

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


**APPLICATION OF OXY USA INC. FOR A NON-STANDARD SPACING AND
PRORATION UNIT, AND COMPULSORY POOLING, EDDY COUNTY, NEW
MEXICO.**

CASE NO. 15489

AFFIDAVIT

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

Jordan L. Kessler, attorney in fact and authorized representative of OXY USA Inc. the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letters attached hereto.

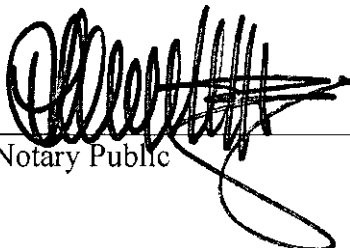


Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 11th day of May 2016 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. 4
Submitted by: **OXY USA Inc.**
Hearing Date: May 12, 2016

OXY USA INC. - CASE NO. 15489
CEDAR CANYON 21 FEDERAL COM NO. 5H WELL

POOLED PARTIES:

Brazos, LP
PO Box 911
Brekenridge, Texas 76424

Claiborne, LP
500 Commerce ST., Suite 600
Fort Worth, TX 76102-5477

OFFSETS:

Devon Energy Production
Company, L.P.
333 W. Sheridan
Oklahoma City, OK 73102

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

B. Jack Reed
506 Charismatic
Midland, TX 79705

Beryl Oil and Gas, LP
6707 Pebble Court
Midland, TX 79707

DRW Energy, LLC
4107 Tanforan
Midland, TX 79707

GD McKinney Investments LP
300 N. Mariefed, Ste 1100
Midland, TX 79701

Gerald A. Hancock
4200 Fairwood
Midland, TX 79707

Mobil Producing Texas & New
Mexico Inc.
Attn: Angie Repka
810 Houston St.
Fort Worth, TX 76102

Wayne and Linda Newkumet
500 West Texas Ave.
Suite 1410
Midland, TX 79701

M'lissa L. McKinney Shoening
301 Sir Barton Parkway
Midland, TX 79705

Prospector LLC
PO Box 429
Roswell, NM 88202

Ross Duncan Properties LLC
Po box 647
Artesia, nm 88211

Xplor Resources LLC
1104 n shore
Carlsbad, nm 88220

Honey's Heritage LP
P. O. Box 833206
Richardson, TX 75083-3206

HOLLAND & HART ^{LLP}



Jordan L. Kessler
Associate

Phone (505) 988-4421

Fax (505) 983-6043

JLKessler@hollandhart.com

April 22, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of OXY USA Inc. for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico
Cedar Canyon 21 Federal Com No. 5H Well**

Ladies & Gentlemen:

This letter is to advise you that OXY USA 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 May 12, 2016. 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 Jeremy Murphrey, at (713) 985-4816 or Jeremy_Murphrey@oxy.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR OXY USA INC.

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

April 22, 2016

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**Re: Application of OXY USA Inc. for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico
Cedar Canyon 21 Federal Com No. 5H Well**

This letter is to advise you that OXY USA 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 May 12, 2016. 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 Jeremy Murphrey, at (713) 985-4816 or Jeremy_Murphrey@oxy.com.

Sincerely,

Jordan L. Kessler

ATTORNEY FOR OXY USA INC.

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** PO. 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. ☐

7015 3010 0001 8827 2786

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT (P.P.)
 Domestic Mail Only

For delivery information, visit **MHF/OXY**
OFFICE CEDAR CANYON

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total \$ _____

Sent _____

Street _____

City _____

Brazos, LP
 PO Box 911
 Breckenridge, Texas 76424

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3010 0001 8827 2779

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT (P.P.)
 Domestic Mail Only

For delivery information, visit **MHF/OXY**
OFFICE CEDAR CANYON

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total \$ _____

Sent _____

Street _____

City _____

Claiborne, LP
 500 Commerce ST., Suite 600
 Fort Worth, TX 76102-5477

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return 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, LP
 PO Box 911
 Breckenridge, Texas 76424

2. Article Number (Transfer from service label)
 9590 9403 0670 5183 6873 38

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature
☒ Paula Grissom
☐ Agent
☐ Addressee

5. Received by (Printed Name)
 Paula Grissom

6. Date of Delivery
 4-25-16

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

8. Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Claiborne, LP
 500 Commerce ST., Suite 600
 Fort Worth, TX 76102-5477

2. Article Number (Transfer from service label)
 9590 9403 0670 5183 6873 21

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature
☒ Caitlin Turner
☐ Agent
☐ Addressee

5. Received by (Printed Name)
 Caitlin Turner

6. Date of Delivery
 4-25-16

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

8. Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2762

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at usps.com

OFFICIAL

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total: \$

Sent to: Devon Energy Production Company, L.P.

Street: 333 W. Sheridan

City, State: Oklahoma City, OK 73102

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Devon Energy Production Company, L.P.
 333 W. Sheridan
 Oklahoma City, OK 73102

9590 9403 0670 5183 6873 14

2. Article Number (Transfer from service label)

7015 3010 0001 8827 2762

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X David Carrillo ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☒ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2731

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

OFFICIAL

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total: \$

Sent to: EOG Resources Inc.

Street: 5509 Champions Dr.

City, State: Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.
 ■ Print your name and address on the reverse so that we can return 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

9590 9403 0670 5183 6873 07

2. Article Number (Transfer from service label)

7015 3010 0001 8827 2731

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X J. Perry ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery ☐ Registered Mail™
☒ Certified Mail® ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☒ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2748

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL** MHF/OXY CEDAR CANYON

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To B. Jack Reed
 506 Charismatic
 Midland, TX 79705

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See reverse for instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 B. Jack Reed
 506 Charismatic
 Midland, TX 79705

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 2748

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature
 X B. Jack Reed

5. Received by (Printed Name)
 B. Jack Reed

6. Date of Delivery
 4-27-16

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

8. Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2724

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL** MHF/OXY CEDAR CANYON

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To Beryl Oil and Gas, LP
 6707 Pebble Court
 Midland, TX 79707

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9053 See reverse for instructions

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Beryl Oil and Gas, LP
 6707 Pebble Court
 Midland, TX 79707

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 2724

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

4. Signature
 X Cathie Party

5. Received by (Printed Name)
 Cathie Party

6. Date of Delivery
 4-27-16

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

8. Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2939

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/OXY CEDAR CANYON OFFICE**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage \$

Sent To **DRW Energy, LLC**

Street and A/c **4107 Tanforan**

City, State, Z **Midland, TX 79707**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
DRW Energy, LLC
4107 Tanforan
Midland, TX 79707

9590 9403 0670 5183 6872 77

7015 3010 0001 8827 2939

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X Kathy W.

B. Received by (Printed Name) **Kathy W.** C. Date of Delivery **4/25**

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

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

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2946

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/OXY CEDAR CANYON OFFICE**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$

Sent To **GD McKinney Investments LP**

Street **300 N. Marienfed, Ste 1100**

City, **Midland, TX 79701**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
GD McKinney Investments LP
300 N. Marienfed, Ste 1100
Midland, TX 79701

9590 9403 0670 5183 6872 60

7015 3010 0001 8827 2946

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X Linda M. Gay

B. Received by (Printed Name) **Linda M. Gay** C. Date of Delivery **4/25/16**

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

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

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2946

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2953

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL**

MHF/OXY
CEDAR CANYON

Certified Mail Fee
 \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total \$

Sent To
Gerald A. Hancock
4200 Fairwood
Midland, TX 79707

PS Form 3811, April 2015 PSN 7530-02-000-9053

USPS SANTI
NM 87501

APR 22 2015

SANTA FE
MAIN POST OFFICE

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Gerald A. Hancock
 4200 Fairwood
 Midland, TX 79707

9590 9403 0670 5183 6872 53

2. Article Number (Transfer from service label)

7015 3010 0001 8827 2953

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X M Hancock

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4/25

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 3010 0001 8827 2960

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL**

MHF/OXY
CEDAR CANYON

Certified Mail Fee
 \$ 3.85

Extra Services & Fees (check box, add fee as appropriate)
☒ Return Receipt (hardcopy) \$ 2.80
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage
 \$

Total Postage \$

Sent To
Mobil Producing Texas & New Mexico Inc.
Attn: Angie Repka
810 Houston St.
Fort Worth, TX 76102

PS Form 3811, April 2015 PSN 7530-02-000-9053

USPS SANTI
NM 87501

APR 22 2015

SANTA FE
MAIN POST OFFICE

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mobil Producing Texas & New Mexico Inc.
 Attn: Angie Repka
 810 Houston St.
 Fort Worth, TX 76102

9590 9403 0670 5183 6872 46

2. Article Number (Transfer from service label)

7015 3010 0001 8827 2960

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Angie Repka

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

APR 25 2015

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☒ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 3010 0001 8827 2977

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL** MHF/OXY CEDAR CANYON

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$

Sent to: Wayne and Linda Newkumet

Street: 500 West Texas Ave.

City: Suite 1410

City: Midland, TX 79701

PS Form 3811, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

APR 22 2015
 SANTA FE
 MAIN POST OFFICE
 NM 87507

7015 3010 0001 8827 2984

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **OFFICIAL** MHF/OXY CEDAR CANYON

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.10

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total \$

Sent to: M'lissa L. McKinney Shoening

Street: 301 Sir Barton Parkway

City: Midland, TX 79705

PS Form 3811, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

APR 22 2015
 SANTA FE
 MAIN POST OFFICE
 NM 87507

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 Wayne and Linda Newkumet
 500 West Texas Ave.
 Suite 1410
 Midland, TX 79701

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 2977

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-25

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

3. Service Type ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:
 M'lissa L. McKinney Shoening
 301 Sir Barton Parkway
 Midland, TX 79705

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 2984

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 4-27-16

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

3. Service Type ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 2991

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit OFFICIAL	
MHF/OXY CEDAR CANYON	
Certified Mail Fee \$ <u>3.45</u>	USPS SANTIAGO NM 87501 APR 2 2015 SANTA FE MAIN POST OFFICE
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ Total \$ Sent Street City,	
Prospector LLC PO Box 429 Roswell, NM 88202	
PS Form 3800, April 2015 PSN 7530-02-000-9053	

7015 3010 0001 8827 3004

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit OFFICIAL	
MHF/OXY CEDAR CANYON	
Certified Mail Fee \$ <u>3.45</u>	USPS SANTIAGO NM 87501 APR 2 2015 SANTA FE MAIN POST OFFICE
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ <input type="checkbox"/> Return Receipt (electronic) \$ <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="checkbox"/> Adult Signature Required \$ <input type="checkbox"/> Adult Signature Restricted Delivery \$	
Postage \$ Total \$ Sent Street City,	
Ross Duncan Properties LLC Po box 647 Artesia, nm 88211	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X <u>Jan Andazola</u>	
1. Article Addressed to: Prospector LLC PO Box 429 Roswell, NM 88202		B. Received by (Printed Name) <u>Jan Andazola</u>	
2. Article Number (Transfer from service label) 7015 3010 0001 8827 2991		C. Date of Delivery APR 2 2015	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, April 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X <u>A. WATTS</u>	
1. Article Addressed to: Ross Duncan Properties LLC Po box 647 Artesia, nm 88211		B. Received by (Printed Name) <u>A. WATTS</u>	
2. Article Number (Transfer from service label) 7015 3010 0001 8827 3004		C. Date of Delivery APR 2 2015	
3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, April 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

7015 3010 0001 8827 3011

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/OXY CEDAR CANYON OFFICE**

Certified Mail Fee \$ 3.55

Extra Services & Fees (check box, add fee as appropriate)

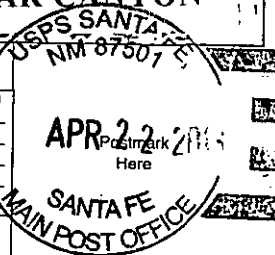
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage \$

Total \$

Sent to **Xplor Resources LLC**
 1104 n shore
 Carlsbad, nm 88220

PS Form 3800, April 2015



SENDER INFORMATION

1. Complete items 1, 2, and 3.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

RECIPIENT INFORMATION

Xplor Resources LLC
 1104 n shore
 Carlsbad, nm 88220

9590 9403 0670 5183 6868 43

2. Article Number (Transfer from service label)
 7015 3010 0001 8827 3011

ACTION ON DELIVERY

A. Signature [Signature]

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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 3010 0001 8827 3028

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **MHF/OXY CEDAR CANYON OFFICE**

Certified Mail Fee \$ 3.55

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage \$

Total \$

Sent to **Honey's Heritage LP**
 P. O. Box 833206
 Richardson, TX 75083-3206

PS Form 3800, April 2015

