

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

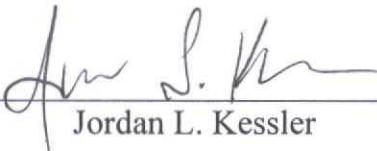
**APPLICATION OF COG OPERATING LLC
FOR A NON-STANDARD SPACING AND
PRORATION UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 15276

AFFIDAVIT

STATE OF NEW MEXICO)
) ss.
COUNTY 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 attached hereto.



Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 18th day of March 2015 by Jordan L.
Kessler.



**OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO**
My commission expires 01/14/19



Notary Public

**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: COG Operating LLC
Hearing Date: March 19, 2015**

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

February 27, 2015

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET PARTIES

RE: Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. Cookie Tosser State Com No. 1H Well

This letter is to advise you that COG Operating LLC 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 March 19, 2015. 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.

If you have any questions about this matter please contact Aaron Young, at (432) 221-0343 or ayoung@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart^{LLP}

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

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

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

HOLLAND & HART LLP



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

February 27, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: EOG Resources, Inc.
5509 Champions Dr.,
Midland, TX 79706

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.**
Cookie Tosser State Com No. 1H Well

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC 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 March 19, 2015. 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 Aaron Young, at (432) 221-0343 or ayoung@concho.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

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

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

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. ☐

**COG OPERATING LLC
COOKIE TOSSER STATE COM NO. 1H**

POOLED PARTY:

EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706

OFFSETS:

8 Way OG Inc.
P.O. Box 371
Midland, TX 79701

Anderson Oil Ltd.
5005 Woodway Dr., Suite 300
Houston, TX 77056

Avery, Rosemary T.
P.O. Box 3
Roswell, NM 88202

Chevron USA, Inc.
P.O. Box 730436
Dallas, TX 75373

Chevron USA, Inc.
4508 N. Big Spring St
Midland, TX 79705

Chevron USA, Inc.
1400 Smith St.
Houston, TX 77002

Crosby, SW III
P.O. Box 2346
Roswell, NM 88202

Diamond Head Prop
P.O. Box 2127
Midland, TX 79702

Edward R. Hudson Trust 4
616 Texas St
Ft. Worth, TX 76102

EOG Resources, Inc.
5509 Champions Dr.
Midland, TX 79706

Estate of Josephine T. Hudson
616 Texas St
Ft. Worth, TX 76102

Explorers Petro Corp.
P.O. Box 1933
Roswell, NM 88202

Grover, Arden R.
P.O. Box 3666
Midland, TX 79702

Harvey E. Yates Co.
P.O. Box 1933
Roswell, NM 88202

Hudson, Edward R., Jr.
616 Texas St
Ft. Worth, TX 76102

Hudson, Lewis Delmar
616 Texas St
Ft. Worth, TX 76102

Lamb, Garland C.
3208 Maxwell
Midland, TX 79705

Lindy's Living Trust
Francis H. Hudson, Trustee,
4200 S. Hulen, Ste 302
Ft. Worth, TX 76109

Lindy's Living Trust
Francis H. Hudson, Trustee,
616 Texas St
Ft. Worth, TX 76102

Mewbourne Oil Co.
500 W. Texas Ave., Suite 1020
Midland, TX 79701

Nadel and Gussman Capitan
LLC
15 East 5th Street, Suite 3200
Tulsa, OK 74103

COG OPERATING LLC
COOKIE TOSSER STATE COM NO. 1H

Nadel and Gussman Heyco
LLC
P.O. Box 1936
Roswell, NM 88202

Osborn, Calvin W.
RR 2 Box 48
Lovington, NM 88260

Redfern Oil Co.
P.O. Box 50890
Midland, TX 79710

Reeser, Wayne F.
1512 W. Aspen
Lovington, NM 88260

Spell Inc.
P.O. Box 50890
Midland, TX 79710

Spiral Inc.
P.O. Box 1933
Roswell, NM 88202

Stratco Operating Co. Inc.
400 Buckeye Trail
Austin, TX 78746

Withcer, Marvin D.
P.O. Box 1983
Midland, TX 79702

Yates Energy Corp.
P.O. Box 2323
Roswell, NM 88201

Yates US Inc.
P.O. Box 2323
Roswell, NM 88202

Zorro Partners Ltd.
616 Texas St
Ft. Worth, TX 76102

7006 2760 0001 6382 7836

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Ins)
MHE/COG
COOKIE TOSSER
OFFICIAL

For delivery information visit usps.com

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$



EOG Resources, Inc.
 5509 Champions Drive
 Midland, TX 79706

or 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:

EOG Resources, Inc.
 5509 Champions Drive
 Midland, TX 79706

2. Article Number

(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3-5-15

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

7006 2760 0001 6382 7836

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 2760 0001 6382 7690

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

For delivery information visit our **MHF/COG**
COOKIE TOSSER

OFFICIAL

Postage \$ 69
 Certified Fee 270
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$



Sent To
 Street, Apt. 1
 or PO Box 1
 City, State, 2
 8 Way OG Inc.
 P.O. Box 371
 Midland, TX 79701

PS Form 3811

7006 2760 0001 6382 7706

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

For delivery information visit our **MHF/COG**
COOKIE TOSSER

OFFICIAL

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$



Sent To
 Street, Apt.
 or PO Box
 City, State
 Anderson Oil Ltd.
 5005 Woodway Dr., Suite 300
 Houston, TX 77056

PS Form

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

8 Way OG Inc.
 P.O. Box 371
 Midland, TX 79701

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7690

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Mande S. Ogilvie
 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:

Anderson Oil Ltd.
 5005 Woodway Dr., Suite 300
 Houston, TX 77056

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7706

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jessie Arterney
☒ 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

7006 2760 0001 6382 7713

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No	
MHF/COG	
For delivery information visit usps.com	
COOKIE TOSSER	
OFFICIAL	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	1068

Sent To Avery, Rosemary T.
P.O. Box 3
Roswell, NM 88202

PS Form 3800, July 2013



7006 2760 0001 6382 7720

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No	
MHF/COG	
For delivery information visit usps.com	
COOKIE TOSSER	
OFFICIAL	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	1068

Sent To Chevron USA, Inc.
P.O. Box 730436
Dallas, TX 75373

PS Form 3800, July 2013



7006 2760 0001 6382 7737

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance)
 For delivery information visit **OFFICIAL MAIL™**
MHF/COG
COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$



Sent To
 Street, Apt. or PO Box #
 City, State, ZIP+4®
 Chevron USA, Inc.
 4508 N. Big Spring St
 Midland, TX 79705

PS Form 38

7006 2760 0001 6382 7744

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance)
 For delivery information visit **OFFICIAL MAIL™**
MHF/COG
COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$



Sent To
 Street, Apt. or PO Box #
 City, State, ZIP+4®
 Chevron USA, Inc.
 1400 Smith St.
 Houston, TX 77002

PS Form 38

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Chevron USA, Inc.
 4508 N. Big Spring St
 Midland, TX 79705

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7737

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Tanya Hunderley
☐ 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 USA, Inc.
 1400 Smith St.
 Houston, TX 77002

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7744

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

7006 2760 0001 6382 7751

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
MHF/COG
 For delivery information visit **OFFICIAL**
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Postmark Here
 FEB 27 2015
 DE VARGAS POST OFFICE
 SANTA FE, NM 87594

Sent Crosby, SW III
 P.O. Box 2346
 Roswell, NM 88202

PS Form 3811, July 2013 See Reverse for Instructions

7006 2760 0001 6382 7768

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
MHF/COG
 For delivery information visit **OFFICIAL**
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Postmark Here
 FEB 27 2015
 DE VARGAS POST OFFICE
 SANTA FE, NM 87594

Sent To Diamond Head Prop
 P.O. Box 2127
 Midland, TX 79702

PS Form 3811, July 2013 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:

Crosby, SW III
 P.O. Box 2346
 Roswell, NM 88202

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 7751

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

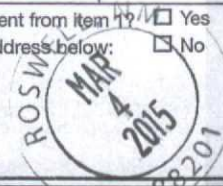
☐ Agent
☒ Addressee

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

Stan Crosby



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

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

COMPLETE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

Diamond Head Prop
 P.O. Box 2127
 Midland, TX 79702

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 7768

PS Form 3811, July 2013

Domestic Return Receipt

A. Signature

X

☐ Agent
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Norma Estrada

3/5/15

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

7006 2760 0001 6382 2046

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFICIAL MAILTM COOKIE TOSSER**

Postage	\$	69
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	669



Sent To: Edward R. Hudson Trust 4
 Street or PO Box: 616 Texas St
 City, State, ZIP: Ft. Worth, TX 76102

PS Form 3811, July 2013

See reverse for instructions

5002 2969 1000 0612 2052

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFICIAL MAILTM COOKIE TOSSER**

Postage	\$	69
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	669



Sent To: EOG Resources, Inc.
 Street, Apt. or PO Box: 5509 Champions Dr.
 City, State, ZIP: Midland, TX 79706

PS Form 3811, 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:

Edward R. Hudson Trust 4
 616 Texas St
 Ft. Worth, TX 76102

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 2046

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Stan Zbor* ☐ Agent
☐ Addressee

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

Staci Gilborg MAR 04 2015

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:

EOG Resources, Inc.
 5509 Champions Dr.
 Midland, TX 79706

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 2053

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J. Berry* ☒ Agent
☐ Addressee

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

J. Berry 3-5-15

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

7006 2760 0001 6382 7591

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFIC** **MHF/COG**
COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent _____
 Street or P.O. _____
 City, _____
 State _____
 ZIP+4[®] _____

Estate of Josephine T. Hudson
 616 Texas St
 Ft. Worth, TX 76102

PS Form 3811, July 2013



7006 2760 0001 6382 7607

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit **OFFIC** **MHF/COG**
COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent _____
 Street or P.O. _____
 City, _____
 State _____
 ZIP+4[®] _____

Explorers Petro Corp.
 P.O. Box 1933
 Roswell, NM 88202

PS Form 3811, July 2013



SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Estate of Josephine T. Hudson
 616 Texas St
 Ft. Worth, TX 76102

2. Article Number _____
 (Transfer from service label)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ ☒ Agent ☐ Addressee

B. Received by (Printed Name) Staci Gilbert C. Date of Delivery MAR 04 2015

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 7591

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Explorers Petro Corp.
 P.O. Box 1933
 Roswell, NM 88202

2. Article Number _____
 (Transfer from service label)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ ☐ Agent ☐ Addressee

B. Received by (Printed Name) Kathy Terry C. Date of Delivery 3/4/15

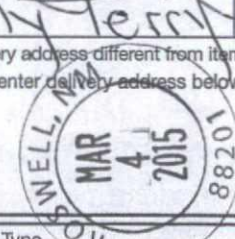
D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 7607

Domestic Return Receipt



7006 2760 0001 6382 7614

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

For delivery information visit **MHF/COG**
OFFICE COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$



Sent To
 Street, / or PO B
 City, Sta
 Grover, Arden R.
 P.O. Box 3666
 Midland, TX 79702

PS Form

Instructions

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

For delivery information visit **MHF/COG**
OFFICE COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$



Sent To
 Street, / or PO B
 City, State
 Harvey E. Yates Co.
 P.O. Box 1933
 Roswell, NM 88202

PS Form

See reverse for instructions

7006 2760 0001 6382 7621

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Grover, Arden R.
 P.O. Box 3666
 Midland, TX 79702

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7614

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery
 Chris McInnis 3-5-15

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:

Harvey E. Yates Co.
 P.O. Box 1933
 Roswell, NM 88202

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7621

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery
 Sally Terry 3/4/15

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

7006 2760 0001 6382 7638

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

For delivery information visit **OFFICE**

MHF/COG
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Sent To: Hudson, Edward R., Jr.
 Street, or PO: 616 Texas St
 City, St: Ft. Worth, TX 76102

PS Form 3811, July 2013

7006 2760 0001 6382 7645

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

For delivery information visit **OFFICE**

MHF/COG
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total F	

Sent To: Hudson, Lewis Delmar
 Street, or PO: 616 Texas St
 City, St: Ft. Worth, TX 76102

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Hudson, Edward R., Jr.
 616 Texas St
 Ft. Worth, TX 76102

2. Article Number
 (Transfer from service label)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Staci E. Gilbert

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Staci E. Gilbert

C. Date of Delivery

MAR 04 2015

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

7006 2760 0001 6382 7638

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Hudson, Lewis Delmar
 616 Texas St
 Ft. Worth, TX 76102

2. Article Number
 (Transfer from service label)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Staci E. Gilbert

☒ Agent
☐ Addressee

B. Received by (Printed Name)

Staci E. Gilbert

C. Date of Delivery

MAR 04 2015

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

7006 2760 0001 6382 7645

Domestic Return Receipt

7006 2760 0001 6382 7652

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

For delivery information visit **MHF/COG**
OFFICE COOKIE TOSSER

Postage \$ 69
 Certified Fee 33
 Return Receipt Fee (Endorsement Required) 27
 Restricted Delivery Fee (Endorsement Required) 66

Total \$ 195

Sent To: Lamb, Garland C.
 3208 Maxwell
 Midland, TX 79705

PS Form 3800, August 2000



7006 2760 0001 6382 7669

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

For delivery information visit **MHF/COG**
OFFICE COOKIE TOSSER

Postage \$ 33
 Certified Fee 27
 Return Receipt Fee (Endorsement Required) 66

Total Postage & Fees \$ 126

Sent To: Lindy's Living Trust
 Francis H. Hudson, Trustee,
 4200 S. Hulen, Ste 302
 Ft. Worth, TX 76109

PS Form 3800, August 2000



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Lamb, Garland C.
 3208 Maxwell
 Midland, TX 79705

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7652

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Garland Lamb ☐ Agent ☒ Addressee

B. Received by (Printed Name) JAN LAMB C. Date of Delivery 3-5-15

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

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:
 Lindy's Living Trust
 Francis H. Hudson, Trustee,
 4200 S. Hulen, Ste 302
 Ft. Worth, TX 76109

2. Article Number (Transfer from service label) 7006 2760 0001 6382 7669

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature X Tanya Spout ☐ Agent ☒ Addressee

B. Received by (Printed Name) Tanya Spout C. Date of Delivery 3-5-15

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 7676

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
OFFICE COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total	

Sent To: Lindy's Living Trust
 Francis H. Hudson, Trustee,
 616 Texas St
 Ft. Worth, TX 76102

PS Form 3800, August 2006 See Reverse for Instructions

7006 2760 0001 6382 7683

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
OFFICE COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total	

Sent To: Mewbourne Oil Co.
 500 W. Texas Ave., Suite 1020
 Midland, TX 79701

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:

Lindy's Living Trust
 Francis H. Hudson, Trustee,
 616 Texas St
 Ft. Worth, TX 76102

2. Article Number
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Staci Gilburg*
☒ Agent
☐ Addressee

B. Received by (Printed Name)

Staci Gilburg

C. Date of Delivery

MAR 04 2015

- 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

7006 2760 0001 6382 7676

PS Form 3811, July 2013

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mewbourne Oil Co.
 500 W. Texas Ave., Suite 1020
 Midland, TX 79701

2. Article Number
(Transfer from service label)

A. Signature

X *Mitchell*
☐ Agent
☐ Addressee

B. Received by (Printed Name)

Mitchell

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

7006 2760 0001 6382 7683

PS Form 3811, July 2013

Domestic Return Receipt

7006 2760 0001 6382 7911

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

For delivery information visit **OFFICE**

**MHF/COG
COOKIE TOSSER**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$ 1338

Postmark Here
FEB 27 2015
USPS SANTA FE, NM 87506
DE VARGAS POST OFFICE

Sent To
Nadel and Gussman Capitan LLC
15 East 5th Street, Suite 3200
Tulsa, OK 74103

PS Form 3811, July 2013

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

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

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

MAR 05 2015
15 E 5TH ST - 3200

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:
Nadel and Gussman Capitan LLC
15 East 5th Street, Suite 3200
Tulsa, OK 74103

2. Article Number
(Transfer from service label) **7006 2760 0001 6382 7911**

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 7928

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

For delivery information visit **OFFICE**

**MHF/COG
COOKIE TOSSER**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$ 1338

Postmark Here
FEB 27 2015
USPS SANTA FE, NM 87506
DE VARGAS POST OFFICE

Sent To
Nadel and Gussman Heyco LLC
P.O. Box 1936
Roswell, NM 88202

PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION

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

MAR 05 2015
ROSSELL, NM

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:
Nadel and Gussman Heyco LLC
P.O. Box 1936
Roswell, NM 88202

2. Article Number
(Transfer from service label) **7006 2760 0001 6382 7928**

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 7515

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

For delivery information visit

OFFIC

MHF/COG
 COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	1338



Sent To

Street, Apt.
 or PO Box
 City, State

Osborn, Calvin W.
 RR 2 Box 48
 Lovington, NM 88260

PS Form 3811

See Reverse for Instructions

7006 2760 0001 6382 7522

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

For delivery information visit

OFFIC

MHF/COG
 COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	1338



Sent To

Street, Apt.
 or PO Box
 City, State

Redfern Oil Co.
 P.O. Box 50890
 Midland, TX 79710

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:

Osborn, Calvin W.
 RR 2 Box 48
 Lovington, NM 88260

2. Article Number
 (Transfer from service label)

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *C.W. Osborn*☐ 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

7006 2760 0001 6382 7515

Domestic Return Receipt

Return

7006 2760 0001 6382 7539

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **OFFICIAL MAIL™**
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	



Sent To: Reeser, Wayne F.
 Street, Apt. or PO Box: 1512 W. Aspen
 City, State: Lovington, NM 88260

PS Form 3800, August 2009 See Reverse for Instructions

7006 2760 0001 6382 7546

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **OFFICIAL MAIL™**
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	



Sent To: Spell Inc.
 Street, Apt. or PO Box: P.O. Box 50890
 City, State: Midland, TX 79710

PS Form 3800, August 2009 See Reverse for Instructions

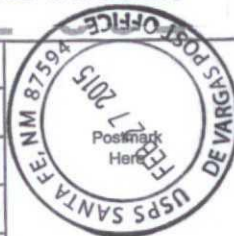
Return

7006 2760 0001 6382 7553

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No **MHF/COG**)
 For delivery information visit **COOKIE TOSSER**
OFFICE

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	



Sent To
 Street, Apt. or PO Box
 City, State
 Spiral Inc.
 P.O. Box 1933
 Roswell, NM 88202

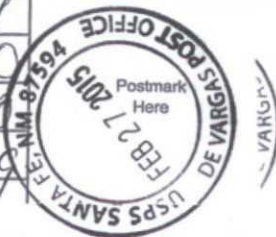
PS Form 3811, July 2013

7006 2760 0001 6382 7553

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No **MHF/COG**)
 For delivery information visit **COOKIE TOSSER**
OFFICE

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	



Sent To
 Street, Apt. or PO Box
 City, State
 Stratco Operating Co. Inc.
 400 Buckeye Trail
 Austin, TX 78746

PS Form 3811, August 2009

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:

Spiral Inc.
 P.O. Box 1933
 Roswell, NM 88202

2. Article Number
 (Transfer from service label)

7006 2760 0001 6382 7553

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

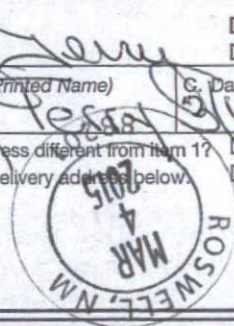
A. Signature
☐ Agent
☐ Addressee

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

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

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

4. Restricted Delivery? (Extra Fee)
☐ Yes



7006 2760 0001 6382 7577

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **MHF/COG**
COOKIE TOSSER

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent To Withcer, Marvin D.
 Street, Apt. or PO Box P.O. Box 1983
 City, State Midland, TX 79702

PS Form 3811, July 2013



7006 2760 0001 6382 7584

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **MHF/COG**
COOKIE TOSSER

Postage \$ 67
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$

Sent To Yates Energy Corp.
 Street, Apt. or PO Box P.O. Box 2323
 City, State Roswell, NM 88201

PS Form 3811, July 2013



SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Yates Energy Corp.
 P.O. Box 2323
 Roswell, NM 88201

2. Article Number (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

THIS SECTION ON DELIVERY

A. Signature Tedi Hamilton ☐ Agent ☐ Addressee

B. Received by (Printed Name) Tedi Hamilton

C. Date of Delivery 2/25/15

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

7006 2760 0001 6382 7584

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 7829

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Signature Required)
 For delivery information visit **usps.com**
OFFICIAL MAIL
MHF/COG
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total	\$ 1338



Sent to: Yates US Inc.
 Street or PO: P.O. Box 2323
 City, State, ZIP+4: Roswell, NM 88202

PS Form 3811, February 2004

See reverse for instructions

7006 2760 0001 6382 7812

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Signature Required)
 For delivery information visit **usps.com**
OFFICIAL MAIL
MHF/COG
COOKIE TOSSER

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$ 1338



Sent to: Zorro Partners Ltd.
 Street or PO: 616 Texas St
 City, State, ZIP+4: Ft. Worth, TX 76102

PS Form 3811, February 2004

See reverse for instructions

CERTIFIED MAIL

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Yates US Inc.
 P.O. Box 2323
 Roswell, NM 88202

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 7829

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Tedi Hami

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Tedi Hami

C. Date of Delivery

MAR 2 2015

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

3. Service Type

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

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:

Zorro Partners Ltd.
 616 Texas St
 Ft. Worth, TX 76102

2. Article Number
(Transfer from service label)

7006 2760 0001 6382 7812

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Staci Gilberg

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Staci Gilberg

C. Date of Delivery

MAR 04 2015

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes