3/27/14 – Return to Sender / Refused / Unable to Forward
Elizabeth Raymond a/k/a Betsy Raymond 13357 Forest River Drive SE Lowell, MI 49331	7013 0600 0000 9380 5596	4/3/14
Frederic D. Brownell 11703 Neering Drive Dallas, TX 75218	7013 0600 0000 9380 5602	3/24/14
William S. Deniger, Jr. 4061 Mawr Drive Dallas, TX 75225	7013 0600 0000 9380 5619	3/31/14
David B. Deniger 16479 Dallas Parkway, Suite 400 Addison, TX 75001	7013 0600 0000 9380 5626	4/10/14
John D. McCall, Jr. 6641 Wakefield Dr. Apt 513 Alexandria, VA 22307	7013 0600 0000 9380 5633	
Thomas Screven McCall 10481 FM 344 West Bullard, TX 75757	7013 0600 0000 9380 5640	3/24/14
SDH 2009 Investments, LP 2906 University Boulevard Dallas, TX 75205	7013 0600 0000 9380 5657	
The Allar Company PO Box 1567 Graham, TX 76450	7013 0600 0000 9380 5664	3/24/14
Hobby H McCall Living Trust Comerica Bank c/o Glen Malan – MC-3320 P.O. Box 75000 Detroit, MI 48275	7013 0600 0000 9380 5671	4/3/14

CERTIFIED MAIL RECEIPT – COG OPERATING LLC NOTICE LIST (TOMCAT)

Bertha C. McCall and Belmont Trust Company Co-Trustees of the Hobby H. McCall Living Trust 25 St. Laurent Place Dallas, Texas 75225	7013 0600 0000 9380 5688	Returned 3/31/14 – Not Deliverable as Addressed/Unable to Forward
Randolph D. McCall, III 800 Ox Eye Trail West Lake Hills, TX 78746	7013 0600 0000 9380 5695	Returned 4/7/14 – Returned to Sender – Refused – Unable to forward
Rebecca McCall Landis Baird 332 East Terra Alta San Antonio, TX 78209	7013 0600 0000 9380 5701	Returned 3/31/14 – Return to Sender – Vacant – Unable to Forward
Nuevo Seis Limited Partnership P.O. Box 2588 Roswell, NM 88202	7013 0600 0000 9380 5718	3/24/14
Barbara E. Hannifin P.O. Box 182 Roswell, NM 88201	7013 0600 0000 9380 5725	3/31/14
Texas Vanguard Oil Company P.O. Box 50820 Austin, TX 79710	7013 0600 0000 9380 5732	4/3/14
Mary Hampton Elliot c/o Logan Knapp 2755 Shadowdale Drive Houston, TX 77043	7013 0600 0000 9380 5749	
Joe J. Wallace and Patricia Wallace 111 Ellis St, 5 th Floor San Francisco, CA 94102	7013 0600 0000 9380 5756	Returned 3/31/14 – Attempted – Not Known – Unable to Forward
Mary Iva Campbell Trust Carol Anne Crook Kryder, Trustee 3722 Tree Manor Lane Kingwood, TX 77345	7013 0600 0000 9380 5763	3/28/14
Baloney Feathers, Ltd. P.O. Box 1586 Lubbock, TX 79403	7013 0600 0000 9380 5770	3/24/14
Richard D. Jones, Jr. 200 North Gaines Road Cedar Creek, TX 78612	7013 0600 0000 9380 5787	3/31/14
Southard Properties, Ltd., whose Sole General Partner is Southard Management Co. 1101 Scott Avenue, Suite 17 Wichita Falls, TX 76301	7013 0600 0000 9380 5794	3/24/14
ChivoOil, LLC P.O. Box 3061 Midland, TX 79702	7013 0600 0000 9380 5800	4/9/14
Paul Davis, Ltd. P.O. Box 871 Midland, Texas 79702	7013 0600 0000 9380 5817	4/10/14

CERTIFIED MAIL RECEIPT – COG OPERATING LLC NOTICE LIST (TOMCAT)

Gene L. Dalmont 1498 Scipio Lane McAlester, OK 74501	7013 0600 0000 9380 5824	3/24/14
Estate of Catherin H. Ragsdale c/o Douglass Nichols 4713 Chiappero Trail Austin, TX 78731	7013 0600 0000 9380 5831	3/25/14
Peter B. Tyson, SSP c/o Tyson Properties, LLC P.O. Box 3786 Midland, TX 79702	7013 0600 0000 9380 5848	4/9/14

Y:\dox\client\85789\0004\GENERAL\W2126592.DOCX

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Restricted Delivery Fee (Endorsement Required)	
Total P	

Postmark Here **MAR 19 2014**

Sent To: **Ross Duncan Properties, LLC**
 Street, A or P.O. Box: **P.O. Box 647**
 City, Sta: **Artesia, New Mexico 88211-0647**

PS Form 3811, February 2004

7455 0966 0000 0090 ETD

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 <i>Kandice Duncan</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>Kandice Duncan</i> C. Date of Delivery <i>03/20/14</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: 647
1. Article Addressed to: Ross Duncan Properties, LLC P.O. Box 647 Artesia, New Mexico 88211-0647	3. Service Type ☒ Certified Mail ☐ 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) 7013 0600 0000 9380 5541	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

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Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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 BY: _____

9555 0966 0000 0090 0702

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

MAR 18 2014

Sent to **Davis Partners, Ltd.**
 Street or PO **P.O. Box 271**
 City, S **Midland, Texas 79702**

PS Form 3811, February 2004 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:

Davis Partners, Ltd.
P.O. Box 271
Midland, Texas 79702

2. Article Number

(Transfer from service label)

7013 0600 0000 9380 5558

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** *Kathy Noble* ☐ Agent ☒ Addressee

B. Received by (Printed Name) **Kathy Noble** C. Date of Delivery **4-7-14**

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

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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TX 797 11

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5955 0966 0000 0090 E702

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Restricted Delivery Fee (Endorsement Required)	
Total P.	

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MAR 18 2014

Sent To **F. Ferrell Davis**
P.O. Box 3061
Street, A, or PO Box
City, State
Midland, Texas 79702

PS Form 3811, February 2004

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:

F. Ferrell Davis
P.O. Box 3061
Midland, Texas 79702

2. Article Number
(Transfer from service label)

7013 0600 0000 9380 5565

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x / Cathy Noble ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Cathy Noble **4-7-14**

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

UNITED STATES POSTAL SERVICE

MODRALL / ODESSA
TX 797 1 L
07 APR 2014 PM

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

MAR 18 2014

Sent To Bank of America, N.A., Trustee of the
Robert O. Erwin and Virginia McKnight
Street, Ap Erwin Trust a/k/a the Erwin Marital Trust
or PO Box
City, State P.O. Box 830308
Dallas, Texas 75283-0308

PS Form

1105

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- Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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., Trustee of the
Robert O. Erwin and Virginia McKnight
Erwin Trust a/k/a the Erwin Marital Trust
P.O. Box 830308
Dallas, Texas 75283-0308

2. Article Number

(Transfer from service label)

7013 0600 0000 9380 5572

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x [Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

MAR 24 2014

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$

Postmark
 Here

MAR 18 2014

Send To: Elizabeth Raymond a/k/a Betsy Raymond
 13357 Forest River Drive SE
 Lowell, MI 49331

PS

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: Elizabeth Raymond a/k/a Betsy Raymond 13357 Forest River Drive SE Lowell, MI 49331		A. Signature ☒ <i>Elizabeth Raymond</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) <i>B. Raymond</i> C. Date of Delivery <i>3-31-14</i> D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5596		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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• Sender: Please print your name, address, and ZIP+4 in this box •

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 Albuquerque, NM 87103-2168

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 BY: _____

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2095 0866 0000 0090 E702

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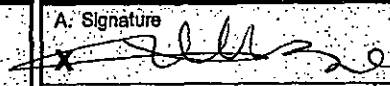
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Postage	\$	Postmark Here MAR 18 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Price		

Sent To **Frederic D. Brownell**
 Street, Apt. or PO Box **11703 Neering Drive**
 City, State **Dallas, TX 75218**

PS Form

ctions

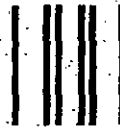
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. - Print your name and address on the reverse so that we can return the card to you. - Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery 3/21/14 D. Is delivery address different from Item 1? ☒ Yes If YES, enter delivery address below: ☒ No
1. Article Addressed to: Frederic D. Brownell 11703 Neering Drive Dallas, TX 75218	3. Service Type ☒ Certified Mail ☐ 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) 7013 0600 0000 9380 5602	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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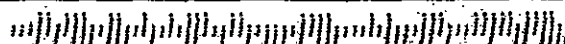


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Albuquerque, NM 87103-2168**

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	\$

Postmark
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MAR 18 2014

Sent To **William S. Deniger, Jr.**
4061 Mawr Drive
Dallas, TX 75225

PS Form

Sections

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 S. Deniger, Jr.
4061 Mawr Drive
Dallas, TX 75225

2. Article Number
(Transfer from service label)

7013 0600 0000 9380 5619

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Deniger

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3/29/14

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

23 MAR 14

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By:

9295 0826 0000 0090 E102

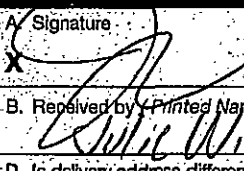
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Postage \$		Postmark Here MAR 18 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		

Sent To **David B. Deniger**
 16479 Dallas Parkway, Suite 400
 Addison, TX 75001

Street, or P.O. Box
 City, State

PS Form 3811, February 2004

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■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature  ☐ Agent ☐ Addressee	
1. Article Addressed to: David B. Deniger 16479 Dallas Parkway, Suite 400 Addison, TX 75001		B. Received by (Printed Name) David B. Deniger C. Date of Delivery 4-7-14	
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5626		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	

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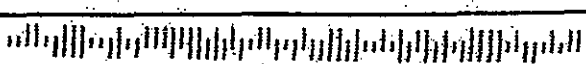


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75001
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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	\$

Postmark

MAR 18 2014

Sent To **Thomas Screven McCall**
10481 FM 344 West
Bullard, TX 75757

PS Form 3811

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

1. Article Addressed to:

Thomas Screven McCall
10481 FM 344 West
Bullard, TX 75757

2. Article Number

(Transfer from service label)

7013 0600 0000 9380 5640

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tom McCall*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3-21-14

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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21 MAR 14

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

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MAR 18 2014

Sent To: The Allar Company
 Street, or PO: P.O. Box 1567
 City, S: Graham, TX 76450

PS Form 3811, February 2004

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 <i>Sheila Burt</i> ☐ Agent ☐ Addressee	
1. Article Addressed to: The Allar Company P.O. Box 1567 Graham, TX 76450		B. Received by (Printed Name) <i>Sheila Burt</i> C. Date of Delivery MAR 20 2014	
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5664		D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		4. Restricted Delivery? (Extra Fee) ☐ Yes	

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

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 Permit No. G-10

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 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
MAR 24 2014
 BY: _____

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

MAR 18 2014

Sent To **Hobby H McCall Living Trust**
Comerica Bank
 Street, 1 c/o Glen Malan – MC-3320
 or PO B
 City, St P.O. Box 75000
 Detroit, MI 48275.

PS Form

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:

Hobby H McCall Living Trust
Comerica Bank
 c/o Glen Malan – MC-3320
 P.O. Box 75000
 Detroit, MI 48275

2. Article Number
 (Transfer from service label)

7013 0600 0000 9380 5671

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

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

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

MAR 27 2014

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

UNITED STATES POSTAL SERVICE

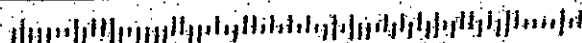


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 Postage & Fees Paid
 USPS
 Permit No. G-10

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 BY: _____



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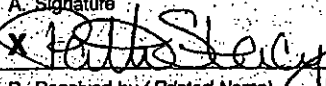
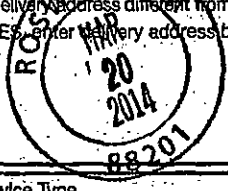
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

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 Here
MAR 18 2014

Sent To: **Nuevo Seis Limited Partnership**
P.O. Box 2588
Roswell, NM 88202

Street, Apt or PO Box
 City, State

PS Form 3811, February 2004

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  ☒ Agent ☐ Addressee	
1. Article Addressed to: Nuevo Seis Limited Partnership P.O. Box 2588 Roswell, NM 88202		B. Received by (Printed Name) JOHN STACY C. Date of Delivery 3-20-14	
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5718		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

UNITED STATES POSTAL SERVICE

20 MAR 24 2014

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Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Postmark
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MAR 18 2014

Sent To: **Barbara E. Hannifin**
 Street or PO: **P.O. Box 182**
 City, S: **Roswell, NM 88201**

PS Form

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 E. Hannifin
 P.O. Box 182
 Roswell, NM 88201

2. Article Number

(Transfer from service)

7013 0600 0000 9380 5725

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☒ Agent

☐ Addressee

B. Received by (Printed Name)

Patti Stack

C. Date of Delivery

3-22-14

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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MAR 31 2014
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7013 0600 0000 9380 5732

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Postage	\$	Postmark Here MAR 18 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To **Texas Vanguard Oil Company**
 Street, Apt or PO Box **P.O. Box 50820**
 City, State **Austin, TX 79710**

PS Form 3811, February 2004

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 R. Pando	
1. Article Addressed to: Texas Vanguard Oil Company P.O. Box 50820 Austin, TX 79710		☐ Agent ☐ Addressee B. Received by (Printed Name) R. Pando	
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5732		C. Date of Delivery 4-1-14 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

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MAR 18 2014

Sent To	Mary Iva Campbell Trust
Street, or POB	Carol Anne Crook Kryder, Trustee
City, Sta	3722 Tree Manor Lane Kingwood, TX 77345

PS-Forn

Actions

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:

Mary Iva Campbell Trust
Carol Anne Crook Kryder, Trustee
3722 Three Manor Lane
Kingwood, TX 77345

☐ Addressee

B. Received by (Printed Name) W. O. G. Date of Delivery 11/11/54

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 111111
(Transfer from service label)

7013 0600 0000 9380 5763

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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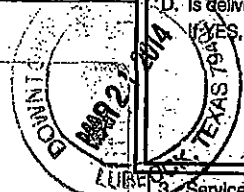
• Sender: Please print your name, address, and ZIP+4 in this box •

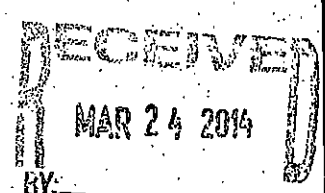
Jordan Kessler
Modrall Sperling Law Firm
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Albuquerque, NM 87103-2168

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MAR 28 2014
BY: _____

7013 0600 0000 9380 5770

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Postage \$	Postmark Here MAR 18 2014
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Prepaid Fees \$	
Sent To	Baloney Feathers, Ltd.
Street, A or PO Box	P.O. Box 1586
City, State	Lubbock, TX 79403
PS Form	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 mail piece, or on the front if space permits.		A. Signature  ☐ Agent ☐ Addressee B. Received by (Printed Name) J. McDonald C. Date of Delivery MAR 18 2014 D. Is delivery address different from item 1? ☐ Yes ☒ No YES, enter delivery address below:	
1. Article Addressed to: Baloney Feathers, Ltd. P.O. Box 1586 Lubbock, TX 79403			
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5770		3. Service Type ☒ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-15	

UNITED STATES POSTAL SERVICE			
LUBBOCK TX 79403		First-Class Mail Postage & Fees Paid USPS Permit No. G-10	
21 MAR 2014 PM 2:1			
• Sender: Please print your name, address, and ZIP+4 in this box •			
Jordan Kessler Modrall Sperling Law Firm P.O. Box 2168 Albuquerque, NM 87103-2168			
			

7013 0600 0000 9380 5787

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Postage \$	MAR 18 2014 Postmark Here MAR 18 2014
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To Richard D. Jones, Jr. Street, Apt. or PO Box 200 North Gaines Road City, State Cedar Creek, TX 78612	
PS Form 3811, February 2004	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Richard D. Jones, Jr. 200 North Gaines Road Cedar Creek, TX 78612		A. Signature <i>Patrick Higgins</i>	
2. Article Number: (Transfer from service label) 7013 0600 0000 9380 5787		B. Received by (Printed Name) <i>Patrick Higgins</i> C. Date of Delivery MAR 28 2014	
3. Service Type ☒ Certified Mail ☐ Registered Mail ☐ Insured Mail		☐ Agent ☐ Addressee ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.	
4. Restricted Delivery? (Extra Fee) ☐ Yes		D. Is delivery address different from above? If YES, enter delivery address below:	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

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• Sender: Please print your name, address, and ZIP+4 in this box •		
Jordan Kessler Modrall Sperling Law Firm P.O. Box 2168 Albuquerque, NM 87103-2168		RECEIVED MAR 31 2014 BY:

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
MAR 4 8 2014

Sent To	Southard Properties, Ltd. whose Sole General Partner is Southard Management Co.
Street, A or PO Box	1101 Scott Avenue, Suite 17
City, State	Wichita Falls, TX 76301
PS Form	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:

Southard Properties, Ltd. whose Sole General Partner is Southard Management Co.
1101 Scott Avenue, Suite 17
Wichita Falls, TX 76301

2. Article Number

(Transfer from service label)

7013 0600 0000 9380 5794

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

☐ Agent

☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

3-20-14

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

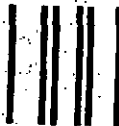
☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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MAR 24 2014
BY: _____



7013 0600 0000 9380 5800

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OFFICIAL USE	
Postage \$	Postmark Here APR 18 2014
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To	ChivoOil, LLC
Street, Apt. or PO Box	P.O. Box 3061
City, State	Midland, TX 79702
PS Form 3811, February 2004	

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 <i>Kathy Nehls</i> ☐ Agent ☒ Addressee	
1. Article Addressed to: ChivoOil, LLC P.O. Box 3061 Midland, TX 79702		B. Received by (Printed Name) <i>Kathy Nehls</i> C. Date of Delivery <i>4-7-14</i>	
2. Article Number (Transfer from service label) 7013 0600 0000 9380 5800		D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

UNITED STATES POSTAL SERVICE		First-Class Mail Postage & Fees Paid USPS Permit No. G-10
• Sender: Please print your name, address, and ZIP+4 in this box • Jordan Kessler Modrall Sperling Law Firm P.O. Box 2168 Albuquerque, NM 87103-2168		
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7013 0600 0000 9380 5817

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

MAR 18 2014

Sent to **Paul Davis, Ltd.**
Street or PO **P.O. Box 871**
City, S **Midland, Texas 79702**

PS Fo

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:

Paul Davis, Ltd.
P.O. Box 871
Midland, Texas 79702

2. Article Number
(Transfer from service label)

7013 0600 0000 9380 5817

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jeremiah Lottrell

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Jeremiah Lottrell

C. Date of Delivery

4-8-14

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

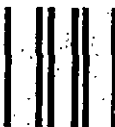
☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

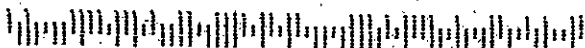


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Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$	Postmark Here MAR 18 2014
Sent To Street, Apt. or PO Box City, State	Gene L. Dalmont 1498 Scipio Lane McAlester, OK 74501
PS Form	ations

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 <i>Dalmont</i>	
1. Article Addressed to: Gene L. Dalmont 1498 Scipio Lane McAlester, OK 74501		B. Received by (Printed Name) C. Date of Delivery 3/21	☐ Agent ☐ Addressee
		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
2. Article Number (Transfer from service label)		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
7013 0600 0000 9380 5824		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

UNITED STATES POSTAL SERVICE FIRST CLASS MAIL PERMIT NO. G-10	First-Class Mail Postage & Fees Paid USPS Permit No. G-10
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7013 0600 0000 9380 5831

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

Postmark
Here

MAR 18 2014

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

Estate of Catherin H. Ragsdale
c/o Douglass Nichols
4713 Chiappero Trail
Austin, TX 78731

actions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 Catherin H. Ragsdale
c/o Douglass Nichols
4713 Chiappero Trail
Austin, TX 78731

2. Article Number:
(Transfer from service label)

7013 0600 0000 9380 5831

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Joni Miguez*

☐ Agent

☒ Addressee

B. Received by (Printed Name)

Joni Miguez

C. Date of Delivery

3-22-14

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

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

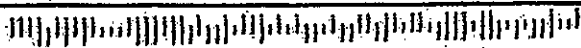


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Postage	\$	Postmark MAR 18 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Price	\$	

7013 0600 0000 9380 5848

Sent To: Peter B. Tyson, SSP
 Street, A: c/o Tyson Properties, LLC
 or PO Box: P.O. Box 3786
 City, State: Midland, TX 79702

PS Form 3811, February 2004

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: <i>R. Tyson</i> ☐ Agent ☐ Addressee B. Received by (Printed Name): <i>Rachel DeLeon</i> C. Date of Delivery: <i>8-7-14</i> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Peter B. Tyson, SSP c/o Tyson Properties, LLC P.O. Box 3786 Midland, TX 79702		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) ☐ Yes	
7013 0600 0000 9380 5848			

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

UNITED STATES POSTAL SERVICE / ODESSA TX 797 1 L
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• Sender: Please print your name, address, and ZIP+4 in this box •

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 Albuquerque, NM 87103-2168

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BY: _____

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Certified Fee
Return Receipt Fee
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)
Total Postage & Fees \$

Postmark
Here

MAR 18 2014

Sent To John D. McCall, Jr.
6641 Wakefield Dr. Apt 513
Street, Apt
or PO Box Alexandria, VA 22207
City, State

PS Form 3849, November 2010

U.S. Postal Service™

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Postage \$
Certified Fee
Return Receipt Fee
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)
Total Postage & Fees \$

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MAR 18 2014

Sent To SDH 2009 Investments, LP
2906 University Boulevard
Street, Apt
or PO Box Dallas, TX 75205
City, State

PS Form 3849, November 2010

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Return Receipt Fee
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)
Total Postage & Fees \$

Postmark
Here

MAR 18 2014

Sent To Mary Hampton Elliot
c/o Logan Knapp
Street, Apt
or PO Box 2755 Shadowdale Drive
City, State Houston, TX 77043

PS Form 3849, November 2010



MODRALL S.

Modrall Sperling
Roehl Harris & Sisk, P.A.
PO Box 2168
Albuquerque, NM
87103-2168

Received
4-1-14

LW
3-22

CERTIFIED MAIL™

7013 0600 0000 9380 5695

Randolph D. McCall, III
800 Ox Eye Trail
West Lake Hills, TX 78746

NIXIE

RETURN TO SENDER
REFUSED
UNABLE TO FORWARD

87103@2168

BC: 87103216868 *0893-07768-04-27

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MAR 18 2014

Sent To Randolph D. McCall, III
Street, Apt. or PO Box 800 Ox Eye Trail
City, State West Lake Hills, TX 78746

PS Form

7013 0600 0000 9380 5695

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MAR 18 2014

Sent To
 Bertha C. McCall & Belmont Trust Co.
 Co-Trustees of the Hobby H. McCall Living Trust
 25 St. Laurent Place
 Dallas, Texas 75225

PS Form 3800, June 2010

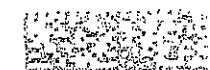
Bertha C. McCall & Belmont Trust Co.
 Co-Trustees of the Hobby H. McCall Living Trust
 25 St. Laurent Place
 Dallas, Texas 75225

Hasler

03/18/2014

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ZIP 75202
 01101150450

1 0000 9380 5688

NIXIE 750 DE 1009 0003/27/14

RETURN TO SENDER
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 UNABLE TO FORWARD

BC: 87103216868 *1034-00634-20-30

8710302168

9525 0866 0000 0090 E102

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Total Postage & Fees	\$

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Here
MAR 18 2014

0 0000 9380 5756

J. Wallace and Patricia Wallace
1 Ellis St, 5th Floor
San Francisco, CA 94102

Sent To	Joe J. Wallace and Patricia Wallace
Street, or PO E	111 Ellis St, 5 th Floor
City, St	San Francisco, CA 94102
PS Form	

Hasler
03/18/2014
US POSTAGE

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ZIP 87102
011D11630430

RTK
AKH

NIXIE 957 FE 1 0003/25/14
RETURN TO SENDER
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UNABLE TO FORWARD
BC: 87103216868 *2641-03226-25-35

87103 02168

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To: Rebecca McCall Landis Baird
Street or PO: 332 East Terra Alta
City, State: San Antonio, TX 78209

PS Form 3800

CERTIFIED MAIL

10 0000 9380 5701

Postmark
Here
MAR 18 2014

Rebecca McCall Landis Baird
East Terra Alta
Antonio, TX 78209

Hasler

03/18/2014

US POSTAGE

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ZIP 87102
011D11630450

Not Yes??
03/22

NOXPE 782 DE 1 0003/26/14

RETURN TO SENDER
VACANT
UNABLE TO FORWARD

BC: 87103216868 *2093-08338-26-09

87103 @2168



MODRALL SPERLING

Modrall Sperling
Roehl Harris & Sisk, P.A.
PO Box 2168
Albuquerque, NM
87103-2168

Trustees under the Will of Derrill G. Elmore
Derrill G. Elmore, Jr.
400 Elenburg Rd.
Perrin, TX 76486

NIXIE

CERTIFIED MAIL

7013 0600 0000 9380 5

5955 0900 0000 0090 0702

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

MAR 18 2014

Sent To Trustees under the Will of Derrill G. Elmore
Street, Ap Derrill G. Elmore, Jr.
or PO Box 400 Elenburg Rd.
City, State Perrin, TX 76486

PS Form

RETURN TO SENDER
REFUSED
UNABLE TO FORWARD

BC: 87103216868 *1882-06397-24-31

87103 02168



MODRALL SPE

Modrall Sperling
Roehl Harris & Sisk, P.A.
PO Box 2168
Albuquerque, NM
87103-2168

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ZIP 87102
011D11630480

7013 0600 0000 9380 5749

Mary Hampton Elliot
c/o Logan Knapp
2755 Shadowdale Drive
Houston, TX

770434022-1N

RETURN TO SENDER
UNABLE TO FORWARD
UNABLE TO FORWARD
RETURN TO SENDER

Didn't turn in a
04/21/14

ess
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S.P.O.

7704381738-0011

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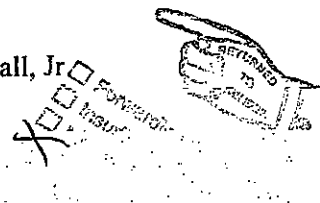


MODRALL SP

Modrall Sperting
Roehl Harris & Sisk, P.A.
PO Box 2168
Albuquerque, NM
87103-2168

7013 0600 0000 9380 5633

John D. McCall, Jr



*Moved
Forward
AT 726
3-21-14
3/2
Ret 4-4*

Hasler

03/18/2014

USPS

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USPS

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Roehl Harris & Sisk, P.A.
PO Box 2168
Albuquerque, NM
87103-2168

7013 0600 0000 9380 5657

SDH 2009 Investments, LP
2906 University Boulevard
Dallas, TX 75205

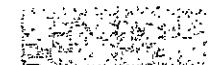
LW
3/26

Master

03-16-2014

USPS

\$06.69



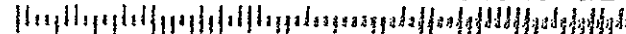
☐ COVER LETTER
☐ FORWARDED
☐ ATTACHED
☒ UNCLAIMED

NIXIE 750 DE 1009 0005/08/14

RETURN TO SENDER
UNCLAIMED
UNABLE TO FORWARD

7520581005 000
87103 02168

SC: 87103216868 *0534-12703-21-01



CERTIFIED MAIL RECEIPT – COG OPERATING LLC NOTICE LIST (TOMCAT)
[Additional Pooled Parties – 4/23/14]

Pooled Party	USPS Article No.	Date Returned
Christine J. McCall, Individually and as Executrix of the Randolph McCall Estate 800 Ox Eye Trail West Lake Hills, TX 78746	7013 0600 0000 9380 5893	5/5/14
John Allison, Individually and as Executor of the Katherine McCall Martin Estate 3230 Marquette Houston, TX 77005	7013 0600 0000 9380 5909	Returned 5/9/14 – No such number / unable to forward

7013 0600 0000 9380 5909

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent to John Allison, Individually and as	
Executor of the Katherine McCall Martin Estate	
Street, Apt. No. or P.O. Box 3230 Marquette	
City, State, ZIP+4® Houston, TX 77005	
PS Form 3800, August 2006 See Reverse for Instructions	

MODRALL SP

Modrall Sperling
Roehl Harris & Sisk, P.A.
PO Box 2168
Albuquerque, NM
87103-2168

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04/23/2014
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FIRST-CLASS MAIL

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011D11630480

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MAY - 9 2014

John Allison, Individually and as Executor of the
Katherine McCall Martin Estate
3230 Marquette
Houston, TX

NIXIE	773	DE 11005	0005/04/14
RETURN TO SENDER NO SUCH NUMBER UNABLE TO FORWARD			
BC: 87103216868 *0968-07471-23-42			

87103 02168
77005 83543

EB95 09EB 0000 0090 E102

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
APR 23 2014	
Postmark Here	
Sent To: Christine J. McCall, Individually and as Executrix of the Randolph McCall Estate Street, Apt. No. or PO Box No. 800 Ox Eye Trail City, State, ZIP+4 West Lake Hills, TX 78746	
PS Form 3800, August 2006 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 <i>Christine McCall</i> ☐ Agent ☐ Addressee	
1. Article Addressed to: Christine J. McCall, Individually and as Executrix of the Randolph McCall Estate 800 Ox Eye Trail West Lake Hills, TX 78746		B. Received by (Printed Name)	C. Date of Delivery
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1640	

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• Sender: Please print your name, address, and ZIP+4 in this box •			
Jordan Kessler Modrall Sperling Law Firm P.O. Box 2168 Albuquerque, NM 87103-2168			
RECEIVED MAY - 5 2014 BY: _____			

CERTIFIED MAIL RECEIPT – COG OPERATING LLC NOTICE LIST (TOMCAT)**[Additional Pooled Parties – 5/28/14, 5/29/14 (Allison), and 6/2/14 (Allison – work)]****[A second certified letter was sent on 6/2/14 to Dalmont thru Hay after call from Moon of page missing from her copy]**

Pooled Party	USPS Article No.	Date Returned
MaeDell Dalmont, heir and/or devisee of Orville L. Dalmont Rte 1 Box 193 McCalester, OK 74501	7013 0600 0000 9380 9365 7013 0600 0000 9380 9471	6/12/14 – Returned to Sender
Wilson W. Crook, III 3722 Tree Manor Lane Kingwood, TX 77345	7013 0600 0000 9380 9372 7013 0600 0000 9380 9488	6/5/14
Carol Anne Kryder 5927 Hillcrest Avenue Dallas, TX 75225	7013 0600 0000 9380 9389 7013 0600 0000 9380 9495	6/5/14 6/9/14
Elisabeth Sinak 3024 Hanover Street Dallas, TX 75225	7013 0600 0000 9380 9419 7013 0600 0000 9380 9501	6/16/14
First National Bank and Trust Company of Okmulgee, Oklahoma as successor Trustee of the Patricia Boyle Young Trust 610 E. 8 th Street P.O. Box 1037 Okmulgee, OK 74447	7013 0600 0000 9380 9426 7013 0600 0000 9380 9518	6/5/14 6/9/14
Bank of America, successor trustee under the Robert O. Erwin and Virginia McKnight Erwin Revocable Trust Agreement P.O. Box 26900 Albuquerque, NM 87125	7013 0600 0000 9380 9433 7013 0600 0000 9380 9525	6/4/14 – Return to Sender [both]
Rebecca Garrison 316 Fry Street, Apt. 364 Denton, TX 76201-0125	7013 0600 0000 9380 9440	6/12/14 – Returned to Sender
Rebecca Garrison 501 Kingsgate Willow Park, TX 76087-8366	7013 0600 0000 9380 9532	6/16/14
Lynne Moon 2714 Southwood Drive Dallas, TX 75223-2734	7013 0600 0000 9380 9457 7013 0600 0000 9380 9549	6/5/14 6/9/14
Nancy Hay 6333 Camp Bowie Blvd. #230 Fort Worth, TX 76116	7013 0600 0000 9380 9464	6/4/14 – Return to Sender
Nancy Hay 7804 Brook Meadow Lane Fort Worth, TX 76133	7013 0600 0000 9380 9556	6/9/14
John Allison, Individually and as Executor of the Katherine McCall Martin Estate 4230 Marquette Houston, Texas 77005	7013 0600 0000 9380 7491	6/13/14

CERTIFIED MAIL RECEIPT – COG OPERATING LLC NOTICE LIST (TOMCAT)

[Additional Pooled Parties – 5/28/14, 5/29/14 (Allison), and 6/2/14 (Allison – work)]

[A second certified letter was sent on 6/2/14 to Dalmont thru Hay after call from Moon of page missing from her copy]

John Allison, Individually and as Executor of the Katherine McCall Martin Estate Vice President, BP Energy Company 201 Helios Way Houston, Texas 77079	7013 0600 0000 9380 7460	
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7013 0600 0000 9380 9365

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Postage	\$	Postmark MAY 28 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total F

Sent To	MaeDell Dalmont, heir and/or devisee
Street, P.O. Box, or POB	of Orville L. Dalmont
City, State	Rte 1 Box 193
	McCalester, OK 74501

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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
 Here
JUN 02 2014

Sent To	MaeDell Dalmont, heir and/or devisee of
Street, / or PO B	Orville L. Dalmont
City, Sta	Rte 1 Box 193
	McCalester, OK 74501

PS Form 3800, October 2011 See Reverse for Instructions

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 Roehl Harris & Sisk, P.A.
 PO Box 2168
 Albuquerque, NM
 87103-2168

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 06/02/2014
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 ZIP 87102
 011D11630480

JUN 12 2014

MaeDell Dalmont, heir and/or devisee of Orville L.
 Dalmont
 Rte 1 Box 193
 McCalester, OK 74501

RETURN TO SENDER
 NO SUCH NUMBER
 UNABLE TO FORWARD

87103-02168
 74501-39724

BC: 87103216868 *0968-01107-02-43

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Restricted Delivery Fee (Endorsement Required)	
Total Pr	

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MAY 28 2014

Sent To: **Wilson W. Crook, III**
 Street, Apt. or PO Box: **3722 Tree Manor Lane**
 City, State: **Kingwood, TX 77345**

PS Form 3800, August 2006

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 <i>W. Crook</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) _____ C. Date of Delivery _____ D. Is delivery address different from Item 1? ☐ Yes If YES, enter delivery address below: ☐ No
1. Article Addressed to: Wilson W. Crook, III 3722 Tree Manor Lane Kingwood, TX 77345	3. Service Type ☒ Certified Mail ☐ 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) 7013 0600 0000 9380 9372	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE



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 USPS
 Permit No. G-10

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Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
JUN 2 2014

Sent To
Street,
or P.O.B.
City, Sta
Wilson W. Crook, III
3722 Tree Manor Lane
Kingwood, TX 77345

PS Form 3849, June 2012 See reverse for instructions

9845 0966 0000 0090 E102

7013 0600 0000 9380 9389

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Postage \$	Postmark MAY 28 2014
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	
Sent To: Carol Anne Kryder	
Street, or PO: 5927 Hillcrest Avenue	
City, St: Dallas, TX 75225	
PS Form 3800, August 2006 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 ☒ Agent ☒ Addressee
1. Article Addressed to: Carol Anne Kryder 5927 Hillcrest Avenue Dallas, TX 75225	B. Received by (Printed Name) C. Date of Delivery 6-2
2. Article Number (transfer from service label) 7013 0600 0000 9380 9389	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

UNITED STATES POSTAL SERVICE

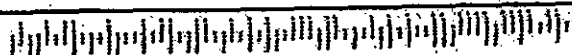


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USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

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Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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JUN - 5 2014



7013 0600 0000 9380 9495

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Postage \$ _____ Certified Fee _____ Return Receipt Fee (Endorsement Required) _____ Restricted Delivery Fee (Endorsement Required) _____ Total Postage & Fees \$ _____	JUN 02 2014 Postmark Here
Sent To: Carol Anne Kryder Street or PO: 5927 Hillcrest Avenue City, State: Dallas, TX 75225 PS Form 3811, February 2004	(For use by addressee or 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 ☒ Agent ☒ Addressee B. Received by (Printed Name) Carol A. Kryder C. Date of Delivery D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
1. Article Addressed to: Carol Anne Kryder 5927 Hillcrest Avenue Dallas, TX 75225		3. Service Type ☒ Certified Mail ☐ 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) 7013 0600 0000 9380 9495			
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

UNITED STATES POSTAL SERVICE 	First-Class Mail Postage & Fees Paid USPS Permit No. G-10
• Sender: Please print your name, address, and ZIP+4 in this box •	
Jordan Kessler Modrall Sperling Law Firm P.O. Box 2168 Albuquerque, NM 87103-2168	RECEIVED JUN - 9 2014 BY:
	

7013 0600 0000 9380 9415

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	¢
Postmark Here MAY 28 2014	
Sent To Elisabeth Sinak Street, Apt. or PO Box: 3024 Hanover Street City, State, Dallas, TX 75225	
PS Form 3800, November 2010	

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total P	

Postmark
 JUN 02 2014

Sent To: Elisabeth Sinak
 3024 Hanover Street
 Dallas, TX 75225

PS Form 3800, August 2000

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: Elisabeth Sinak 3024 Hanover Street Dallas, TX 75225 2. Article Number (Transfer from service label)	A. Signature X B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 1? ☐ Yes. If YES, enter delivery address below: ☐ No 3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

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• Sender: Please print your name, address, and ZIP+4 in this box • Jordan Kessler Modrall Sperling Law Firm P.O. Box 2168 Albuquerque, NM 87103-2168		
		RECEIVED JUN 16 2014 BY: _____

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Postmark
MAY 8 2014

Sent To: First National Bank and Trust Company of
Okmulgee, OK as successor Trustee of the
Patricia Boyle Young Trust
Street: 610 E. 8th Street
City, St: P.O. Box 1037
Okmulgee, OK 74447

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 National Bank and Trust Company of
Okmulgee, OK as successor Trustee of the
Patricia Boyle Young Trust
610 E. 8th Street
P.O. Box 1037
Okmulgee, OK 74447

2. Article Number
(Transfer from service label)

7013 0600 0000 9380 9426

COMPLETE THIS SECTION ON DELIVERY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1640

UNITED STATES POSTAL SERVICE

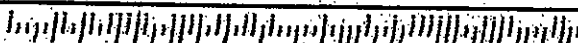


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
JUN - 5 2014
BY:



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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
JUN 02 2014

Sent To

Street, Apt.
 or P.O. Box
 City, State

PS Form

First National Bank and Trust Company
 of Okmulgee, Oklahoma as successor
 Trustee of the Patricia Boyle Young Trust
 610 E. 8th Street / P.O. Box 1037
 Okmulgee, OK 74447

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:

First National Bank and Trust Company
 of Okmulgee, Oklahoma as successor
 Trustee of the Patricia Boyle Young Trust
 610 E. 8th Street / P.O. Box 1037
 Okmulgee, OK 74447

2. Article Number

(Transfer from service label)

7013 0600 0000 9360 9518

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Don Hale*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Don Hale

C. Date of Delivery

6/5/14

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE

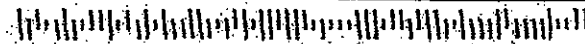


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 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
JUN - 9 2014
 By: *[Signature]*



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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Postmark Here **JUN 2 2014**

Sent to
 Street or PO
 City, State
 Bank of America, successor trustee under
 the Robert O. Erwin and Virginia McKnight
 Erwin Revocable Trust Agreement
 PO Box 26900
 Albuquerque, NM 87125

PS Form 3800, October 2013

5256 0966 0000 9380 9525
 7013 0600 0000 9380 9525

CERTIFIED MAIL™

MODRALL SPE

Modrall Sperling
 Roehl Harris & Sisk, P.A.
 PO Box 2168
 Albuquerque, NM
 87103-2168

7013 0600 0000 9380 9525

Hasler

FIRST-CLASS MAIL

06/02/2014

US POSTAGE

\$06.69⁰⁰



ZIP 87102
 011D11630480

JUN 14 2014

Bank of America, successor trustee under the
 Robert O. Erwin and Virginia McKnight Erwin
 Revocable Trust
 PO Box 269
 Albuquerque, NM

RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD

BC: 87103216868 11755-00276-03-20

87103 @2168



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OFFICIAL USE

Postage	\$	MAY 28 2014
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total		

Sent **Rebecca Garrison**
 Street or PO **316 Fry Street, Apt. 364**
 City **Denton, TX 76201-0125**

PS Form 3800, August 2009

7013 0600 0000 9380 9440

CERTIFIED MAIL™

MODRALL SPER

Modrall Sperling
 Roehl Harris & Sisk, P.A.
 PO Box 2168
 Albuquerque, NM
 87103-2168

7013 0600 0000 9380 9440

Rebecca Garrison
 316 Fry Street, Apt. 364
 Denton, TX 76201-0125

AMR

Hasler

FIRST-CLASS MAIL

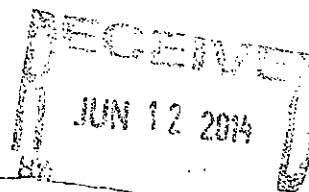
05/28/2014

US POSTAGE

\$06.69



ZIP 87102
 011D11630480



RETURN TO SENDER
 NOT RETURN
 AVAILABLE TO FORWARD

7620180125 COE

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

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	

JUN 16 2014

Sent To: **Rebecca Garrison**
 Street, Apt. or PO Box: **501 Kingsgate**
 City, State: **Willow Park, Texas 76008**

PS Form 3811

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Rebecca Garrison
 501 Kingsgate
 Willow Park, Texas 76008

76087-8366

2. Article Number
 (Transfer from service label)

7013 0600 0000 9380 9532

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*
☐ Agent
☒ Addressee
 B. Received by (Printed Name): **Rebecca Garrison**
 C. Date of Delivery: **6-11-14**

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

UNITED STATES Postal Service

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
JUN 16 2014
 BY: _____

7013 0600 0000 9380 9457

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

MAILED MAY 28 2014

Sent To: **Lynne Moon**
Street, Apt. or PO Box: **2714 Southwood Drive**
City, State: **Dallas, TX 75223-2734**

PS Form 3811

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: <i>Lynne Moon</i> ☐ Agent ☒ Addressee B. Received by (Printed Name): <i>Lynne Moon</i> C. Date of Delivery: <i>5/31/14</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:
1. Article Addressed to: Lynne Moon 2714 Southwood Drive Dallas, TX 75223-2734	3. Service Type: ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2. Article Number (Transfer from service label): 7013 0600 0000 9380 9457	4. Restricted Delivery? (Extra Fee) ☐ Yes

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

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
JUN - 5 2014
BY: _____

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OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Price	\$

Postmark Here
JUN 12 2014

Sent To **Lynne Moon**
2714 Southwood
Dallas, Texas 75233

PS Form 3811, February 2004

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 <i>x Lynne Moon</i> ☐ Agent ☒ Addressee B. Received by (Printed Name) <i>Lynne Moon</i> C. Date of Delivery <i>6/6/14</i> D. Is delivery address different from item 1? ☐ Yes ☒ No If YES, enter delivery address below:
1. Article Addressed to: Lynne Moon 2714 Southwood Dallas, Texas 75233	3. Service Type ☒ Certified Mail ☐ 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) 7013 0600 0000 9380 9549	

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

UNITED STATES POSTAL SERVICE
 DALLAS TX
 06 JUN '14

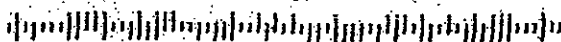
First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

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JUN - 9 2014
 BY: _____

03216868



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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark: MAY 28 2014

Sent To: Nancy Hay
 Street, Apt. # or PO Box No: 6333 Camp Bowie Blvd. #230
 City, State, ZIP: Fort Worth, TX 76116

PS Form 3800, September 2009 See Reverse for Instructions

CERTIFIED MAILTM

ALBUQUERQUE

NO
 MAY '14

Hasler
 05/28/2014
US POSTAGE

FIRST-CLASS MAIL

\$06.69⁰⁰



ZIP 87102
 011D11630480

MODRALL SP

Modrall Sperling
 Roehl Harris & Sisk, P.A.
 PO Box 2168
 Albuquerque, NM
 87103-2168

7013 0600 0000 9380 9464

Nancy Hay
 6333 Camp Bowie Blvd. #230
 Fort Worth, TX 76116

RECEIVED
 JUN 14 2014
 BY: [Signature]

INDEXED 750 SE 1000 0006/01/14

RETURN TO SENDER
 NO SUCH NUMBER
 UNABLE TO FORWARD

BC: 87103216868 *0668-01966-28-40

92192021505

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OFFICIAL USE

9556 0866 0000 9380 9556
 7013 0600 0000 9380 9556

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	\$

JUN 02 2014
 Postmark Here

Sent To **Nancy Hay**
 Street, Ap or PO Box **7804 Brook Meadow Ln**
 City, State **Ft. Worth, Texas 76133**

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return 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 Hay
7804 Brook Meadow Ln
Ft. Worth, Texas 76133

2. Article Number
 (Transfer from service label)

7013 0600 0000 9380 9556

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Nancy Hay ☒ Agent ☐ Addressee

B. Received by (Printed Name)

N Hay

C. Date of Delivery

6-4

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

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

UNITED STATES POSTAL SERVICE

PAID 7.00
01 JUN 14

First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
Modrall Sperling Law Firm
P.O. Box 2168
Albuquerque, NM 87103-2168

RECEIVED
JUN - 9 2014
 BY: _____



7013 0600 0000 9380 7491

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

529-14
 Postmark
 Here

Sent To
 John Allison
 Street, Apt. No.,
 or PO Box No. 4230 Marquette
 City, State, ZIP+4
 Houston, TX 77005
 PS Form 3800, August 2006 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: John Allison, Individually and as Executor of the Katherine McCall Martin Estate 4230 Marquette Houston, TX 77005 2. Article Number (Transfer from service label) 7013 0600 0000 9380 7491	A. Signature Anna Allison 6/10/14 ☐ 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

UNITED STATES POSTAL SERVICE
 HOUSTON TX 77005
 JUN 13 2014
 PM 2:11



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jordan Kessler
 Modrall Sperling Law Firm
 P.O. Box 2168
 Albuquerque, NM 87103-2168

RECEIVED
 JUN 13 2014
 BY: _____



0942 0926 0000 0090 2102

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Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

6-214

Sent To	John Allison
Street, Apt. No., or PO Box No.	BP Energy Co.
City, State, ZIP+4	201 Helios Way Houston, TX 77079

PS Form 3800, August 2006 See Reverse for Instructions