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. 15496

AFFIDAVIT

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

Michael H. Feldewert, 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 has been provided under the notice letters and proof of receipts attached hereto.

Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 3rd day of August 2016 by Michael H. Feldewert.

OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/04/19

Notary Public

BEFORE THE OIL CONVERSATION DIVISION
Santa Fe, New Mexico
Exhibit No. 12
Submitted by: COG OPERATING LLC
Hearing Date: August 4, 2016

HOLLAND&HART

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

July 15, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: PARTIES SUBJECT TO POOLING PROCEEDINGS

Re: Amended Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico.
Halberd 27 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 August 4, 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 Dylan Park, at (432) 685-2539 or dpark@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

HOLLAND&HART

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

July 15, 2016

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET PARTIES

RE: Amended Application of COG Operating LLC for a non-standard spacing and proration unit and compulsory pooling, Eddy County, New Mexico. Halberd 27 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 August 4, 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 Dylan Park, at (432) 685-2539 or dpark@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

HOLLAND&HART

Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JLKessler@hollandhart.com

July 15, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: OFFSET LESSEES AND OPERATORS IN THE YESO FORMATION

Re: Amended Application of COG Operating LLC for a Non-Standard Spacing and Proration Unit, and Compulsory Pooling, Eddy County, New Mexico.
Halberd 27 State Com No. 1H Well

Dear Sir or Madam:

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.* You are receiving notice of this application because you own an interest below 4,000' in the Yeso formation that is not being pooled for the proposed well. The pooled interval for the proposed well is limited to that portion of the Glorieta and Yeso formations (Artesia; Glorieta Yeso Pool (96830)) above 4,000'.

This application has been set for hearing before a Division Examiner at 8:15 AM on August 4, 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 Dylan Park, at (432) 685-2539 or dpark@concho.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

COG OPERATING LLC
HALBERD 27 STATE COM NO. 1H WELL

POOLED PARTIES

Heirs of Lauretta M. Phillips
Mrs. OrLynn Shelden, 3020
Buttonhook Road
Solvang, CA 93463

Occidental Permian Limited Partnership
5 Greenway Plaza. Suite 110
Houston, TX 77046-0526

Chiso Ltd
670 Dona Ana Rd. SW
Deming, NM 88030-6278

Black Shale Mineral, LLC
P.O. Box 2243
Longview, Texas 75606

Clayton Williams Energy, Inc.
6 Desta Drive, Suite 1100
Midland, TX 79705

Mark B. Heinen
1221 S. Main, Suite 206
Boerne, TX 78006

Debra Denise Latham, Trustee of the Latham Family Trust under the Will of Lindley Paul Latham
3402 Choate Place
Midland, TX 79707

Mel Riggs
6 Desta Drive, Suite 3000
Midland, TX 79705

Mark Tisdale
6 Desta Drive, Suite 3000
Midland, TX 79705

Greg Benton
P.O. Box 51034
Midland, TX 79710

Matt Swierc
6 Desta Drive, Suite 3000
Midland, TX 79705

John Kennedy
6 Desta Drive, Suite 3000
Midland, TX 79705

Mickey Cunningham
5313 Chesley Court
Midland, TX 79707

Robert Thomas
3808 Roadrunner
Midland, TX 79707

Mike Pollard
6 Desta Drive, Suite 3000
Midland, TX 79705

Petraitis Oil and Gas Inc.
1603 Holloway Ave.,
Midland, TX 79701

Manta Oil and Gas Inc.
190 E. Stacy Rd. 306-373
Allen, TX 75002

S.E.S. Oil & Gas Inc.
P.O. Box 371
Midland, TX 79701

Finwing Corporation
508 Wall St.,
Midland, TX 79701

Olwick Corporation
P.O. Box 10886
Midland, TX 79702

Wadi Petroleum Inc.
4355 Sylvanfield Blvd.,
Houston, TX 77014

Mary Ann Curtis, L.L.C.
P.O. Box 58095
Oklahoma City, OK 73157

Carolyn K. Lisle, Trustee of the Carolyn K. Lisle Revocable Trust
P.O. Box 21357
Oklahoma City, OK 73156

GMSR, Ltd., a Texas LP
P.O. Box 113
Midland, TX 79702-0113

DMM Family, LLC
P.O. Box 101
Midland, TX 79702

David W. Marcum
3115 Stanolind
Midland, TX 79705

COG OPERATING LLC
HALBERD 27 STATE COM NO. 1H WELL

C. Kay Marcum, Trustee of the C. Kay Marcum Revocable Trust
9425 Nix Road
Tolar, TX 76476

John Weldon Gilchrist, as his separate property
102 S. Main
Thorndale, TX 76557

Beverly Gooden
P.O. Box 173
Childress, TX 79201-0173

The Wright Company
P.O. Box 752
Stanton, TX 79872

Michael Lee Hailey
22145 County Road 798
Mathis, TX 78368

Halberd 27 State Com #1H - HORIZONTAL OFFSET:

Martin Yates III and Martin Yates, Jr.
112 North 1st
Artesia, NM 8821

Occidental Permian Ltd.
P.O. Box 4294
Houston, Texas 77210

Occidental Permian Limited Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

Joachim Marc Schmid, as his separate property
3315 Gentry Drive
West Lake Hills, TX 78746

Marla Jo Moats Schmid, as her separate property
5205 Rain Creek Parkway
Austin, TX 78759

Occidental Permian Limited Partnership
5 Greenway Plaza Suite 110
Houston, TX 77046-0526

Bud F. Walker
1235 Diamondback Dr. NE
Albuquerque, NM 87113

Marjorie Ann Estevis
1620 Vista Florida
Edinburg, TX 78539

Mrs. OrLynn Shelden
3020 Buttonhook Road
Solvang, CA 93463

Kerr-McGee O&G Onshore, LP
Land Department
P.O. Box 1330
Houston, TX 77251

VERTICAL OFFSET IN S2S2 PRORATION UNIT

John Kennedy
6 Desta Drive, Suite 3000
Midland, TX 79705

Stacey Hutcherson, as her separate property
112 Gainer Drive
Hutto, TX 78634

Judy F. Mulroy
2231 Pine River Drive
Kingwood, TX 77330

ORRI Owners to force pool:

Ernest Byron Hailey, III
6 Parwood Court
The Woodland, TX 77382

Manix Royalty Ltd.
P.O. Box 2818
Midland, TX 79702

Apache Corporation
303 Veterans Airpark Lane
Midland, TX 79701

Alamo Permian Resources, LLC
415 Wall Street
Midland, TX 79701

OXY USA WTP Limited Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

Carolyn K. Lisle, Trustee of the Carolyn K. Lisle Revocable Trust
P.O. Box 21357
Oklahoma City, OK 73156

COG OPERATING LLC
HALBERD 27 STATE COM NO. 1H WELL

GMSR, Ltd., a Texas LP
P.O. Box 113
Midland, TX 79702-0113

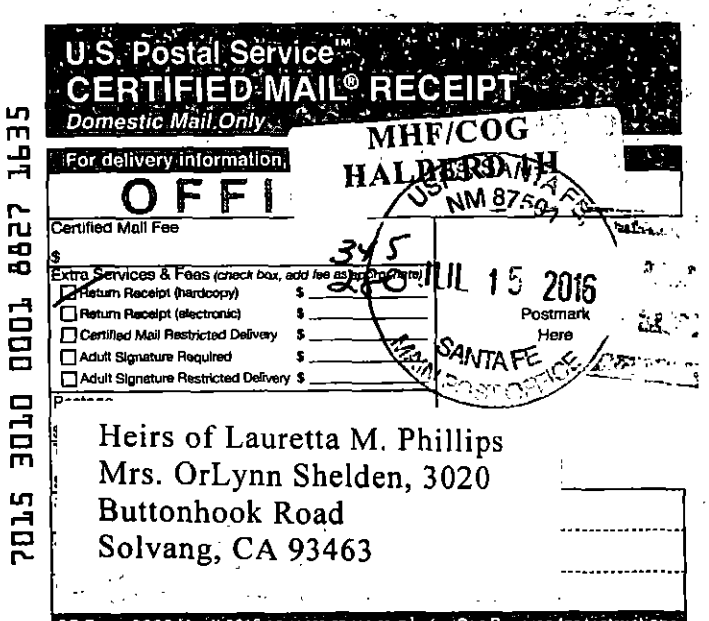
David W. Marcum
3115 Stanolind
Midland, TX 79705

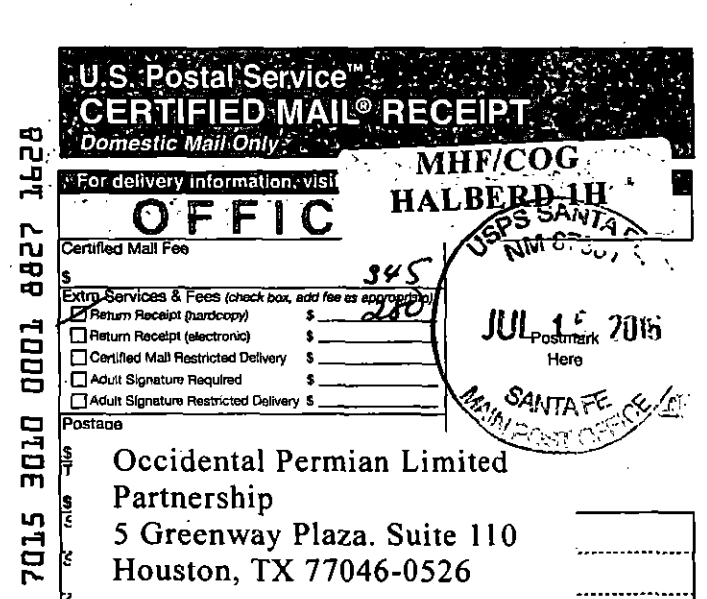
C. Kay Marcum, Trustee of the
C. Kay Marcum Revocable
Trust
9425 Nix Road
Tolar, TX 76476

Stacey Hutcherson, as her
separate property
112 Gainer Drive
Hutto, TX 78634

Judy F. Mulroy
2231 Pine River Drive
Kingwood, TX 77330

Beverly Gooden
P.O. Box 173
Childress, TX 79201-0173


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information,
OFFI
MHF/COG
HALBERD 1H
USPS SANTA FE
NM 87501
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 $
JUL 15 2016
Postmark Here
SANTA FE
MAIN POST OFFICE
Postage
$ 6.25
Heirs of Lauretta M. Phillips
Mrs. OrLynn Shelden, 3020
Buttonhook Road
Solvang, CA 93463
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7015 3010 0001 8827 1635


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visi
OFFIC
MHF/COG
HALBERD 1H
USPS SANTA
NM 87501
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 $
JUL 15 2016
Postmark Here
SANTA FE
MAIN POST OFFICE
Postage
$ 6.25
Occidental Permian Limited
Partnership
5 Greenway Plaza. Suite 110
Houston, TX 77046-0526
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7015 3010 0001 8827 1628

7015 3010 0001 8827 1611

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

For delivery information, vis

OFFIC

Certified Mail Fee
$

Extra Services & Fees *(check box, add fee as appropriate)*
- [x] Return Receipt (hardcopy) $
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage
$

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Chiso Ltd
670 Dona Ana Rd. SW
Deming, NM 88030-6278

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

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.
- 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:

Chiso Ltd
670 Dona Ana Rd. SW
Deming, NM 88030-6278

9590 9401 0128 5225 9668 38

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1611

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) P Jacobsen C. Date of Delivery 7/18/16

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
- [x] Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- [x] Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

7015 3010 0001 8827 1604

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

For delivery information, visit c

OFFIC

Certified Mail Fee
$

Extra Services & Fees *(check box, add fee as appropriate)*
- [x] Return Receipt (hardcopy) $
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Po
$

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Black Shale Mineral, LLC
P.O. Box 2243
Longview, Texas 75606

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:

Black Shale Mineral, LLC
P.O. Box 2243
Longview, Texas 75606

9590 9401 0128 5225 9668 45

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1604

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Deisy Sannana 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
- [x] Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- [x] Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

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

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.30
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

JUL 15 2016 Postmark Here

USPS SANTA FE NM 87501 FE
SANTA FE MAIN POST OFFICE

Po
$
To
$
Se
St
City, ...

Clayton Williams Energy, Inc.
6 Desta Drive, Suite 1100
Midland, TX 79705

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

7015 3010 0001 8827 1598

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.30
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

JUL 15 2016 Postmark Here

USPS SANTA FE NM 87501 FE
SANTA FE MAIN POST OFFICE

P
$
Fe
$
S
S
City, ...

Mark B. Heinen
1221 S. Main, Suite 206
Boerne, TX 78006

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

7015 3010 0001 8827 1581

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:

Clayton Williams Energy, Inc.
6 Desta Drive, Suite 1100
Midland, TX 79705

9590 9401 0128 5225 9668 52

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1598

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kathy Stark ☐ Agent ☐ Addressee

B. Received by (Printed Name) Kathy Stark C. Date of Delivery 7/19/16

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

7015 3010 0001 8827 1574

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

MHF/COG
HALBERD 1H

For delivery information, visit
OFFIC

USPS SANTA FE NM 87501

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.50
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

JUL 15 2016
Postmark Here

SANTA FE MAIN POST OFFICE

Postage
$
Total
$
Sent
Street
City

Debra Denise Latham, Trustee of the
Latham Family Trust under the Will of
Lindley Paul Latham
3402 Choate Place
Midland, TX 79707

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

7015 3010 0001 8827 1567

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

MHF/COG
HALBERD 1H

For delivery information, visit o
OFFICI

USPS SANTA FE NM 87501

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.50
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

JUL 15 2016
Postmark Here

SANTA FE MAIN POST OFFICE

Postage
$
$
Sent
Street
City

Mel Riggs
6 Desta Drive, Suite 3000
Midland, TX 79705

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:

Mel Riggs
6 Desta Drive, Suite 3000
Midland, TX 79705

9590 9401 0128 5225 9668 83

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1567

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Kathy Stark
☐ Agent
☐ Addressee

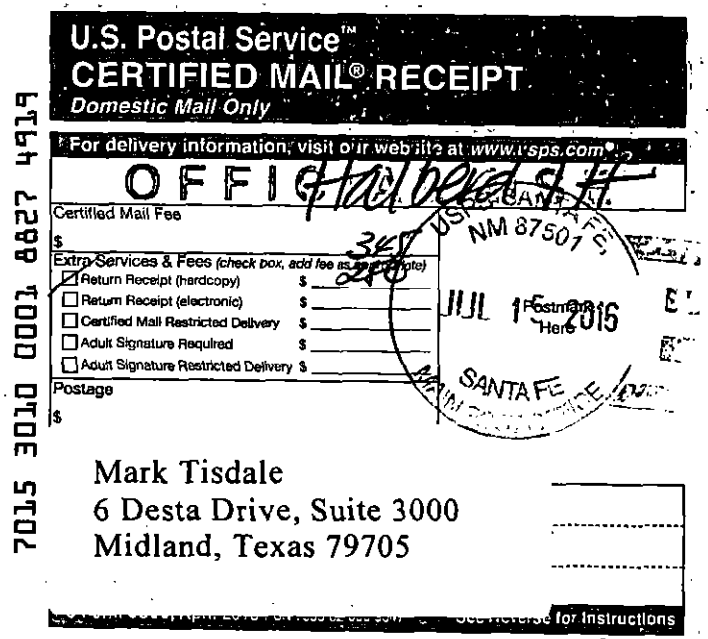
B. Received by (Printed Name)
Kathy Stark

C. Date of Delivery
7/19/16

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
☐ ed Mail
☐ d 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



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

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

OFFICIAL USE

Certified Mail Fee $ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.30
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage $

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE

Mark Tisdale
6 Desta Drive, Suite 3000
Midland, Texas 79705

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

7015 3010 0001 8827 4919

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:

Mark Tisdale
6 Desta Drive, Suite 3000
Midland, TX 79705

9590 9401 0128 5225 9668 90

2. Article Number (Transfer from service label)
7015 3010 0001 8827 4919

COMPLETE THIS SECTION ON DELIVERY

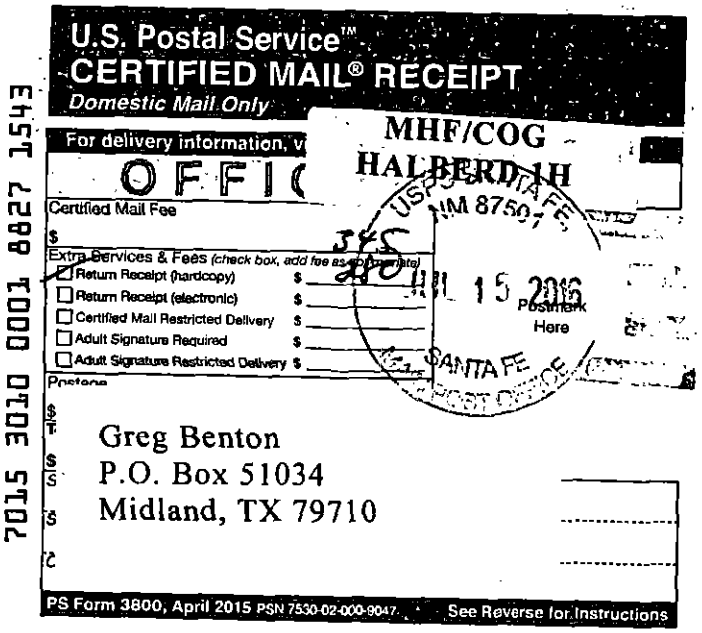
A. Signature
X Kathy Stark
- [ ] Agent
- [ ] Addressee

B. Received by (Printed Name) Kathy Stark
C. Date of Delivery 7/19/16

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
- [x] 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
- [x] Signature Confirmation™
- [ ] Signature Confirmation Restricted Delivery

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



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

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

OFFICIAL USE

Certified Mail Fee $ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.30
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage $

MHF/COG
HALBERD 1H
USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE

Greg Benton
P.O. Box 51034
Midland, TX 79710

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

7015 3010 0001 8827 1543

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:

Greg Benton
P.O. Box 51034
Midland, TX 79710

9590 9401 0128 5225 9669 06

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1543

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
- [ ] Agent
- [ ] Addressee

B. Received by (Printed Name) ORLO HALBERTON
C. Date of Delivery 7-18-16

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
- [x] 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
- [x] Signature Confirmation™
- [ ] Signature Confirmation Restricted Delivery

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

7015 3010 0001 8827 1734

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H
USPS SANTA FE
NM 87507

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 $

JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Pos
$
Tota
$
Sen
Matt Swierc
6 Desta Drive, Suite 3000
Midland, TX 79705
Stre
City, State, ZIP+4

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

FOLD AT DOTTED LINE
ENVELOPE TO THE RIGHT

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:

Matt Swierc
6 Desta Drive, Suite 3000
Midland, TX 79705

9590 9401 0128 5225 9670 19

2. Article Number *(Transfer from service label)*
7015 3010 0001 8827 1734

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kathy Stark ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Kathy Stark
C. Date of Delivery 7/19/16

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
- ☐ Insured Mail
- ☐ 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

7015 3010 0001 8827 1727

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H
USPS SANTA FE
NM 87507

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 $

JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Postage
$
Tota
$
Sen
John Kennedy
6 Desta Drive, Suite 3000
Midland, TX 79705
Stre
City, State, ZIP+4

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

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.
- 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:

John Kennedy
6 Desta Drive, Suite 3000
Midland, TX 79705

9590 9401 0128 5225 9670 26

2. Article Number *(Transfer from service label)*
7015 3010 0001 8827 1727

THIS SECTION ON DELIVERY

A. Signature
X Kathy Stark ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Kathy Stark
C. Date of Delivery 7/19/16

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

7015 3010 0001 8827 1710

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

For delivery information, vi

OFFIC

MHF/COG
HALBERD 1H

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 $

Pr

$ Tc

$ Si

$ Si

Ci

USPS SANTA FE NM 87501
JUL 2016 Postmark Here
SANTA FE MAIN POST OFFICE

Mickey Cunningham
5313 Chesley Court
Midland, TX 79707

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

7015 3010 0001 8827 1703

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

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

Postage

$ Tc

$ Si

Si

Ci

USPS SANTA FE NM 87501
JUL 2016 Postmark Here
SANTA FE MAIN POST OFFICE

Robert Thomas
3808 Roadrunner
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:

Robert Thomas
3808 Roadrunner
Midland, TX 79707

9590 9401 0128 5225 4670 40

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1703

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
- ☐ 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

7015 3010 0001 8827 1697

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

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

OFFICIAL USE

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501

Certified Mail Fee $ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.20
- ☐ Return Receipt (electronic) $
- ☑ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

JUL 15 2016
Postmark Here

SANTA FE MAIN POST OFFICE

Postage $

Total Postage and Fees $

Sent To: Mike Pollard

Street and Apt. No., or PO Box No.: 6 Desta Drive, Suite 3000

City, State, ZIP+4®: Midland, TX 79705

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

---

7015 3010 0001 8827 1680

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

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

OFFICIAL USE

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501

Certified Mail Fee $ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.20
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

JUL 15 2016
Postmark Here

SANTA FE MAIN POST OFFICE

Postage $

Total Postage and Fees $

Sent To: Petraitis Oil and Gas Inc.

Street and Apt. No., or PO Box No.: 1603 Holloway Ave.,

City, State, ZIP+4®: Midland, TX 79701

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

---

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.
- 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:

Mike Pollard
6 Desta Drive, Suite 3000
Midland, TX 79705

9590 9401 0128 5225 9670 52

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1697

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Kathy Stark ☐ Agent ☐ Addressee

B. Received by (Printed Name) Kathy Stark C. Date of Delivery 7/19/16

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

7015 3010 0001 8827 1673

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

For delivery information, v

OFFIC...

MHF/COG
HALBERD IH

USPS SANTA FE NM 87501

JUL 15 2016
Postmark Here
SANTA FE MAIN POST 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 and Fees
$

Sent To
Manta Oil and Gas Inc.
190 E. Stacy Rd. 306-373
Allen, TX 75002

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

City, State, ZIP+4®

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:

Manta Oil and Gas Inc.
190 E. Stacy Rd. 306-373
Allen, TX 75002

9590 9401 0128 5225 9680 16

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1673

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☑ Agent ☐ Addressee

B. Received by (Printed Name) Tiffany McKenny
C. Date of Delivery 7-18-16

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

---

7015 3010 0001 8827 1666

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD IH

USPS SANTA FE NM 87501

JUL 15 2016
Postmark Here
SANTA FE MAIN POST 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 and Fees
$

Sent To
S.E.S. Oil & Gas Inc.
P.O. Box 371
Midland, TX 79701

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

City, State, ZIP+4®

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:

S.E.S. Oil & Gas Inc.
P.O. Box 371
Midland, TX 79701

9590 9401 0128 5225 9680 23

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1666

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Amanda G. Ayebeb
C. Date of Delivery 7/21/16

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

7015 3010 0001 8827 1659

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

For delivery information, visi

OFFIC

MHF/COG
HALBERD 1H

USPS SANTA FE, NM 87501
JUL 1
Postmark Here
SANTA FE MAIN OFFICE

Certified Mail Fee
$

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.80
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage
$

Finwing Corporation
508 Wall St.,
Midland, TX 79701

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

RETURNED

7015 3010 0001 8827 1642

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

MHF/COG
HALBERD 1H

For delivery information,

OFFIC

USPS SANTA FE, NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN 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
$

Olwick Corporation
P.O. Box 10886
Midland, TX 79702

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

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.
- 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:

Olwick Corporation
P.O. Box 10886
Midland, TX 79702

9590 9401 0128 5225 9680 47

2. Article Number (Transfer from service label)
7015 3010 0001 8827 1642

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Amanda G. Ogubuda
- [ ] Agent
- [ ] Addressee

B. Received by (Printed Name) Amanda G. Ogubuda
C. Date of Delivery 7/20/16

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
- [x] 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

7015 0640 0003 5400 5624

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

MHF/COG
HALBERD 1H

For delivery information, vi
OFFIC

Certified Mail Fee
$

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
$ 3.45

SANTA FE NM 87501 JUL 15 2015 Postmark Here SANTA FE MAIN POST OFFICE

To: Wadi Petroleum Inc.
4355 Sylvanfield Blvd.,
Houston, TX 77014

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:

Wadi Petroleum Inc.
4355 Sylvanfield Blvd.,
Houston, TX 77014

9590 9401 0128 5225 9667 15

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5624

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X L Caldwell ☐ Agent ☐ Addressee

B. Received by (Printed Name) L Caldwell C. Date of Delivery 7-18-16

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

7015 0640 0003 5400 5631

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

MHF/COG
HALBERD 1H

For delivery information, visit
OFFIC

Certified Mail Fee
$

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
$ 3.45

USPS SANTA FE NM 87501 JUL 15 2015 Postmark Here SANTA FE POST OFFICE

To: Mary Ann Curtis, L.L.C.
P.O. Box 58095
Oklahoma City, OK 73157

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

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.
- 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:

Mary Ann Curtis, L.L.C.
P.O. Box 58095
Oklahoma City, OK 73157

9590 9401 0128 5225 9667 22

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5631

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Joyce E Silvernail ☐ Agent ☐ Addressee

B. Received by (Printed Name) Joyce E Silvernail C. Date of Delivery 7-21-16

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
(over $500)

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

7015 0640 0003 5400 5648

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

MHF/COG
HALBERD 1H

For delivery information, visit
OFFIC

Certified Mail Fee
$ 3.45

Extra Services & Fees *(check box, add fee as appropriate)*
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage

USPS SANTA FE, NM 87501
Postmark Here
JUL 15 2016
SANTA FE MAIN POST OFFICE

Carolyn K. Lisle, Trustee of the
Carolyn K. Lisle Revocable Trust
P.O. Box 21357
Oklahoma City, OK 73156

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

7015 0640 0003 5400 5655

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

MHF/COG
HALBERD 1H

For delivery information, visit
OFFIC

Certified Mail Fee
$ 3.45

Extra Services & Fees *(check box, add fee as appropriate)*
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage

USPS SANTA FE, NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

GMSR, Ltd., a Texas LP
P.O. Box 113
Midland, TX 79702-0113

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

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.
- 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:

GMSR, Ltd., a Texas LP
P.O. Box 113
Midland, TX 79702-0113

9590 9401 0128 5225 9667 46

2. Article Number *(Transfer from service label)*
7015 0640 0003 5400 5655

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by *(Printed Name)*
Jason Lisle 7/20/16

C. Date of Delivery
7/20/16

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

7015 0640 0003 5400 5662

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

For delivery information, visit
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.30
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage

USPS SANTA FE, NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

DMM Family, LLC
P.O. Box 101
Midland, TX 79702

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:

DMM Family, LLC
P.O. Box 101
Midland, TX 79702

9590 9401 0128 5225 9667 53

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5662

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible]
C. Date of Delivery 7/20/16

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

7015 0640 0003 5400 5679

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

For delivery information, visit
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.30
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage

USPS SANTA FE, NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

David W. Marcum
3115 Stanolind
Midland, TX 79705

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:

David W. Marcum
3115 Stanolind
Midland, TX 79705

9590 9401 0128 5225 9667 60

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5679

COMPLETE THIS SECTION ON DELIVERY

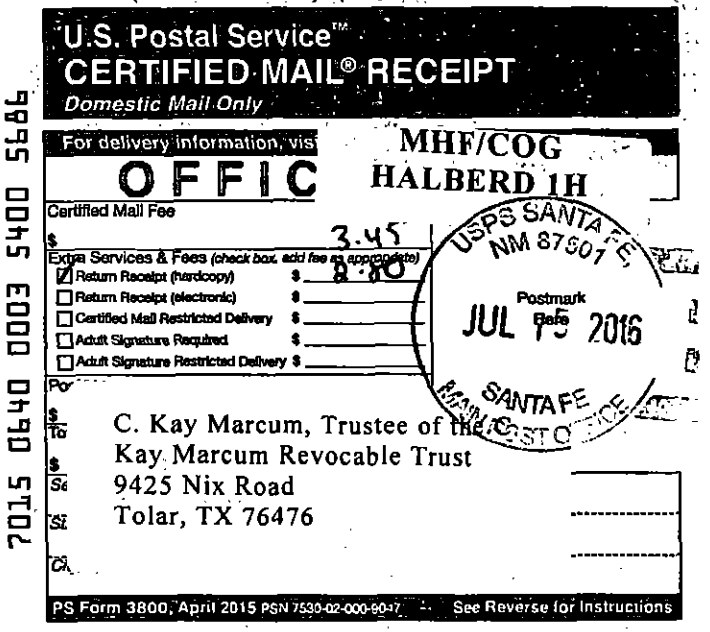
A. Signature
X [signature] ☐ Agent ☑ Addressee

B. Received by (Printed Name) David Marcum
C. Date of Delivery 7-18-16

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



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

For delivery information, vis
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

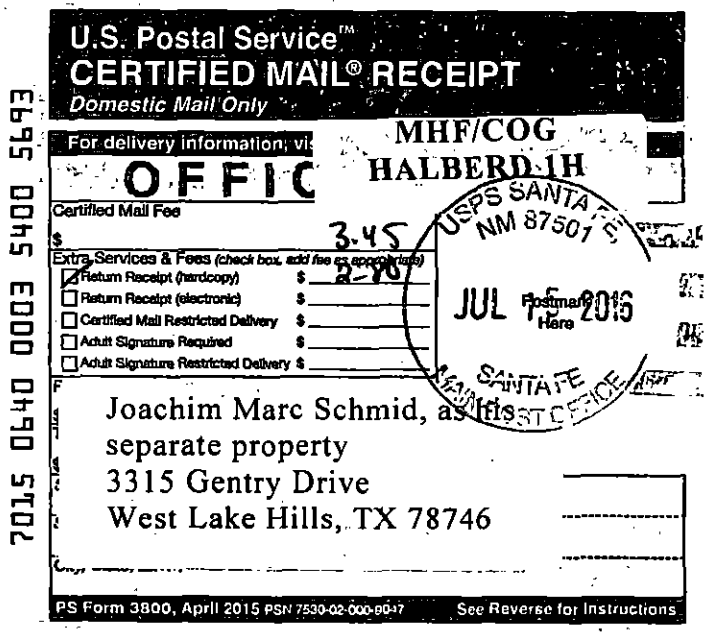
Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

USPS SANTA FE NM 87501
Postmark Here
JUL 15 2016
SANTA FE MAIN POST OFFICE

C. Kay Marcum, Trustee of the
Kay Marcum Revocable Trust
9425 Nix Road
Tolar, TX 76476

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

7015 0640 0003 5400 5686



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

For delivery information, vi
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

USPS SANTA FE NM 87501
Postmark Here
JUL 15 2016
SANTA FE MAIN POST OFFICE

Joachim Marc Schmid, as his
separate property
3315 Gentry Drive
West Lake Hills, TX 78746

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

7015 0640 0003 5400 5693

7015 0640 0003 5400 5709

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

For delivery information, visi
OFFIC

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $
Pr
$
Re
$
$
St
$
Ci

Stacey Hutcherson, as her
separate property
112 Gainer Drive
Hutto, TX 78634

PS Form 3800, April 2015 PSN 7530-02-000-9017 See Reverse for Instructions

RETURNED

7015 0640 0003 5400 5716

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

For delivery information, vis
OFFIC

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $
Postage
$
Tota
$
San
Stre
City

John Weldon Gilchrist, as his
separate property
102 S. Main
Thorndale, TX 76557

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:

John Weldon Gilchrist, as his
separate property
102 S. Main
Thorndale, TX 76557

9590 9401 0128 5225 9668 07

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5716

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
7/19/16

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
☐ 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

7015 0640 0003 5400 5723

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

For delivery information, visit
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 0.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage

USPS SANTA FE NM 87501
JUL 15 2015
Postmark Here
SANTA FE MAIN POST OFFICE

Marla Jo Moats Schmid, as her
separate property
5205 Rain Creek Parkway
Austin, TX 78759

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

7015 0640 0003 5400 5730

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

For delivery information, vi
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 0.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage

USPS SANTA FE NM 87501
JUL Postmark Here 2015
SANTA FE MAIN POST OFFICE

To Judy F. Mulroy
St 2231 Pine River Drive
City Kingwood, TX 77330

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:

Marla Jo Moats Schmid, as her
separate property
5205 Rain Creek Parkway
Austin, TX 78759

9590 9401 0128 5225 9669 13

2. 7015 0640 0003 5400 5723

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Marla J. Moats Schmid ☐ Agent ☐ Addressee

B. Received by (Printed Name) Schmid C. Date of Delivery 7-18-11

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

7015 0640 0003 5400 5747

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H

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
$

USPS SANTA FE NM 87501
JUL 15
Postmark Here
SANTA FE POST OFFICE

Beverly Gooden
P.O. Box 173
Childress, TX 79201-0173

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:

Beverly Gooden
P.O. Box 173
Childress, TX 79201-0173

9590 9401 0128 5225 9669 37

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5747

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Beverly Gooden ☐ Agent ☐ Addressee

B. Received by (Printed Name) BEVERLY GOODEN C. Date of Delivery Aug 1-16

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

7015 0640 0003 5400 5754

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

For delivery information:

OFFI

MHF/COG
HALBERD 1H

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
$

USPS SANTA FE NM 87501
JUL 15
Postmark Here
SANTA FE POST OFFICE

Occidental Permian Limited
Partnership
5 Greenway Plaza Suite 110
Houston, TX 77046-0526

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:

Occidental Permian Limited
Partnership
5 Greenway Plaza Suite 110
Houston, TX 77046-0526

9590 9401 0128 5225 9669 44

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5754

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
- ☐ 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

7015 0640 0003 5400 5761

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

For delivery information, vis
OFFIC

MHF/COG
HALBERD 1H

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 $

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE

Postage

The Wright Company
P.O. Box 752
Stanton, TX 79872

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

7015 0640 0003 5400 5778

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

For delivery information, vi
OFFIC

MHF/COG
HALBERD 1H

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 $

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE

Postage

Bud F. Walker
1235 Diamondback Dr. NE
Albuquerque, NM 87113

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

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.
- 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:

The Wright Company
~~P.O. Box 752~~
~~Stanton, TX 79872~~

9590 9401 0128 5225 9669 51

2. 7015 0640 0003 5400 5761

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Diana Bell ☐ Agent ☐ Addressee

B. Received by (Printed Name) Diana Bell C. Date of Delivery 7-21-16

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

Box 10554
Midland, TX 79702

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:

Bud F. Walker
1235 Diamondback Dr. NE
Albuquerque, NM 87113

9590 9401 0128 5225 9669 68

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5778

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 7-19-16

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

7015 0640 0003 5400 5785

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.30
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

JUL 15 2016
Postmark Here
SANTA FE

Po
$
To
$
Se
Sh
Ci

Ernest Byron Hailey, III
6 Parwood Court
The Woodland, TX 77382

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

7015 0640 0003 5400 5792

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

For delivery information, visit

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☑ Return Receipt (hardcopy) $ 2.30
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postmark Here
SANTA FE

Posta
$
Total
$
Sent
Stree
City,

Michael Lee Hailey
22145 County Road 798
Mathis, TX 78368

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:

Michael Lee Hailey
22145 County Road 798
Mathis, TX 78368

9590 9401 0128 5225 9669 82

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5792

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Sue Hailey ☑ Agent ☐ Addressee

B. Received by (Printed Name) Sue Hailey C. Date of Delivery 7/18/16 MK

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

7015 0640 0003 5400 5808

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.30
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage

USPS SANTA FE NM 87501
JUL 1 Postmark Here 2016
SANTA FE

Marjorie Ann Estevis
1620 Vista Florida
Edinburg, TX 78539

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:

Marjorie Ann Estevis
1620 Vista Florida
Edinburg, TX 78539

9590 9401 0128 5225 9669 99

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5808

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Francisco Estevis ☐ Agent ☐ Addressee

B. Received by (Printed Name) FRANCISCO ESTEVIS C. Date of Delivery 7-19-16

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
- ☐ 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

7015 0640 0003 5400 5815

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

For delivery information, visit o

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.30
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage

USPS SANTA FE NM 87501
JUL 1 Postmark Here 2016
SANTA FE

Manix Royalty Ltd.
P.O. Box 2818
Midland, TX 79702

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

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.
- 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:

Manix Royalty Ltd.
P.O. Box 2818
Midland, TX 79702

9590 9401 0128 5225 9670 02

2. Article Number (Transfer from service label)
7015 0640 0003 5400 5815

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) Cindy Lupeland C. Date of Delivery 7/20/2016

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
- ☐ 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

7015 3010 0001 8827 2212

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

For delivery information, visi

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.80
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage

USPS SANTA FE NM 87501
346
JUL 15 2016
Postmark Here
SANTA FE POST OFFICE

Mrs. OrLynn Shelden
3020 Buttonhook Road
Solvang, CA 93463

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

7015 3010 0001 8827 2205

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.80
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

Postage

USPS SANTA FE NM 87501
341
JUL 15 2016
Postmark Here
SANTA FE POST OFFICE

Apache Corporation
303 Veterans Airpark Lane
Midland, TX 79701

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

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.
- 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:

Apache Corporation
303 Veterans Airpark Lane
Midland, TX 79701

9590 9401 0128 5225 9666 23

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
- [ ] Agent
- [ ] Addressee

B. Received by (Printed Name)
C. Date of Delivery
7-19-16

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

3. Service Type
- [ ] Adult Signature
- [ ] Adult Signature Restricted Delivery
- [x] 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
- [x] Signature Confirmation™
- [ ] 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

7015 3010 0001 8827 2199

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

For delivery information, visi

OFFIC

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here

Certified Mail Fee
$ 3.35

Extra Services & Fees *(check box, add fee as appropriate)*
- ☑ Return Receipt (hardcopy) $ 2.70
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage

Martin Yates III and Martin
Yates, Jr.
112 North 1st
Artesia, NM 8821

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

RETURNED

7015 3010 0001 8827 2182

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here

Certified Mail Fee
$ 3.35

Extra Services & Fees *(check box, add fee as appropriate)*
- ☑ Return Receipt (hardcopy) $ 2.70
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage

Kerr-McGee O&G Onshore, LP
Land Department
P.O. Box 1330
Houston, TX 77251

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:

Kerr-McGee O&G Onshore, LP
Land Department
P.O. Box 1330
Houston, TX 77251

9590 9401 0128 5225 9666 47

2. Article Number *(Transfer from service label)*
7015 3010 0001 8827 2182

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* J Felder
C. Date of Delivery 7-19-16

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

all
all Restricted Delivery

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

7015 3010 0001 8827 2175

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

For delivery information, visi

OFFIC

MHF/COG
HALBERD 1H

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

USPS SANTA FE NM 87501

JUL 2016 Postmark Here

SANTA FE MAIN POST OFFICE

Alamo Permian Resources, LLC
415 Wall Street
Midland, TX 79701

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

7015 3010 0001 8827 2168

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

For delivery information, visi

OFFIC

MHF/COG
HALBERD 1H

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

USPS SANTA FE NM 87501

JUL 7 2016 Postmark Here

SANTA FE MAIN POST OFFICE

Occidental Permian Ltd.
P.O. Box 4294
Houston, Texas 77210

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

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

SENDER: COMPLETE THIS SECTION — **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 ☐ 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

1. Article Addressed to:

Occidental Permian Ltd.
P.O. Box 4294
Houston, Texas 77210

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

9590 9401 0128 5225 9666 61

2. Article Number *(Transfer from service label)*
7015 3010 0001 8827 2168

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

7015 3010 0001 8827 2151

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

For delivery information, vi

OFFIC

MHF/COG
HALBERD 1H

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
$ 0.70

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

OXY USA WTP Limited
Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

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:

OXY USA WTP Limited
Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

9590 9401 0128 5225 9666 78

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2151

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) J BOARD 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

all
all Restricted Delivery
(over $500)

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

7015 3010 0001 8827 2144

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H

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

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE

Occidental Permian Limited
Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

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:

Occidental Permian Limited
Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046

9590 9401 0128 5225 9666 85

2. Article Number (Transfer from service label)
7015 3010 0001 8827 2144

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) J BOARD 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

tail
tail Restricted Delivery
(over $500)

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

7015 3010 0001 8827 2137

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

For delivery information, visit c

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$

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

3.40 2.80

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

John Kennedy
6 Desta Drive, Suite 3000
Midland, TX 79705

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:

John Kennedy
6 Desta Drive, Suite 3000
Midland, TX 79705

9590 9401 0128 5225 9666 92

2. Article Number *(Transfer from service label)*
7015 3010 0001 8827 2137

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Kathy Stark ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Kathy Stark C. Date of Delivery 7/9/16

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
- ☐ 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

7015 3010 0001 8827 2120

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$

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

3.40 2.80

USPS SANTA FE NM 87501
JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE

Postage
$
$
$
$

Carolyn K. Lisle, Trustee of the Carolyn K. Lisle Revocable Trust
P.O. Box 21357
Oklahoma City, OK 73156

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:

Carolyn K. Lisle, Trustee of the Carolyn K. Lisle Revocable Trust
P.O. Box 21357
Oklahoma City, OK 73156

9590 9401 0128 5225 9667 08

2. Article Number *(Transfer from service label)*
7015 3010 0001 8827 2120

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Carolyn K. Lisle ☐ Agent ☐ Addressee

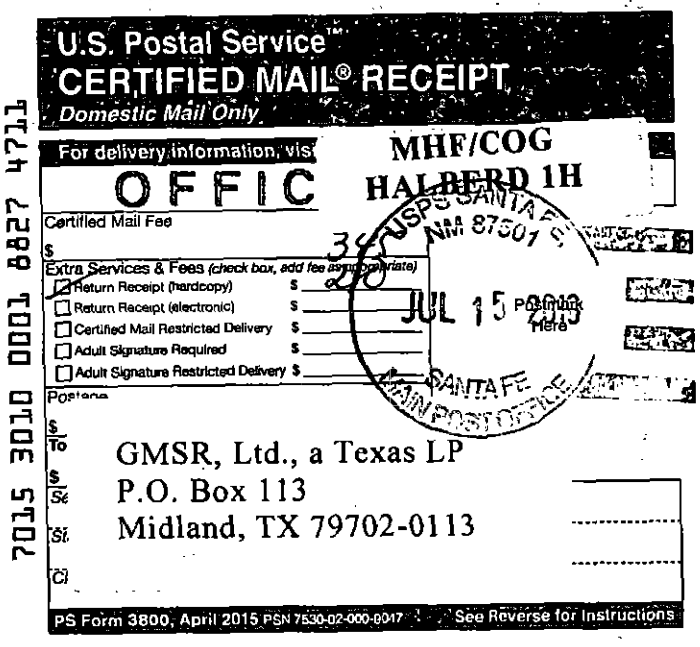
B. Received by *(Printed Name)* CAROLYN C. Date of Delivery 7/15/16

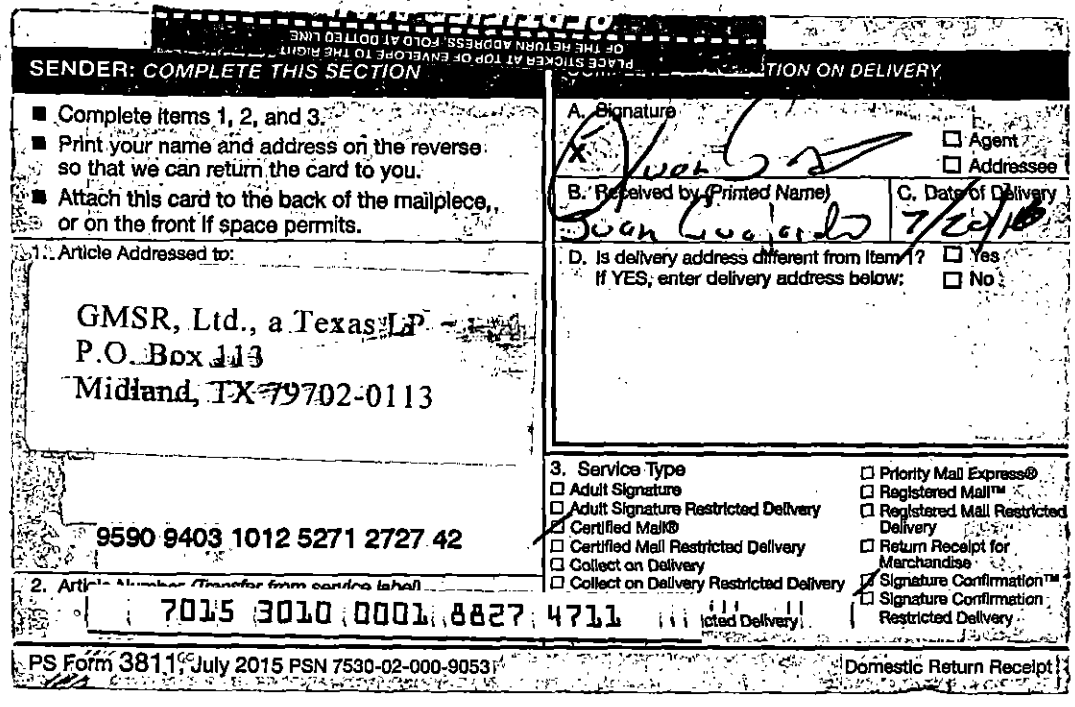
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

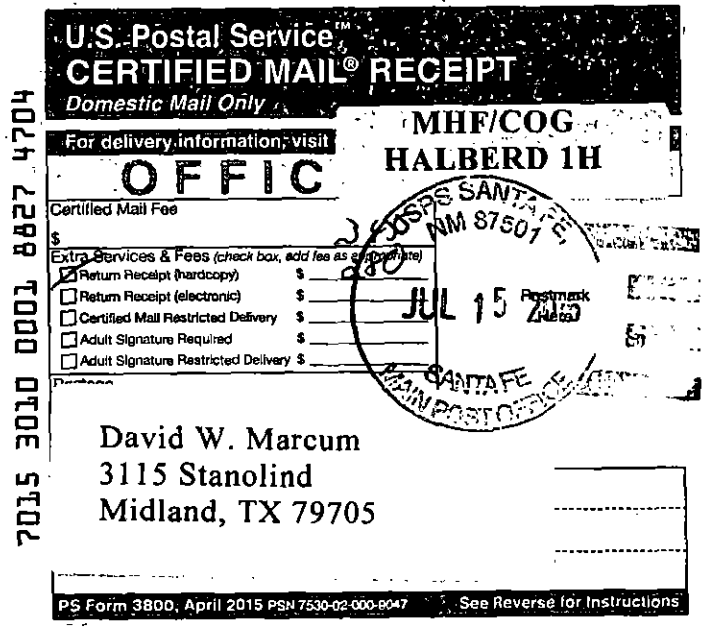
USPS 73120

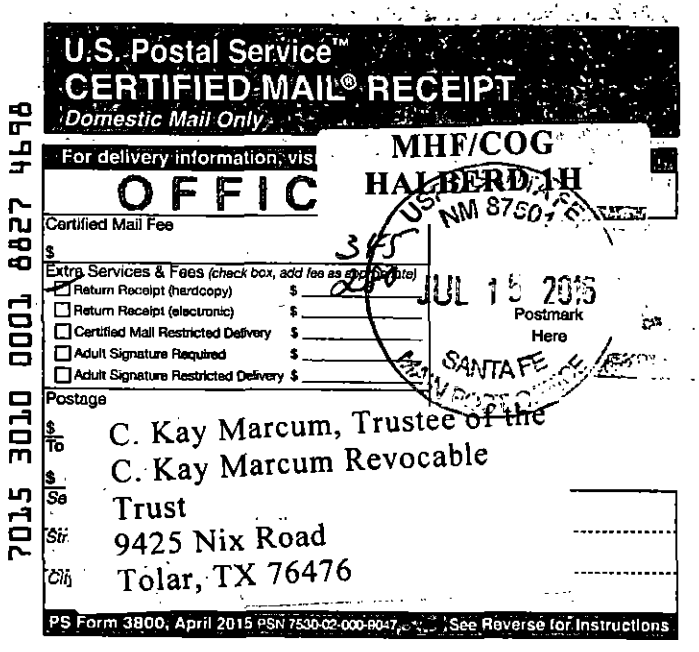
3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered 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


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit
OFFIC
MHF/COG
HALBERD 1H
Certified Mail Fee
$
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
GMSR, Ltd., a Texas LP
P.O. Box 113
Midland, TX 79702-0113
USPS SANTA FE NM 87501
JUL 15
SANTA FE MAIN POST OFFICE
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7015 3010 0001 8827 4711


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.
A. Signature
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
7/20/15
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No
1. Article Addressed to:
GMSR, Ltd., a Texas LP
P.O. Box 113
Midland, TX 79702-0113
9590 9403 1012 5271 2727 42
2. Article Number (Transfer from service label)
7015 3010 0001 8827 4711
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


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit
OFFIC
MHF/COG
HALBERD 1H
Certified Mail Fee
$
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
David W. Marcum
3115 Stanolind
Midland, TX 79705
USPS SANTA FE NM 87501
JUL 15
SANTA FE MAIN POST OFFICE
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7015 3010 0001 8827 4704



7015 3010 0001 8827 4678

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H
USPS
NM 87501

Certified Mail Fee
$ 3.45

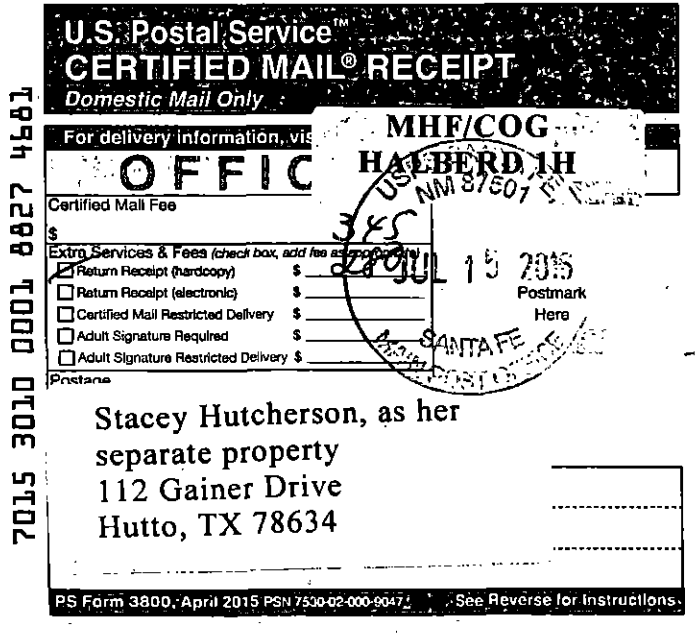
Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.70
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

JUL 15 2015
Postmark Here
SANTA FE

Postage
$

To C. Kay Marcum, Trustee of the
C. Kay Marcum Revocable
Se Trust
Str 9425 Nix Road
City Tolar, TX 76476

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



7015 3010 0001 8827 4661

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

For delivery information, vis

OFFIC

MHF/COG
HALBERD 1H
USPS
NM 87501

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- [x] Return Receipt (hardcopy) $ 2.70
- [ ] Return Receipt (electronic) $
- [ ] Certified Mail Restricted Delivery $
- [ ] Adult Signature Required $
- [ ] Adult Signature Restricted Delivery $

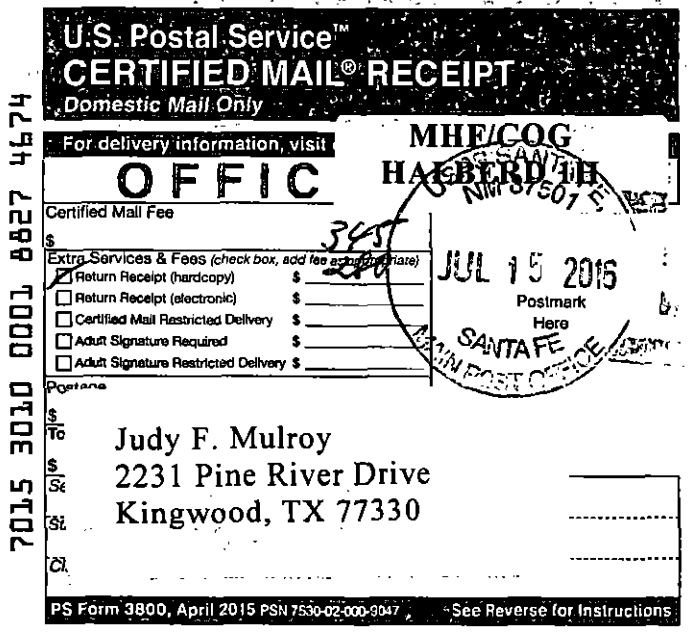
JUL 15 2015
Postmark Here
SANTA FE

Postage
$

Stacey Hutcherson, as her
separate property
112 Gainer Drive
Hutto, TX 78634

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

RETURNED



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

For delivery information, visit
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

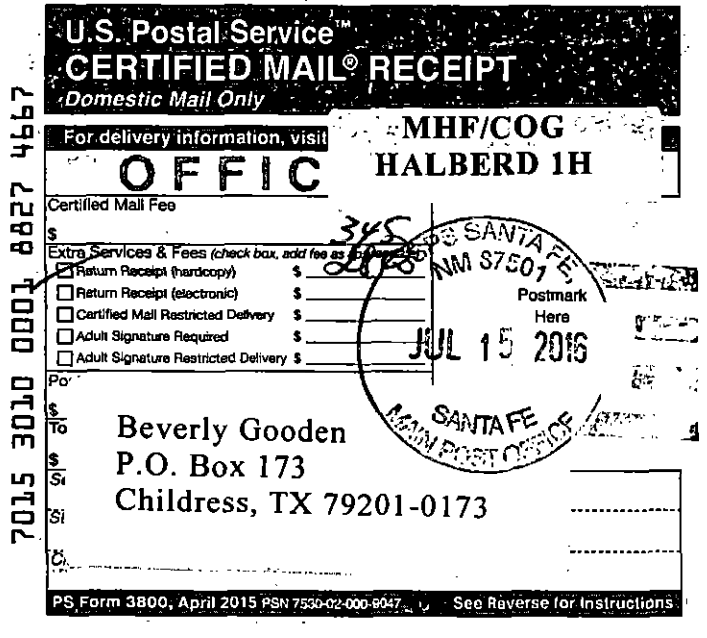
Postage
$

JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE
PO SANTA FE NM 87501

To
Judy F. Mulroy
2231 Pine River Drive
Kingwood, TX 77330

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

7015 3010 0001 8827 4674



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

For delivery information, visit
OFFIC

MHF/COG
HALBERD 1H

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
☑ Return Receipt (hardcopy) $ 2.30
☐ Return Receipt (electronic) $
☐ Certified Mail Restricted Delivery $
☐ Adult Signature Required $
☐ Adult Signature Restricted Delivery $

Postage
$

JUL 15 2016
Postmark Here
SANTA FE MAIN POST OFFICE
PO SANTA FE NM 87501

To
Beverly Gooden
P.O. Box 173
Childress, TX 79201-0173

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

7015 3010 0001 8827 4667