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

APPLICATION OF DEVON ENERGY PRODUCTION COMPANY, L.P. FOR SPECIAL RULES AND REGULATIONS FOR THE BRINNINSTOOL-BONE SPRING POOL, LEA COUNTY, NEW MEXICO. **Case No. 15,438**

APPLICATION OF DEVON ENERGY PRODUCTION COMPANY, L.P. FOR SPECIAL RULES AND REGULATIONS FOR THE TRIPLE X-BONE SPRING POOL, LEA COUNTY, NEW MEXICO. **Case No. 15,439**

APPLICATION OF DEVON ENERGY PRODUCTION COMPANY, L.P. FOR SPECIAL RULES AND REGULATIONS FOR THE CRUZ-BONE SPRING POOL, LEA COUNTY, NEW MEXICO. **Case No. 15,440**

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 Devon Energy Production Company, L.P.

3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners and operators entitled to receive notice of the applications filed herein.

4. Notice of the applications was provided to the interest owners and operators, at their last known addresses, by certified mail. Copies of the notice letters and certified return receipts are attached hereto as Attachment A.

5. Applicant has complied with the notice provisions of Division Rule NMAC 19.15.4.

Oil Conservation Division
Case No. 8
Exhibit No. 8

James Bruce

SUBSCRIBED AND SWORN TO before me this 1st day of ~~January~~ February, 2016 by James Bruce.

OFFICIAL SEAL
KERRIE C. ALLEN
Notary Public
State of New Mexico
My Commission Expires 10-22-16

My Commission Expires:

Notary Public

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

January 13, 2016

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of three application for special pool rules, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P., regarding the Brinninstool-Bone Spring Pool, Triple X-Bone Spring Pool, and Cruz-Bone Spring Pool, located in parts of Township 23 South, Range 33 East, N.M.P.M. and Township 24 South, Range 33 East, N.M.P.M.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 4, 2016, 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 in one or more of the pools that may be affected by the applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the 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, January 28, 2016. 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.

Very truly yours,

James Bruce

James Bruce

Attorney for Devon Energy Production Company, L.P.

Attachment A

EXHIBIT A

COG Production LLC
COG Operating LLC
One Concho Center
600 West Illinois Avenue
Midland, Texas 79701

Endurance Resources LLC
Suite 1050
15455 Dallas Parkway
Addison, Texas 75234

Murchison Oil & Gas, Inc.
Legacy Tower One
Suite 1400
7250 Dallas Parkway
Plano, Texas 75024

XTO Energy Inc.
810 Houston Street
Fort Worth, Texas 76102

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

Fulfer Oil & Cattle LLC
P.O. Box 1224
Jal, New Mexico 88252

OXY USA Inc.
5 Greenway Plaza
Houston, Texas 77046

EOG Resources, Inc.
P.O. Box 2267
Midland, Texas 79702

Cimarex Energy Co.
Cimarex Energy Co. of Colorado
Magnum Hunter Production, Inc.
Suite 600
600 North Marienfeld
Midland, Texas 79701

Commissioner of Public Lands
Oil, Gas & Minerals Division
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

Chesapeake Energy Corporation
P.O. Box 18496
Oklahoma City, Oklahoma 73102

Chevron U.S.A. Inc.
15 Smith Road
Midland, Texas 79705

Bureau of Land Management
620 East Greene Street
Carlsbad, New Mexico 88220

ConocoPhillips Company
600 North Dairy Ashford
Houston, Texas 77079

Trainer Partners, Ltd.
P.O. Box 3788
Midland, Texas 79702

Performance Oil & Gas Company
Suite 1500
5400 Lyndon B. Johnson Freeway
Dallas, Texas 75240-1017

Joseph William Foran
Suite 1500
5400 Lyndon B. Johnson Freeway
Dallas, Texas 75240-1017

Angelo Holdings LLC
P.O. Box 50086
Midland, Texas 79710

Lucille H. Pipkin Trust
P.O. Box 1174
Roswell, New Mexico 88202-1174

Mitchell Exploration
6212 Homestead Boulevard
Midland, Texas 79707

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.
P.O. Box 2267
Midland, Texas 79702

9590 9402 1240 5246 2060 88

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0165

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 1-19-16

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
☐ Mail
Mail Restricted Delivery
(over $500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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

7012 0470 0001 5955 0196

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OFFICIAL USE

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

Postmark Here

Sent To: Chesapeake Energy Corporation
Street, Apt. No.; or PO Box No.: P.O. Box 18496
City, State, ZIP+4: Oklahoma City, Oklahoma 73102

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0165

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

Postmark Here

Sent To: EOG Resources, Inc.
Street, Apt. No.; or PO Box No.: P.O. Box 2267
City, State, ZIP+4: Midland, Texas 79702

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0165

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:

Chesapeake Energy Corporation
P.O. Box 18496
Oklahoma City, Oklahoma 73102

9590 9402 1240 5246 2060 57

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0196

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X RECEIVED ☐ Agent ☐ Addressee

B. Received by (Printed Name) JAN 19 2016 C. Date of Delivery

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
ed Mail
ed Mail Restricted Delivery
(over $500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 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:

Fulfer Oil & Cattle LLC
P.O. Box 1224
Jal, New Mexico 88252

9590 9402 1240 5246 2061 01

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0141

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X ☐ Agent ☐ Addressee

B. Received by (Printed Name) D.C Bruce

C. Date of Delivery 1/20/16

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
- ☐ Mail
- ☐ Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7012 0470 0001 5955 0240

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

Postmark Here

Sent To: Performance Oil & Gas Company
Street, Apt. No.; or PO Box No.: Suite 1500, 5400 Lyndon B. Johnson Freeway
City, State, ZIP+4: Dallas, Texas 75240-1017

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0141

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

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OFFICIAL USE

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

Postmark Here

Sent To: Fulfer Oil & Cattle LLC
Street, Apt. No.; or PO Box No.: P.O. Box 1224
City, State, ZIP+4: Jal, New Mexico 88252

PS Form 3800, August 2006 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:

Performance Oil & Gas Company
Suite 1500
5400 Lyndon B. Johnson Freeway
Dallas, Texas 75240-1017

9590 9402 1240 5246 2060 02

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0240

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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted 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, July 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:

Lucille H. Pipkin Trust
P.O. Box 1174
Roswell, New Mexico 88202-1174

9590 9402 1240 5246 2059 75

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0271

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over $500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

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7012 0470 0001 5955 0127

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

Postmark Here

Sent To: XTO Energy Inc.
Street, Apt. No., or PO Box No.: 810 Houston Street
City, State, ZIP+4: Fort Worth, Texas 76102

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0271

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

Postmark Here

Sent To: Lucille H. Pipkin Trust
Street, Apt. No., or PO Box No.: P.O. Box 1174
City, State, ZIP+4: Roswell, New Mexico 88202-1174

PS Form 3800, August 2006 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:

XTO Energy Inc.
810 Houston Street
Fort Worth, Texas 76102

9590 9402 1240 5246 2061 25

7012 0470 0001 5955 0127

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery: JAN 19 2016

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
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over $500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 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:

Bureau of Land Management
620 East Greene Street
Carlsbad, New Mexico 88220

9590 9402 1240 5246 2060 33

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0219

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 1/19/16

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
Mail
Mail Restricted Delivery
(over $500)

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

7012 0470 0001 5955 0110

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

Postmark Here

Sent To: Murchison Oil & Gas, Inc.
Street, Apt. No.; or PO Box No.: Legacy Tower One, Suite 1400, 7250 Dallas Parkway
City, State, ZIP+4: Plano, Texas 75024

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0219

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

Postmark Here

Sent To: Bureau of Land Management
Street, Apt. No.; or PO Box No.: 620 East Greene Street
City, State, ZIP+4: Carlsbad, New Mexico 88220

PS Form 3800, August 2006 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:

Murchison Oil & Gas, Inc.
Legacy Tower One
Suite 1400
7250 Dallas Parkway
Plano, Texas 75024

9590 9402 1240 5246 2061 32

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0110

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Elaine Peveto ☐ Agent ☐ Addressee

B. Received by (Printed Name) Elaine Peveto C. Date of Delivery 1-19-16

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
lail
lail Restricted Delivery
(over $500)

PS Form 3811, July 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:

Trainer Partners, Ltd.
P.O. Box 3788
Midland, Texas 79702

9590 9402 1240 5246 2060 19

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0233

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 1/31/16

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, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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

Postmark Here

Sent To: Chevron U.S.A. Inc.
Street, Apt. No.; or PO Box No.: 15 Smith Road
City, State, ZIP+4: Midland, Texas 79705

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0233

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OFFICIAL USE

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

Postmark Here

Sent To: Trainer Partners, Ltd.
Street, Apt. No.; or PO Box No.: P.O. Box 3788
City, State, ZIP+4: Midland, Texas 79702

PS Form 3800, August 2006 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:

Chevron U.S.A. Inc.
15 Smith Road
Midland, Texas 79705

9590 9402 1240 5246 2060 40

7012 0470 0001 5955 0202

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 1/16/16

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, July 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:

Joseph William Foran
Suite 1500
5400 Lyndon B. Johnson Freeway
Dallas, Texas 75240-1017

9590 9402 1240 5246 2059 99

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0257

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

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

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
Restricted Delivery (over $500)

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

7012 0470 0001 5955 0172

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

Postmark Here

Sent To: Cimarex Energy Co.
Cimarex Energy Co. of Colorado
Magnum Hunter Production, Inc.
Street, Apt. No.; or PO Box No.: Suite 600
600 North Marienfeld
City, State, ZIP+4: Midland, Texas 79701

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0257

U.S. Postal Service™
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OFFICIAL USE

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

Postmark Here

Sent To: Joseph William Foran
Street, Apt. No.; or PO Box No.: Suite 1500
5400 Lyndon B. Johnson Freeway
City, State, ZIP+4: Dallas, Texas 75240-1017

PS Form 3800, August 2006 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:

Cimarex Energy Co.
Cimarex Energy Co. of Colorado
Magnum Hunter Production, Inc.
Suite 600
600 North Marienfeld
Midland, Texas 79701

9590 9402 1240 5246 2060 71

2. Article Number (Transfer from service label)
7012 0470 0001 5955 0172

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Sadie Garcia C. Date of Delivery 1-19-16

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
(over $500)

PS Form 3811, July 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:

Mitchell Exploration
6212 Homestead Boulevard
Midland, Texas 79707

9590 9402 1240 5246 2059 68

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0288

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 1/19/16

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, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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OFFICIAL USE

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

Postmark Here

Sent To: COG Production LLC
Street, Apt. No.; or PO Box No.: COG Operating LLC
City, State, ZIP+4: One Concho Center
600 West Illinois Avenue
Midland, Texas 79701

7012 0470 0001 5955 0097

PS Form 3800, August 2006 See Reverse for Instructions

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

Postmark Here

Sent To: Mitchell Exploration
Street, Apt. No.; or PO Box No.: 6212 Homestead Boulevard
City, State, ZIP+4: Midland, Texas 79707

7012 0470 0001 5955 0288

PS Form 3800, August 2006 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:

COG Production LLC
COG Operating LLC
One Concho Center
600 West Illinois Avenue
Midland, Texas 79701

9590 9402 1240 5246 2061 56

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0097

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) EMILY AURINGER | C. Date of Delivery 1/20/16

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, July 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:

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

9590 9402 1240 5246 2061 18

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0134

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [signature] C. Date of Delivery 1/19/16

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
- ☐ ail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7012 0470 0001 5955 0264

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OFFICIAL USE

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

Postmark Here

Sent To: Angelo Holdings LLC
Street, Apt. No., or PO Box No.: P.O. Box 50086
City, State, ZIP+4: Midland, Texas 79710

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0134

U.S. Postal Service™
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OFFICIAL USE

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

Postmark Here

Sent To: Yates Petroleum Corporation
Street, Apt. No., or PO Box No.: 105 South Fourth Street
City, State, ZIP+4: Artesia, New Mexico 88210

PS Form 3800, August 2006 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:

Angelo Holdings LLC
P.O. Box 50086
Midland, Texas 79710

9590 9402 1240 5246 2059 82

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0264

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Mike Heathington C. Date of Delivery 1/20/16

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

Restricted Delivery

PS Form 3811, July 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:

Commissioner of Public Lands
Oil, Gas & Minerals Division
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

9590 9402 1240 5246 2060 64

Article Number (Transfer from service label)

7012 0470 0001 5955 0189

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

SANTA FE NM 87501
JAN 20 2016
USPS

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 ☐ Insured Mail Restricted Delivery (over $500)

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

U.S. Postal Service™
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OFFICIAL USE

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

Postmark Here

Sent To: ConocoPhillips Company
Street, Apt. No., or PO Box No.: 600 North Dairy Ashford
City, State, ZIP+4: Houston, Texas 77079

7012 0470 0001 5955 0226

PS Form 3800, August 2006 See Reverse for Instructions

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

Postmark Here

Sent To: Commissioner of Public Lands
Street, Apt. No., or PO Box No.: Oil, Gas & Minerals Division 310 Old Santa Fe Trail
City, State, ZIP+4: Santa Fe, New Mexico 87501

7012 0470 0001 5955 0189

PS Form 3800, August 2006 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:

ConocoPhillips Company
600 North Dairy Ashford
Houston, Texas 77079

9590 9402 1240 5246 2060 26

Article Number (Transfer from service label)

7012 0470 0001 5955 0226

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
☐ 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 ☐ Insured Mail Restricted Delivery (over $500)

PS Form 3811, July 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:

OXY USA Inc.
5 Greenway Plaza
Houston, Texas 77046

9590 9402 1240 5246 2060 95

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0158

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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery ($500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

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OFFICIAL USE

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

Postmark Here

Sent To: Endurance Resources LLC
Street, Apt. No., or PO Box No.: Suite 1050, 15455 Dallas Parkway
City, State, ZIP+4: Addison, Texas 75234

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0103

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

Postmark Here

Sent To: OXY USA Inc.
Street, Apt. No., or PO Box No.: 5 Greenway Plaza
City, State, ZIP+4: Houston, Texas 77046

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5955 0158

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:

Endurance Resources LLC
Suite 1050
15455 Dallas Parkway
Addison, Texas 75234

9590 9402 1240 5246 2061 49

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0103

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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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