

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

**APPLICATION OF ANSCHUTZ OIL COMPANY,
LLC FOR COMPULSORY POOLING AND
AN UNORTHODOX OIL WELL LOCATION,
RIO ARRIBA COUNTY, NEW MEXICO.**

Case No. 15,234

AFFIDAVIT OF NOTICE

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

James Bruce, being duly sworn upon his oath, deposes and states:

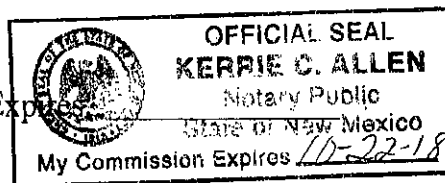
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Anschutz Oil Company, LLC.
3. Anschutz Oil Company, LLC has conducted a good faith, diligent effort to find the names and correct addresses of the working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.




James Bruce

SUBSCRIBED AND SWORN TO before me this 19th day of November, 2014 by
James Bruce.

My Commission Expires





Notary Public

Oil Conservation Division
Case No. 4 15234
Exhibit No. 4

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

October 31, 2014

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is an application for compulsory pooling, *etc.*, filed with the New Mexico Oil Conservation Division by Anschutz Oil Company, LLC, regarding a well in the W/2 of Section 14 and all of Section 15, Township 25 North, Range 2 West, N.M.P.M., Rio Arriba County, New Mexico. Applicant proposes to drill its Regina Com. 25-2-14-15 Well No. 1H, to a depth sufficient to test the Gavilan-Mancos Pool, and seeks to dedicate the W/2 of Section 14 and all of Section 15 to the well to form a non-standard 960 acre spacing and proration unit for any formations and/or pools developed on 640 acre spacing within that vertical extent. The well is a horizontal well, to be drilled from a surface location in the NW/4NE/4 of Section 14, with a terminus in the NW/4NW/4 of Section 15. The beginning of the producing interval will be approximately 830 feet from the north line and 2310 feet from the west line of Section 14, to a terminus 830 feet from the north line and 330 feet from the west line of Section 15, which is unorthodox under the special rules and regulations for the Gavilan-Mancos Pool.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, November 20, 2014, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, November 13, 2014. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the 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 need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Attachment 

Very truly yours,


James Bruce

Attorney for Anschutz Oil Company, LLC

Samson Resources Company
370 17th Street, Suite 3000
Denver, CO 80202
Attn: Lauren Ross

Williams Production Company
1 Williams Center, Mail Drop 44
Tulsa, OK 74172
Attn: Chuck Bassett

Brazos Limited Partnership
P.O. Box 911
Breckenridge, TX 76424-0911
Attn: Lorie Hill

KAB Acquisitions LLLP, VIII
410 17th Street, Suite 1151
Denver, CO 80202
Attn: Ken Breighenbach

Ibex Partnership
P.O. Box 911
Breckenridge, TX 76424-0911
Attn: Lorie Hill

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Michael Bush Wisenbaker, Jr. Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

Pikes Peak Resources, LLC
2961 S. Fillmore Way
Denver, CO 80210
Attn: Hunt Walker

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Wesley Hill Wisenbaker Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

Riva Oil and Gas, LLC
621 17th Street, Suite 1040
Denver, CO 80293
Attn: Jim Fullerton

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Margretta Hill Wikert Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

Chevron North America Exploration and
Production Company
1400 Smith Street
Houston, TX 77002
Attn: Brian Derr

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Cody McArthur Wikert Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

EXHIBIT

A

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Legacy Trust Company, Trustee, Margaret Hunt Hill -
 Cody McArthur Wikert Trust
 2101 Cedar Springs, Suite 1800
 Dallas, TX 75201
 Attn: Susan Van Eaton

2. Article Number
 (Transfer from service label) 7013 3020 0000 4634 0588

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Patty Satarino* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 P SATARINO

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

DENVER CO 80202

Postage	\$ 1.19	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 7.19	

Sent To: Samson Resources Company
 370 17th Street, Suite 3000
 Denver, CO 80202
 Attn: Lauren Ross

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

PS Form 3800, August 2006 See Reverse for Instructions

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

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

DALLAS TX 75201

OFFICIAL USE

Postage	\$ 1.19
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 7.19

0500
 USPS SANTA FE, NM 87501
 Postmark Here
 NOV - 3 2014
 SANTA FE POST OFFICE

Sent To: Legacy Trust Company, Trustee, Margaret Hunt Hill -
 Cody McArthur Wikert Trust
 2101 Cedar Springs, Suite 1800
 Dallas, TX 75201
 Attn: Susan Van Eaton

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

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:

Samson Resources Company
 370 17th Street, Suite 3000
 Denver, CO 80202
 Attn: Lauren Ross

2. Article Number
 (Transfer from service label) 7013 3020 0000 4633 9704

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Lauren Ross* ☐ 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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chevron North America Exploration and
Production Company
1400 Smith Street
Houston, TX 77002
Attn: Brian Derr

2. Article Number

(Transfer from service label)

7013 3020 0000 4634 0373

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ YesU.S. Postal Service™
CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

DALLAS, TX 75201

OFFICIAL USE

Postage \$ 0.70

0500

Certified Fee \$3.30

16

Postmark
HereReturn Receipt Fee
(Endorsement Required) \$2.70Restricted Delivery Fee
(Endorsement Required) \$0.00

Total Postage: Legacy Trust Company, Trustee, Margaret Hunt Hill -

Michael Bush Wisenbaker, Jr. Trust

Sent To 2101 Cedar Springs, Suite 1800

Dallas, TX 75201

Street, Apt. No.
or PO Box No.: Attn: Susan Van Eaton

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7013 3020 0000 4633 9681

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

HOUSTON, TX 77002

OFFICIAL USE

Postage \$ 0.70

0500

Certified Fee \$3.30

16

Postmark
HereReturn Receipt Fee
(Endorsement Required) \$2.70Restricted Delivery Fee
(Endorsement Required) \$0.00

Total Postage & Fees: Chevron North America Exploration and

Sent To Production Company
1400 Smith Street
Houston, TX 77002
Attn: Brian Derr

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

PS Form 3800, August 2006

See Reverse for Instructions

7013 3020 0000 4634 0373

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Michael Bush Wisenbaker, Jr. Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

2. Article Number

(Transfer from service label)

7013 3020 0000 4633 9681

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

A

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ibex Partnership
P.O. Box 911
Breckenridge, TX 76424-0911
Attn: Lorie Hill

2. Article Number

(Transfer from service label)

7013 3020 0000 4634 0403

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kula Meadows

☐ Agent☐ Addressee

B. Received by (Printed Name)

Kula Meadows

C. Date of Delivery

11-5-14

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☒ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ YesU.S. Postal Service™
CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

DENVER CO 80202

OFFICIAL USE

Postage

\$ 40.70

0500

Certified Fee

\$3.30

16

Postmark
HereReturn Receipt Fee
(Endorsement Required)

\$2.70

Restricted Delivery Fee
(Endorsement Required)

\$0.00

Total Postage & Fees

\$ 46.70

Sent To

KAB Acquisitions LLP, VIII

Street, Apt. No.,
or PO Box No.

410 17th Street, Suite 1151

City, State, ZIP+4

Denver, CO 80202

Attn: Ken Breighenbach

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

BRECKENRIDGE TX 76424

OFFICIAL USE

Postage

\$ 40.70

0500

Certified Fee

\$3.30

16

Postmark
HereReturn Receipt Fee
(Endorsement Required)

\$2.70

Restricted Delivery Fee
(Endorsement Required)

\$0.00

Total Postage & Fees

\$ 46.70

Sent To

Ibex Partnership

P.O. Box 911

Street, Apt. No.,
or PO Box No.

Breckenridge, TX 76424-0911

City, State, ZIP+4

Attn: Lorie Hill

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:

KAB Acquisitions LLP, VIII
410 17th Street, Suite 1151
Denver, CO 80202
Attn: Ken Breighenbach

2. Article Number

(Transfer from service label)

7013 3020 0000 4633 9698

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kula Meadows

☐ Agent☐ Addressee

B. Received by (Printed Name)

Kula Meadows

C. Date of Delivery

11-5

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail®☒ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Williams Production Company
1 Williams Center, Mail Drop 44
Tulsa, OK 74172
Attn: Chuck Bassett

2. Article Number
(Transfer from service label) 7013 3020 0000 4634 0366

PS Form 3811, July 2013 Domestic Return Receipt A

COMPLETE THIS SECTION ON DELIVERY

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

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

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

NOV 07 2014

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

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

DALLAS TX 75201 OFFICIAL USE

Postage	\$0.70	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	

Total Postage & Fees \$6.70

Sent To: Legacy Trust Company, Trustee, Margaret Hunt Hill -
Margretta Hill Wikert Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

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

PS Form 3800, August 2006 See Reverse for Instructions

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

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

TULSA OK 74172 OFFICIAL USE

Postage	\$0.70	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	

Total Postage & Fees \$6.70

Sent To: Williams Production Company
1 Williams Center, Mail Drop 44
Tulsa, OK 74172
Attn: Chuck Bassett

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

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:

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Margretta Hill Wikert Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

2. Article Number
(Transfer from service label) 7013 3020 0000 4633 9667

PS Form 3811, July 2013 Domestic Return Receipt X

COMPLETE THIS SECTION ON DELIVERY

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

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

0596 6394 0000 0206 ETD

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com		
BRECKENRIDGE TX 76424 OFFICIAL USE		
Postage	\$ 0.70	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.70	
Sent To	Brazos Limited Partnership P.O. Box 911 Breckenridge, TX 76424-0911 Attn: Lorie Hill	
Street, Apt. No., or PO Box No.		
City, State, ZIP+4		
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:

Legacy Trust Company, Trustee, Margaret Hunt Hill -
Wesley Hill Wisenbaker Trust
2101 Cedar Springs, Suite 1800
Dallas, TX 75201
Attn: Susan Van Eaton

2. Article Number

(Transfer from service label)

7013 3020 0000 4633 9674

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Patry Satarino* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

P. Satarino

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® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Brazos Limited Partnership
P.O. Box 911
Breckenridge, TX 76424-0911
Attn: Lorie Hill

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Paula Meadows* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Paula Meadows

C. Date of Delivery

11-3-14

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7013 3020 0000 4633 9650

PS Form 3811, July 2013

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
For delivery information visit our website at www.usps.com		
DALLAS TX 75201 OFFICIAL USE		
Postage	\$ 0.70	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage	\$ 6.70	
Sent To	Legacy Trust Company, Trustee, Margaret Hunt Hill - Wesley Hill Wisenbaker Trust 2101 Cedar Springs, Suite 1800 Dallas, TX 75201 Attn: Susan Van Eaton	
Street, Apt. No., or PO Box No.		
City, State, ZIP+4		
PS Form 3800, August 2006 See Reverse for Instructions		

0596 6394 0000 0206 ETD

7013 3020 0000 4634 0397

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	\$ 0.70	0500
Certified Fee	\$3.30	16
Return Receipt Fee (Endorsement Required)	\$2.70	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.70	
Pikes Peak Resources, LLC		
Sent To	2961 S. Fillmore Way Denver, CO 80210	
Street, Apt. No., or PO Box No.	Attn: Hunt Walker	
City, State, ZIP+4		
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:

Pikes Peak Resources, LLC
2961 S. Fillmore Way
Denver, CO 80210
Attn: Hunt Walker

2. Article Number

(Transfer from service label)

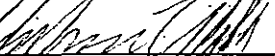
7013 3020 0000 4634 0397

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X 

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

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	\$ 0.70	0500
Certified Fee	\$3.30	16
Return Receipt Fee (Endorsement Required)	\$2.70	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.70	
Sent To	Riva Oil and Gas, LLC 621 17th Street, Suite 1040 Denver, CO 80293	
Street, Apt. No., or PO Box No.	Attn: Jim Fullerton	
City, State, ZIP+4		
PS Form 3800, August 2006 See Reverse for Instructions		

PS Form 3800, August 2006

See Reverse for Instructions

7013 3020 0000 4634 0397