

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

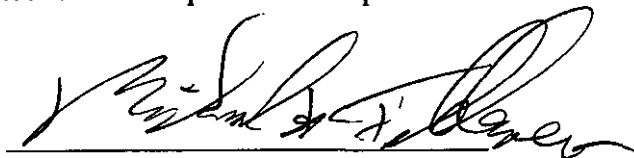
APPLICATION OF CONOCOPHILLIPS COMPANY TO MAKE PERMANENT THE AUTHORITY GRANTED UNDER ADMINISTRATIVE ORDER WFX-945 TO INJECT WATER, CARBON DIOXIDE AND PRODUCED GAS FOR ENHANCED OIL RECOVERY WITHIN THE EAST VACUUM GRAYBURG-SAN ANDRES UNIT; TO AMEND THE SPECIAL RULES ENACTED UNDER ORDER R-5897 GOVERNING ENHANCED OIL RECOVERY OPERATIONS WITHIN THE UNIT; TO ALLOW ADMINISTRATIVE APPROVAL OF ADDITIONAL INJECTION WELLS WITHIN THE UNIT WITHOUT FURTHER NOTICE AND HEARING; AND TO CLARIFY THE SURFACE INJECTION PRESSURES AND INJECTION AUTHORITY PREVIOUSLY AUTHORIZED BY THE DIVISION, LEA COUNTY, NEW MEXICO.

**AFFIDAVIT**

CASE NO. 15497

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

Michael H. Feldewert, attorney in fact and authorized representative of ConocoPhillips 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.

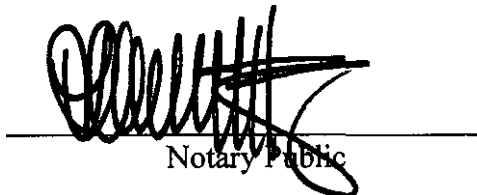


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 25th day of May 2015 by Michael H. Feldewert.



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

  
Notary Public

BEFORE THE OIL CONSERVATION  
DIVISION  
Santa Fe, New Mexico  
Exhibit No. 8  
Submitted by: ConocoPhillips Company Inc.  
Hearing Date: May 25, 2016

**CONOCOPHILLIPS COMPANY  
EAST VACUUM GRAYBURG-SAN ANDRES UNIT**

OBO Inc.  
P.O. Box 22577  
Haileah, FL 33002

Apache Corporation  
ATTN: Land Department  
303 Veterans Airpark Lane STE 3000  
Midland, TX 79705-4561

XTO Energy  
ATTN: Permian Land  
810 Houston Street  
Fort Worth, TX 76102-4701

Cross Timber Energy LLC  
ATTN: Justin Neely  
400 W 7th Street  
Fort Worth, TX 76102-4701

OXY USA WTP Limited Partnership  
C/O Occidental Permian LTD.  
5 Greenway Plaza, Suite 110  
Houston, TX 77046

V-F Petroleum Inc.  
P.O. Box 1889  
Midland, TX 79702

Three Forks Resources LLC  
ATTN: Land Department  
1515 Wazee ST, STE 350  
Denver, CO 80202

Legacy Reserves LP  
ATTN: Land Department  
303 W Wall Street, STE 1800  
Midland, TX 79701

COG Operating LLC  
ATTN: NM Shelf Land Lead  
550 W Texas Ave., STE 100  
Midland, TX 79701

Mewbourne Oil Company  
ATTN: Land Department  
500 W Texas Ave., STE 1020  
Midland, TX 79701

Texon Oil Company, Inc.  
ATTN: Ed Runyan  
P.O. Box 51588  
Midland, TX 79710

Island Oil CO  
c/o J. Thomas Schieffer  
500 Throckmorton, STE 2305  
Fort Worth, TX 76102

Arrington Oil & Gas Operating LLC  
Attn: Land Department  
500 W. Wall Street, STE 300  
Midland, TX 79701

Jetta Operating Company Inc.  
Attn: Land Department  
777 Taylor Street, STE P1  
Fort Worth, TX 76102

Featherstone Development  
Corporation  
Attn: Land Department  
P.O. Box 429  
Roswell, NM 88202

State of New Mexico  
Commissioner of Public Lands  
P.O. Box 1148  
Santa Fe, NM 87501-1148

Joseph J. Kelly  
P.O. Box 310  
Roswell, NM 88202-0310

Magnum Hunter Petroleum Inc.  
ATTN: Outside Operated  
202 S Cheyenne Ave., STE 1000  
Tusla, OK 74103-3001

Marathon Oil Company  
ATTN: Western US Land  
5555 San Felipe Street  
Houston, TX 77056

Pear Resources  
ATTN: Alan Byars  
P.O. Box 11044  
Midland, TX 79702

Slash Exploration Limited  
Partnership  
ATTN: Robert G. Armstrong  
P.O. Box 1973  
Roswell, NM 88202-1973

Vangaurd Operating LLC  
5847 San Felipe, STE 3000  
Houston, TX 77057

Mack Energy Corporation  
ATTN: Land Department  
P.O. Box 960  
Artesia, NM 88210

Diamond S Energy Company  
ATTN: H. Brad Reynolds  
6608 Bryant Irvin Road  
Fort Worth, TX 76132

Chevron U.S.A. Inc.  
ATTN: Land Department  
15 Smith Road  
Midland, TX 79705

RKI Exploration & Production, LLC  
ATTN: Land Department  
210 Park Ave., STE 700  
Oklahoma City, OK 73102

Compass Operating LLC  
ATTN: Land Department  
400 West Illinois Ave., STE 1000  
Midland, TX 79701

**CONOCOPHILLIPS COMPANY**  
**EAST VACUUM GRAYBURG-SAN ANDRES UNIT**

WM Fleming & Neville G. Penrose  
c/o J. Thomas Schieffer  
500 Throckmorton, STE 2305  
Fort Worth, TX 76102

Rice Operating Company  
Attn: Scott Curtis  
112 West Taylor  
Hobbs, NM 88240

Eight Energy, Inc.  
Attn: Percy Engineer  
3300 N A Street, Bldg 8-105  
Midland, TX 79705

Great Western Drilling LTD  
Attn: Land Department  
P.O. Box 1659  
Midland, TX 79702

**HOLLAND & HART LLP**



**Michael H. Feldewert**  
Recognized Specialist in the Area of Natural  
Resources - Oil and Gas Law - New Mexico  
Board of Legal Specialization  
mfeldewert@hollandhart.com

May 6, 2016

**VIA CERTIFIED MAIL**  
**CERTIFIED RECEIPT REQUESTED**

**TO: ALL AFFECTED PARTIES:**

**Re: Case No. 15497: Application of ConocoPhillips Company to Make Permanent the Authority Granted Under Administrative Order WFX-945 to Inject Water, Carbon Dioxide and Produced Gas for Enhanced Oil Recovery Within the Est Vacuum Grayburg-San Andres Unit; To Amend The Special Rules Enacted Under Order R-5897 Governing Enhanced Oil Recovery Operations Within the Unit Without Further Notice and Hearing; And to Clarify The Surface Injection Pressures And Injection Authority Previously Authorized by the Division, Lea County, New Mexico.**

Ladies & Gentlemen:

This letter is to advise you that ConocoPhillips Company, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on May 26, 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 that intend to present evidence are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four business 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 Susan B. Maunder, (281) 206-5281 or Susan.B.Maunder@conocophillips.com

Sincerely,

Michael H. Feldewert

**ATTORNEYS FOR CONOCOPHILLIPS COMPANY, INC.**

**Holland & Hart LLP**

Phone [505] 988-4421 Fax [505] 983-6043 [www.hollandhart.com](http://www.hollandhart.com)

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

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

7015 3010 0001 8827 2571

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

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

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 \$

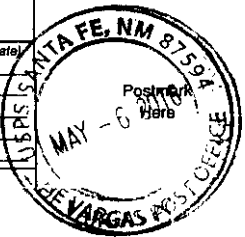
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

OBO Inc.  
 P.O. Box 22577  
 Haileah, FL 33002

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:

OBO Inc.  
 P.O. Box 22577  
 Haileah, FL 33002

9590 9401 0128 5225 9664 94

7015 3010 0001 8827 2571

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 5/10/16

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

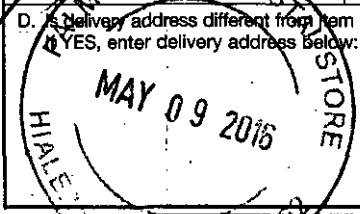
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

☐ Insured Mail ☐ Restricted Delivery

☐ Insured Mail Restricted Delivery (over \$500)



7015 3010 0001 8827 0744

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

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

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 \$

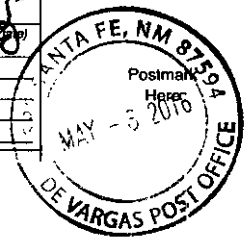
☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Apache Corporation  
 ATTN: Land Department  
 303 Veterans Airpark Lane STE 3000  
 Midland, TX 79705-4561

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:

Apache Corporation  
 ATTN: Land Department  
 303 Veterans Airpark Lane STE 3000  
 Midland, TX 79705-4561

9590 9401 0128 5225 9665 00

7015 3010 0001 8827 0744

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 5/10/16

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

☐ Insured Mail ☐ Restricted Delivery

☐ Insured Mail Restricted Delivery (over \$500)

7015 3010 0001 8827 0751

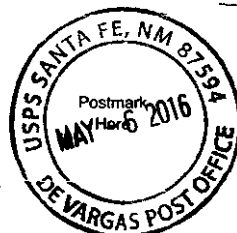
**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

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 \$ \_\_\_\_\_



**XTO Energy**  
**ATTN: Permian Land**  
**810 Houston Street**  
**Fort Worth, TX 76102-4701**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 8827 0768

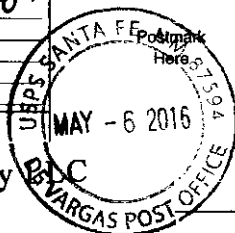
**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

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

**Cross Timber Energy LLC**  
**ATTN: Justin Neely**  
**400 W 7th Street**  
**Fort Worth, TX 76102-4701**

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:

**XTO Energy**  
**ATTN: Permian Land**  
**810 Houston Street**  
**Fort Worth, TX 76102-4701**

4590 9401 0128 5225 9665 17

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0751

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Jeannine Cox*

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

MAY 10 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  
☐ Mail Restricted Delivery

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

**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:

**Cross Timber Energy LLC**  
**ATTN: Justin Neely**  
**400 W 7th Street**  
**Fort Worth, TX 76102-4701**

9590 9401 0128 5225 9665 24

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0768

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

*Wendy Shults*

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5/10

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 Restricted Delivery

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

Domestic Return Receipt

7015 3010 0001 8827 0775

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

For delivery information, visit **OFFIC**

MHF/COP  
 EVGSAU

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.80☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

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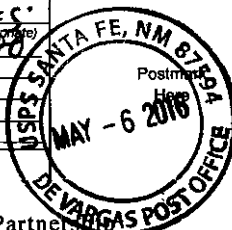
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OXY USA WTP Limited Partners  
 C/O Occidental Permian LTD.  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77046

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



7015 3010 0001 8827 0782

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

For delivery information, visit **OFFIC**

MHF/COP  
 EVGSAU

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.80☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

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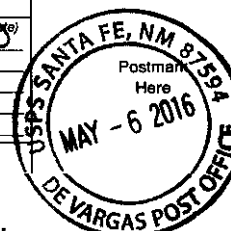
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V-F Petroleum Inc.  
 P.O. Box 1889  
 Midland, TX 79702

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:

V-F Petroleum Inc.  
 P.O. Box 1889  
 Midland, TX 79702

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0782

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Andrea Hinder☐ Agent☐ Addressee

B. Received by (Printed Name)

Andrea Hinder

C. Date of Delivery

5-16-16

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

3. Service Type

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

Domestic Return Receipt

7015 3010 0001 8827 0799

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

**OFFIC**
**MHF/COP  
EVGSAU**

Certified Mail Fee

\$

Extra Services &amp; 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

\$

To:

\$

Ser:

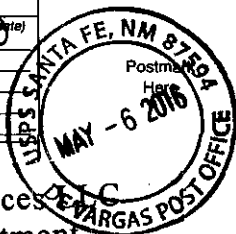
City:

City:

Three Forks Resources LLC  
ATTN: Land Department  
1515 Wazee ST, STE 350  
Denver, CO 80202

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



7015 3010 0001 8827 0805

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

**OFFIC**
**MHF/COP  
EVGSAU**

Certified Mail Fee

\$

Extra Services &amp; 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

\$

To:

\$

Ser:

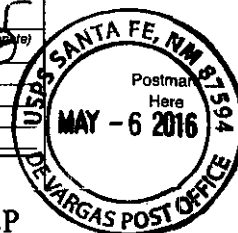
City:

City:

Legacy Reserves LP  
ATTN: Land Department  
303 W Wall Street, STE 1800  
Midland, TX 79701

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

1. 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:

Three Forks Resources LLC  
ATTN: Land Department  
1515 Wazee ST, STE 350  
Denver, CO 80202

9590 9401 0128 5225 9665 55

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0799

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Shen Jille*☐ Agent☐ Addressee

B. Received by (Printed Name)

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☐ Insured Mail☐ Mail Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

(30)

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:

Legacy Reserves LP  
ATTN: Land Department  
303 W Wall Street, STE 1800  
Midland, TX 79701

9590 9401 0128 5225 9665 62

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0805

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

## 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☐ Insured Mail☐ Mail Restricted Delivery☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☒ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 3010 0001 8827 0812

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

For delivery information, visit **OFFIC** **MHF/COP EVGSAU**

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 \$

**COG Operating LLC**  
**ATTN: NM Shelf Land Lead**  
**550 W Texas Ave., STE 100**  
**Midland, TX 79701**

USPS SANTA FE, NM 87594  
 MAY - 6 2016  
 DE VARGAS POST OFFICE

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7015 3010 0001 8827 0829

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

For delivery information, visit **OFFIC** **MHF/COP EVGSAU**

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 \$

**Mewbourne Oil Company**  
**ATTN: Land Department**  
**500 W Texas Ave., STE 1020**  
**Midland, TX 79701**

USPS SANTA FE, NM 87594  
 MAY - 8 2016  
 DE VARGAS POST OFFICE

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

**COG Operating LLC**  
**ATTN: NM Shelf Land Lead**  
**550 W Texas Ave., STE 100**  
**Midland, TX 79701**

9590 9401 0128 5225 9665 79

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0812

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☒ Addressee

B. Received by (Printed Name) **EM AURINGER** C. Date of Delivery **5/10/16**

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

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

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

**Mewbourne Oil Company**  
**ATTN: Land Department**  
**500 W Texas Ave., STE 1020**  
**Midland, TX 79701**

9590 9401 0128 5225 9665 86

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0829

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☒ Addressee

B. Received by (Printed Name) **Alexandra Kirksey** C. Date of Delivery **5-13**

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

(over \$500)

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

7015 3010 0001 8827 0836

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

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee \$ 3.45

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 \$

**Texon Oil Company, Inc.**  
**ATTN: Ed Runyan**  
**P.O. Box 51588**  
**Midland, TX 79710**

USPS SANTA FE, NM 87504  
 MAY -6 2016  
 DE VARGAS POST OFFICE

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:  
**Texon Oil Company, Inc.**  
**ATTN: Ed Runyan**  
**P.O. Box 51588**  
**Midland, TX 79710**

9590 9401 0128 5225 9665 93

2. Article Number (Transfer from service label)  
**7015 3010 0001 8827 0836**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Laurie Kidwell* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
**Laurie Kidwell**

C. Date of Delivery  
**5-10-16**

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No  
**P.O. Box 51588**

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

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

7015 3010 0001 8827 0140

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

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee \$ 3.45

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 \$

**Island Oil CO**  
**c/o J. Thomas Schieffer**  
**500 Throckmorton, STE 2305**  
**Fort Worth, TX 76102**

USPS SANTA FE, NM 87504  
 MAY -6 2016  
 DE VARGAS POST OFFICE

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:  
**Island Oil CO**  
**c/o J. Thomas Schieffer**  
**500 Throckmorton, STE 2305**  
**Fort Worth, TX 76102**

9590 9401 0132 5225 4697 76

2. Article Number (Transfer from service label)  
**7015 3010 0001 8827 0140**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Jocelyn Sandoval* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
**Jocelyn Sandoval**

C. Date of Delivery  
**5-9-16**

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

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

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

7015 3010 0001 8827 0157

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.80

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

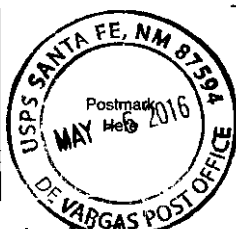
\$

Sent To

Street and

City, State

Arrington Oil & Gas Operating LLC  
 Attn: Land Department  
 500 W. Wall Street, STE 300  
 Midland, TX 79701



PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 8827 0164

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45

☐ Return Receipt (electronic) \$ 2.80

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Post

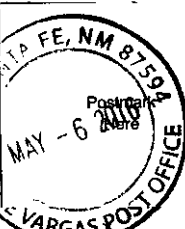
\$

Sent To

Street and

City, State

Jetta Operating Company Inc.  
 Attn: Land Department  
 777 Taylor Street, STE P1  
 Fort Worth, TX 76102



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:

Arrington Oil & Gas Operating LLC  
 Attn: Land Department  
 500 W. Wall Street, STE 300  
 Midland, TX 79701

9590 9401 0132 5225 4697 69

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0157

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ 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 Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation
- ☐ Signature Confirmation Restricted Delivery

(over 3500)

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:

Jetta Operating Company Inc.  
 Attn: Land Department  
 777 Taylor Street, STE P1  
 Fort Worth, TX 76102

9590 9401 0132 5225 4697 52

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0164

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ 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 Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation
- ☐ Signature Confirmation Restricted Delivery

(over 3500)

Domestic Return Receipt

7015 3010 0001 8827 0171

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

OFFIC

MHF/COP  
EVGSAU

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.80☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage

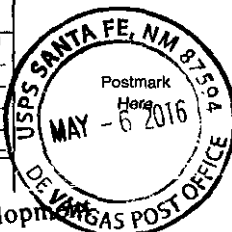
\$

Sent To

Street and Ap.

City, State, ZIP

PS Form 380

 Featherstone Development  
 Corporation  
 Attn: Land Department  
 P.O. Box 429  
 Roswell, NM 88202


See Reverse for Instructions

7015 3010 0001 8827 0188

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

OFFIC

MHF/COP  
EVGSAU

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.80☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

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 State of New Mexico  
 Commissioner of Public Lands  
 P.O. Box 1148  
 Santa Fe, NM 87501-1148


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:

 Featherstone Development  
 Corporation  
 Attn: Land Department  
 P.O. Box 429  
 Roswell, NM 88202

9590 9401 0132 5225 4697 45

## 2. Article Number (Transfer from service label)

7015 3010 0001 8827 0171

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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X Monica

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Monica

## C. Date of Delivery

MAY 6 2016

## D. Is delivery address different from item 1?

If YES, enter delivery address below:

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

9590 9401 0132 5225 4697 38

## 2. Article Number (Transfer from service label)

7015 3010 0001 8827 0188

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

Domestic Return Receipt

7015 3010 0001 8827 0195

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

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

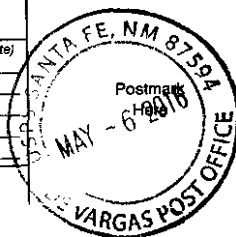
Certified Mail Fee \$ 3.45  
2.80

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 \$  
 Total \$  
 Sent To \$  
 Street \$  
 City \$

Joseph J. Kelly  
 P.O. Box 310  
 Roswell, NM 88202-0310

PS Form 3800, April 2015 PSN 7530-02-000-9053



**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 Joseph J. Kelly  
 P.O. Box 310  
 Roswell, NM 88202-0310

2. Article Number (Transfer from service label)  
 7015 3010 0001 8827 0195

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) J. Kelly C. Date of Delivery MAY 10 2016

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

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

9590 9401 0132 5225 4697 21

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

7015 3010 0001 8827 0201

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

For delivery information, visit **OFFIC**

**MHF/COP**  
**EVGSAU**

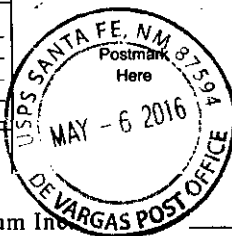
Certified Mail Fee \$ 3.45  
2.80

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 \$  
 Total \$  
 Sent To \$  
 Street \$  
 City \$

Magnum Hunter Petroleum Inc.  
 ATTN: Outside Operated  
 202 S Cheyenne Ave., STE 1000  
 Tulsa, OK 74103-3001

PS Form 3800, April 2015 PSN 7530-02-000-9053



**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:  
 Magnum Hunter Petroleum Inc.  
 ATTN: Outside Operated  
 202 S Cheyenne Ave., STE 1000  
 Tulsa, OK 74103-3001

2. Article Number (Transfer from service label)  
 7015 3010 0001 8827 0201

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature JUSTIN WALLACE ☐ Agent ☐ Addressee

B. Received by (Printed Name) JUSTIN WALLACE C. Date of Delivery 5-10-16

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

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

9590 9401 0132 5225 4697 14

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

7015 3010 0001 8827 0218

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

**OFFIC**MHF/COP  
EVGSAU

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.00☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent To

Street

City

State

City

Marathon Oil Company  
ATTN: Western US Land  
5555 San Felipe Street  
Houston, TX 77056



PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 8827 0225

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit

**OFFIC**MHF/COP  
EVGSAU

Certified Mail Fee

\$

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

☒ Return Receipt (hardcopy) \$ 3.45☐ Return Receipt (electronic) \$ 2.00☐ Certified Mail Restricted Delivery \$☐ Adult Signature Required \$☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent To

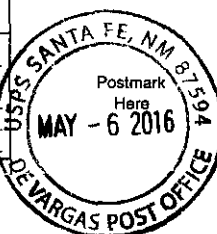
Street

City

State

City

Pear Resources  
ATTN: Alan Byars  
P.O. Box 11044  
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:

Marathon Oil Company  
ATTN: Western US Land  
5555 San Felipe Street  
Houston, TX 77056

9590 9401 0132 5225 4697 07

## 2. Article Number (Transfer from service label)

7015 3010 0001 8827 0218

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

x Marcos Camay ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

Marcos Camay 5-11-16

## C. Date of Delivery

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

## 3. Service Type

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

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

Domestic Return Receipt

7015 3010 0001 8827 0232

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

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

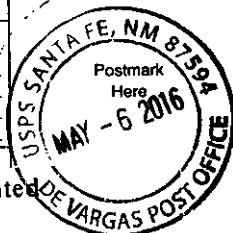
\$ Total P

Slash Exploration Limited  
 Partnership  
 ATTN: Robert G. Armstrong  
 P.O. Box 1973  
 Roswell, NM 88202-1973

City, State

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:

Slash Exploration Limited  
 Partnership  
 ATTN: Robert G. Armstrong  
 P.O. Box 1973  
 Roswell, NM 88202-1973

9590 9401 0132 5225 4696 84

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0232

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Marina Mahan

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

MARINA MAHAN

C. Date of Delivery

5/16/16

D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below:

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

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

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

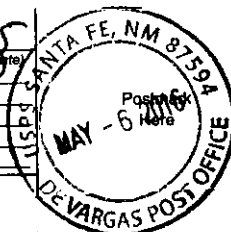
\$ Total P

Vangaurd Operating LLC  
 5847 San Felipe, STE 3000  
 Houston, TX 77057

City, State

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:

Vangaurd Operating LLC  
 5847 San Felipe, STE 3000  
 Houston, TX 77057

9590 9401 0132 5225 4698 75

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0249

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X [Signature]

☐ Agent  
☒ Addressee

B. Received by (Printed Name)

5/16/16

C. Date of Delivery

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

3. Service Type

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

Restricted Delivery

Domestic Return Receipt

7015 3010 0001 8827 0256

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage

\$

Total

\$

Sent To

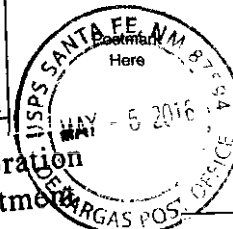
Street

City, St.

**Mack Energy Corporation**  
**ATTN: Land Department**  
**P.O. Box 960**  
**Artesia, NM 88210**

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:

**Mack Energy Corporation**  
**ATTN: Land Department**  
**P.O. Box 960**  
**Artesia, NM 88210**

9590 9401 0132 5225 4698 68

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0256

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Kathy Beauregard*

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

**KATHY BEAUREGARD**

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

(over \$500)

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:

**Diamond S Energy Company**  
**ATTN: H. Brad Reynolds**  
**6608 Bryant Irvin Road**  
**Fort Worth, TX 76132**

9590 9401 0132 5225 4698 51

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0263

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Frank Kahn*

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

**Frank Kahn**

C. Date of Delivery

**5/10/16**

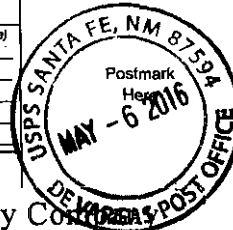
D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

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

(over \$500)

Domestic Return Receipt



7015 3010 0001 8827 0263

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_

Postage

\$

Total Po

\$

Sent To

Street

City, St.

**Diamond S Energy Company**  
**ATTN: H. Brad Reynolds**  
**6608 Bryant Irvin Road**  
**Fort Worth, TX 76132**

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 8827 0270

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

For delivery information, visit

**OFFIC**MHF/COP  
EVGSAU

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Post

\$

Sent To

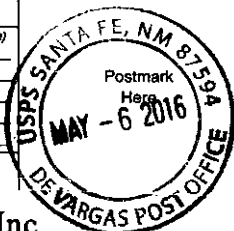
Street and

City, State

Chevron U.S.A. Inc.  
 ATTN: Land Department  
 15 Smith Road  
 Midland, TX 79705

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



7015 3010 0001 8827 0287

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

For delivery information, visit

**OFFIC**MHF/COP  
EVGSAU

Certified Mail Fee

\$

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

- ☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$ 2.80  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total F

\$

Sent To

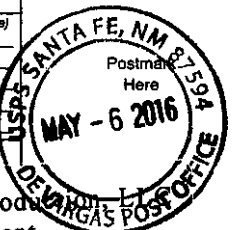
Street

City, St

RKI Exploration & Production  
 ATTN: Land Department  
 210 Park Ave., STE 700  
 Oklahoma City, OK 73102

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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

## 1. Article Addressed to:

Chevron U.S.A. Inc.  
 ATTN: Land Department  
 15 Smith Road  
 Midland, TX 79705

4590 9401 0132 5225 4698 44

## 2. Article Number (Transfer from service label)

7015 3010 0001 8827 0270

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

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

*Theresa Beery (mailing)*  
 B. Received by (Printed Name)

☐ Agent  
☒ Addressee

C. Date of Delivery

5/10/16

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

## 3. Service Type

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

(over \$500)

Domestic Return Receipt

7015 3010 0001 8827 0294

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

For delivery information, visit **OFFICIAL**

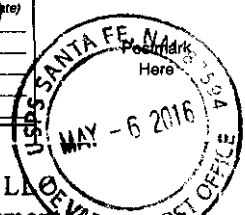
**MHF/COP**  
**EVGSAU**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total P \$  
 Sent To \$  
 Street & \$  
 City, State

Compass Operating LLC  
 ATTN: Land Department  
 400 West Illinois Ave., STE 1000  
 Midland, TX 79701

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



7015 3010 0001 8827 0300

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

For delivery information, visit **OFFICIAL**

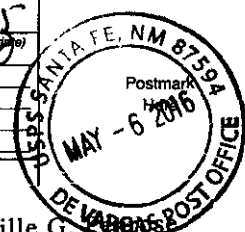
**MHF/COP**  
**EVGSAU**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 3.45  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total P \$  
 Sent To \$  
 Street & \$  
 City, State

WM Fleming & Neville G.  
 c/o J. Thomas Schieffer  
 500 Throckmorton, STE 2305  
 Fort Worth, TX 76102

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:**

Compass Operating LLC  
 ATTN: Land Department  
 400 West Illinois Ave., STE 1000  
 Midland, TX 79701

9590 9401 0132 5225 4698 20

**2. Article Number (Transfer from service label)**

7015 3010 0001 8827 0294

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

☒  ☐ Agent  
☐ Addressee

**B. Received by (Printed Name)**

**C. Date of Delivery**

5/10/16

**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

RETURNED

7015 3010 0001 8827 0317

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

For delivery information, visit  
**OFFIC**

**MHF/COP**  
**EVGSAU**

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 \$ \_\_\_\_\_

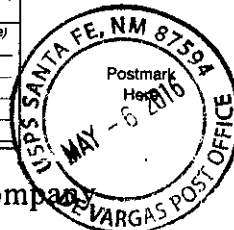
Postage  
 \$ \_\_\_\_\_

**Total Post**  
 \$ \_\_\_\_\_

Sent To  
 Street and  
 City, State

Rice Operating Company  
 Attn: Scott Curtis  
 112 West Taylor  
 Hobbs, NM 88240

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:

Rice Operating Company  
 Attn: Scott Curtis  
 112 West Taylor  
 Hobbs, NM 88240

9590 9401 0132 5225 4698 06

## 2. Article Number (Transfer from service label)

7015 3010 0001 8827 0317

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X Beggs Bonds

- ☐
- Agent
- 
- ☐
- Addressee

## B. Received by (Printed Name)

Beggs Bonds

## C. Date of Delivery

5-10-16

- 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 3010 0001 8827 0324

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

For delivery information, visit  
**OFFIC**

**MHF/COP**  
**EVGSAU**

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 \$ \_\_\_\_\_

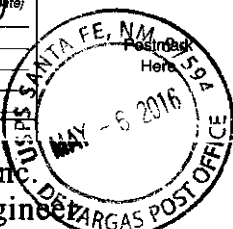
Postage  
 \$ \_\_\_\_\_

**Total Post**  
 \$ \_\_\_\_\_

Sent To  
 Street and  
 City, State

Eight Energy, Inc.  
 Attn: Percy Engineer  
 3300 N A Street, Bldg 8-105  
 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:

Eight Energy, Inc.  
 Attn: Percy Engineer  
 3300 N A Street, Bldg 8-105  
 Midland, TX 79705

9590 9401 0132 5225 4697 90

## 2. Article Number (Transfer from service label)

7015 3010 0001 8827 0324

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X PE

- ☐
- Agent
- 
- ☐
- Addressee

## B. Received by (Printed Name)

PE

## C. Date of Delivery

5/10/16

- 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 3010 0001 8827 0331

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

For delivery information, visit

**OFFIC**

**MHF/COP**  
**EVGSAU**

Certified Mail Fee

\$ 3.45  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

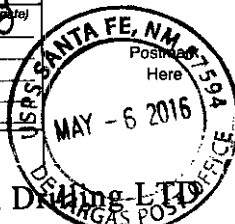
\$  
 Total Postage

Sent To

Street and A

City, State, Z

**Great Western Drilling LTD**  
**Attn: Land Department**  
**P.O. Box 1659**  
**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:

**Great Western Drilling LTD**  
**Attn: Land Department**  
**P.O. Box 1659**  
**Midland, TX 79702**

9590 9401 0132 5225 4697 83

2. Article Number (Transfer from service label)

7015 3010 0001 8827 0331

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Eric M. [Signature]*

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*Eric M. [Signature]*

C. Date of Delivery

*5-16-16*

☐ 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

Domestic Return Receipt