

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

**APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD SPACING AND
PRORATION UNIT, AND COMPULSORY POOLING, LEA COUNTY, NEW MEXICO.**

CASE NO. 15199

AFFIDAVIT

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

Michael H. Feldewert, attorney in fact and authorized representative of Chevron U.S.A. Inc., the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letter and proof of receipts attached hereto.

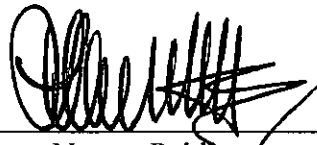


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 17th day of September 2014 by Michael H. Feldewert.



**OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO**
My commission expires **09/14/15**



Notary Public

**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 8
Submitted by: CHEVRON U.S.A., INC.
Hearing Date: September 17, 2014**



Michael H. Feldewert
Recognized Specialist in the Area
of Natural Resources - oil and gas
law New Mexico Board of Legal
Specialization
mfeldewert@hollandhart.com

August 29, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**RE: APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD
SPACING AND PRORATION UNIT, AND COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.
(Gramma Ridge 14-24-34-5H Well)**

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

This application has been set for hearing before a Division Examiner at 8:15 AM on September 14, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

Questions concerning this application should be directed to Cody Cole at (713) 372-1103 or ccole@chevron.com.

Sincerely,

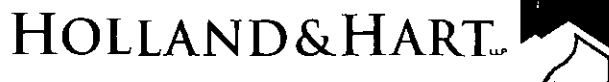
Michael H. Feldewert

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

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

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



Michael H. Feldewert
Recognized Specialist in the Area of
Natural Resources - oil and gas law -
New Mexico Board of Legal
Specialization
mfeldewert@hollandhart.com

August 29, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD
SPACING AND PRORATION UNIT, AND COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.
(Grama Ridge 14-24-34-5H Well)**

Ladies & Gentlemen:

This letter is to advise you that Chevron U.S.A. Inc., has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on September 18, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

If you have any questions about this matter please contact Cody Cole, at (713) 372-1103 or ccole@chevron.com.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael H. Feldewert".

Michael H. Feldewert

Holland & Hart LLP

Phone [505] 988-4421 **Fax** [505] 983-6043 **www.hollandhart.com**

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

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

CHEVRON U.S.A. INC.
GRAMMA RIDGE 14-24-34-5H WELL

OFFSETS

Energex, LLC
Attn.: Tim Lilley
4425 98th Street, Suite 200
Lubbock Texas 79424

Crump Energy Partners, LLC
Attn.: Brian Hall
P.O. Box 50820
Midland, Texas 79710

Partners IV, LP
Attn.: Brian Hall
P.O. Box 50820
Midland, TX 79710

COG Operating LLC
One Concho Center
Midland, TX 79701

POOLED PARTIES

Artesia Oil and Gas LLC
P.O. Box 1768
Artesia, NM 88211

Frank M. Johnson, Jr. and
wife, Harriet Johnson
315 E. Orchard Park
Dexter, NM 88230

Clora Meadows
700 South Ohio
Roswell, NM 88201

Roy Barton, Jr.
P.O. Box 978
Hobbs, NM 88241

Norma J. Barton
P.O. Box 728
Hobbs, NM 88241

Burlington Resources
Attn: Ashley Manning-Dyke
600 N. Dairy Ashford Road
P10-5 Office 5026
Houston, TX 77079

Roy G. Barton, Jr.
P.O. Box 978
Hobbs, NM 88241

Crown Oil Partners IV, LP
Attn: Brian Hall
P.O. Box 50820
Midland, TX 79710

7006 2760 0001 6377 1771

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OFFICIAL CHECK

Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark: AUG 29 2014

Energex, LLC
 ATTN: Tim Lilley
 4425 98th St., Ste 200
 Lubbock, TX 79424

PS Form 3811, February 2004 See Reverse for Instructions

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OFFICIAL CHECK

Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark: AUG 29 2014

Energex, LLC
 ATTN: Tim Lilley
 4425 98th St., Ste 200
 Lubbock, TX 79424

PS Form 3811, February 2004 See Reverse for Instructions

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OFFICIAL CHECK

Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark: AUG 29 2014

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

PS Form 3811, February 2004 See Reverse for Instructions

7006 2760 0001 6377 1788

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OFFICIAL CHECK

Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark: AUG 29 2014

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

PS Form 3811, February 2004 See Reverse for Instructions

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OFFICIAL CHECK

Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark: AUG 29 2014

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

PS Form 3811, February 2004 See Reverse for Instructions

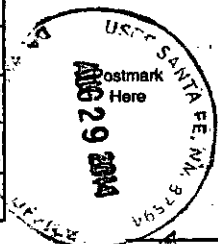
9817 2269 0001 6377 1863

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

OFFICIAL *CHOWBET*

Postage	\$
Certified Fee	3.00
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Partners IV, LP
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

PS Form 3811, August 2004

See Reverse for Instructions

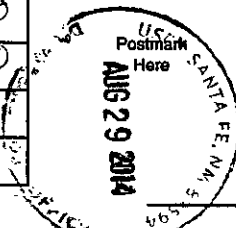
9817 2269 0001 6377 1863

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

OFFICIAL *WVROVISTEF*

Postage	\$
Certified Fee	3.00
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



COG Operating LLC
 One Concho Center
 Midland, TX 79701

PS Form 3800, August 2006

See Reverse for Instructions

SENDER		ACTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Partners IV, LP ATTN: Brian Hall P.O. Box 50820 Midland, Texas 79710</p>		<p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>9-3-14</i></p>	
<p>2. Article Number <i>11 111 17006 2760 0001 6377 1863</i></p> <p>(Transfer from service label)</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>			

7006 2760 0001 6377 1887

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

OFFICIAL *Artesia*

Postage	\$
Certified Fee	3.20
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Artesia Oil and Gas LLC
 PO Box 1768
 Artesia, NM 88211

Postmark Here
 AUG 29 2014
 SANTA FE, NM

Get 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:

Artesia Oil and Gas LLC
 PO Box 1768
 Artesia, NM 88211

2. Article Number
 (Transfer from service label) 7006 2760 0001 6377 1887

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

ON DELIVERY

A. Signature *Janie White* ☐ Agent ☐ Addressee

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

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

7006 2760 0001 6377 1894

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

OFFICIAL *Artesia*

Postage	\$
Certified Fee	3.20
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Frannk M. Johnson, Jr. and
 wife, Harriet Johnson
 315 E. Orchard Park
 Dexter, NM 88230

Postmark Here
 AUG 29 2014
 SANTA FE, NM

for Instructions

7006 2760 0001 6377 1900

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

OFFICIAL RETURN RECEIPT

Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here
 AUG 29 2014

Clara Meadows
 700 South Ohio
 Roswell, NM 88201

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: CL

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.

1. Article Addressed to:
 Clara Meadows
 700 South Ohio
 Roswell, NM 88201

2. Article Number: 7006 2760 0001 6377 1900
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: *[Signature]* ☒ Agent ☐ Addressee
 B. Received by (Printed Name): *Clara Meadows* C. Date of Delivery: *8-2-14*
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

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

7006 2760 0001 6377 1917

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 RETURN RECEIPT

Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

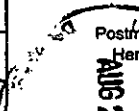
Postmark Here
 AUG 29 2014

Roy Barton, Jr.
 PO Box 978
 Hobbs, NM 88241

PS Form 3800, August 2006 See Reverse for Instructions

Returned


U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL <i>Chenon 6H</i>	
Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



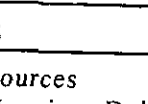
Norma J. Barton

PO Box 728

Hobbs, NM 88241



U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
OFFICIAL CERTIFICATION	
Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



<p>SENDER: COMPLETE THIS SECTION</p> <ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p>Norma J. Barton PO Box 728 Hobbs, NM 88241</p> </div>	<p align="center">TION ON DELIVERY</p> <p>A. Signature _____ X <i>Norma J. Barton</i></p> <p>B. Received by (Printed Name) <i>Norma J. Barton</i> C. Date of Delivery <i>9-4-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <hr/> <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

CERTIFIED MAIL		SECTION ON DELIVERY	
<p>SENDER</p> <p>PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE</p> <p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin-top: 10px;"> <p>Burlington Resources Attn: Ashley Manning- Dyke 600 N. Dairy Ashford Rd P10-5 Office 5026 Houston, TX, 77079</p> </div>		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number</p> <p>(Transfer from service label)</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	

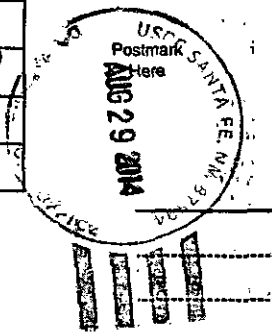
7006 2760 0001 6377 1757

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OFFICIAL MAIL

Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Roy G. Barton, Jr
 PO Box 978
 Hobbs, NM 88241

PS Form 3800, August 2005

See Reverse for Instructions

Returned

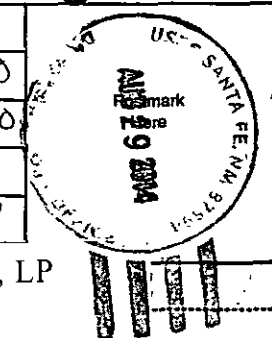
7006 2760 0001 6377 1795

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

OFFICIAL MAIL

Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.69



Crown Oil Partners IV, LP
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

PS Form 3800, August 2005

See Reverse for Instructions

SENDER'S USE ONLY		SECTION ON DELIVERY	
<p>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Crown Oil Partners IV, LP ATTN: Brian Hall P.O. Box 50820 Midland, Texas 79710</p>		<p>B. Received by (Printed Name) Brian Hall</p> <p>C. Date of Delivery 9/3/14</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7006 2760 0001 6377 1795</p>		<p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

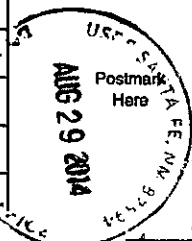
6487 2269 1000 0962 9001

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OFFICIAL *CHENOVES*

Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Energex, LLC
 ATTN: Tim Lilley
 4425 98th St., Ste 200
 Lubbock, TX 79424

PS Form 3800, August 2006

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:

Energex, LLC
 ATTN: Tim Lilley
 4425 98th St., Ste 200
 Lubbock, TX 79424

2. Article Number
 (Transfer from service label)

7006 2760 0001 6377 1849

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

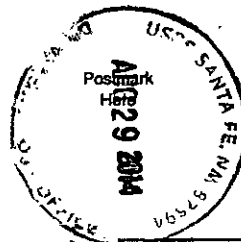
2922 9269 1000 0962 9002

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 *CHENOVES*

Postage	\$
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$



Clora Meadows
 700 South Ohio
 Roswell, NM 8820

PS Form 3800, August 2006

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:

Clora Meadows
 700 South Ohio
 Roswell, NM 8820

2. Article Number
 (Transfer from service label)

7006 2760 0001 6376 7262

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 2760 0001 6377 1924

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 *Chenon 54*

Postage	\$	
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark: **Albuquerque NM 929 2004**

Norma J. Barton
 PO Box 728
 Hobbs, NM 88241

PS Form 3800, August 2005

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:

Norma J. Barton
 PO Box 728
 Hobbs, NM 88241

2. Article Number (Transfer from service label): 7006 2760 0001 6377 1924

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

CTION ON DELIVERY

A. Signature: *Norma J. Barton* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *Norma J. Barton* C. Date of Delivery: *9-4-14*

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

7006 2760 0001 6377 1856

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 *Chenon 54*

Postage	\$	
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark: **Albuquerque NM 929 2004**

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

PS Form 3800, August 2005 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:

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

2. Article Number (Transfer from service label): 7006 2760 0001 6377 1856

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

CTION ON DELIVERY

A. Signature: *Brian Hall* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *Brian Hall* C. Date of Delivery: *9-3-14*

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