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

APPLICATION OF MATADOR PRODUCTION COMPANY TO RE-OPEN CASE NO. 14932 TO POOL THE INTERESTS OF ADDITIONAL MINERAL INTEREST OWNERS UNDER THE TERMS OF COMPULSORY POOLING ORDER R-13666, EDDY COUNTY, NEW MEXICO.

CASE NO. 14932 (Re-Opened)

AFFIDAVIT

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

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

Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 26th day of October 2016 by Jordan L. Kessler.

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

Notary Public

BEFORE THE OIL CONVERSATION DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: MATADOR PRODUCTION CO.
Hearing Date: October 27, 2016

MATADOR – MARRA WELL NO. 1

POOLED PARTIES

Amy Winningham
1038 Spruce Street
Lake Oswego, OR 97034

Anastacia R. Blanco
713 West Irvin
Carlsbad, NM 88220

Anna Henderson
4602 24th St, Apt 219
Phoenix, AZ 85016

Audra Burton
1408 Allan
Carlsbad, NM 88220

Beverly Ralph
1907 South Fifth Street
Leavenworth, KS 66048

Bill C. Ruiz
765 North Columbia
Reedley, CA 93654

Bill C. Ruiz
P.O. Box 161
Sultana, CA 93666

Billye Ramsey Johnston
9415 Forest Hills Pl.
Dallas, TX 75248

Brent A. Nearhood
821 South Taylor
El Dorado, KS 67042

Charlotte E. Cook
Post Office Box 7480
Columbia, MO 65205

Danny O. Florez and Alex O. Florez, as joint
tenants with right of survivorship
1505 Bryan Circle
Carlsbad, NM 88220

David Huffer
c/o Jeanette, Carmen, Michael, and Joy Huffer
717 St. Charles Avenue
New Orleans, LA 70017

David Huffer
c/o George Huffer
1473 Royal Palm Dr.
Slidell, LA 70458

Dela Inez Masterpolito
2650 Hillsview Ave.
Fresno, CA 93720

Donald Bruce Sooby
700 Seventh Street N
Great Falls, MT 59401

Dr. John Sperling
1427 North 3rd St
Phoenix, AZ 85004

Edna McNama Milland
409 Western Ave, #3
Glendale, CA 91201

Esmera R. Carrasco
c/o James W. Klipstine, Jr.
1601 N. Turner St. #400
Hobbs, NM 88240

Estate of David L. Barnes, Deceased
3201 Riverpark Drive, #1230
Fort Worth, TX 76116

Estate of Elizabeth McNama Scott, Deceased
c/o Shirley Heil
56525 Nelson
Yucca Valley, CA 92284

Estate of Elsie Warren
2826 S. 8th Terrace
Kansas City, KS 66103

Estate of Lena Dunn
c/o John R. Rogers, Jr
1212 E. 27th
Farmington, NM 87401

Estate of M. F. Fraley, Deceased
c/o Mark Fraley
344 Northpointe Parkway
Jackson, MS 39211

Estate of Max D. Owen
c/o F. W. Owen
16 Sail Court
Sacramento, CA 95831

Estate of Ruth Edna Duncan
c/o William T. Duncan
1658 Wild Pine Way
Reston, VA 20194-5600

Evelyn G. Cornwell
P.O. Box 314
Disney, OK 74340

Franklin Charles Owen
1774 Route 73
Keene Valley, NY 12943

Geraldine R. Lyons
1287 Siesta Ct.
Minden, NV 89423

H. B. Amerine
Estate of H.B. Amerine
c/o Terry Amerine
2316 W. Purdue
Enid, OK 73703

Helen Margaret McCabe
c/o F. W. Owen
16 Sail Court
Sacramento, CA 95831

Herbert McNama
2415 11th, #114
Everett, WA 98201

Hope A Bergo, fka Hope A. Bergo
24962 Hon Ave
Laguna Hills, CA 92653

Jack L. Roberts, Jr.
PO Box 2396
Claremore, OK 74018

Jack McNama
56525 Nelson
Yucca Valley, CA 92284

Jacqueline Faith Sperling Dutton
2924 Concord Blvd
Concord, CA 94522

Jacquelyn Jo Sooby
c/o Deanna Poteet
921 Montcrest Dr.
Redding, CA 96003

James Michael Gay
55 Calle San Martin
Santa Fe, New Mexico 87506

Janine Gossett
713 Trevino Court
Carlsbad, NM 88220

Jeanette Huffer
c/o George Huffer
1473 Royal Palm Dr.
Slidell, LA 70458

John Duncan Gay
1038 SW Exmoor Land
Topeka, Kansas 66604

John H. Sooby c/o Deanna Poteet
921 Montcrest Dr.
Redding, CA 96003

Jose A. H. Pino and Agapita R. Pino
141 East Santa Fe
Santa Fe, NM 87501

Joshua Allen Winningham
8406 Southgate Commons Dr.
Charlotte, North Carolina 28277

Kay Stevens
2685 Quebec St.
Denver, CO 80207

L. C. Burkham & Sons
P.O. Box 297
Loving, New Mexico 88256

Lovell F. Hert
1028 Blue Jay Dr
Prescott, AZ 86301

Margaret Elaine Severin Baumgartner
43 W. 720 Nottingham Dr.
Elburn, Illinois 60119

Margurett E. Petschke Revocable Trust as
Amended and Restated May 29, 2001
41346 Carmelo Dr.
W. Clinton Township, MI 48038

Mary Jane Ruiz
758 W. Shaw, #20
Clovis, CA 93612

Mary K. Johnson
3587 NW McCready Dr
Bend, OR 97703-8650

Mary K. Johnson
452 NE Greeley Ave
Bend, OR 97701-4725

Mary K. Johnson
21110 Country Squire Rd
Bend, OR 97701-9760

Michael Lynn Plank, II
6376 N. SR 7
Madison, IN 47250

Mildred Johnson Burden
P.O. Box 368
Ennis, TX 75119

Paul C. Duncan, Jr.
2120 Hackberry Creek Ave.
Yukon, OK 73099

Phyllis P. Guitierrez-Brown, individually
and as Executrix of the Irene Brown Estate
14415 87th Ave, NE
Bothell, WA 98011

Rick Winningham
P.O. Box 1266
Ruidoso, New Mexico 88345

Robert Dean Gaines
c/o Geraldine R. Lyons
1287 Siesta Ct.
Minden, NV 89423

Robert Scott Owen
16 Sail Court
Sacramento, CA 95831

Ronald Johnson
P.O. Box 6161
Lake Charles, LA 70606

Ruth Sperling Brattain
c/o Shirley Heil
56525 Nelson
Yucca Valley, CA 92284

The Heirs or Devisees of Richard Lee Gaines
1397 Jamesville Rd.
Macon, GA 31201

The Heirs or Devisees of Richard Lee Gaines
c/o Geraldine R. Lyons
1287 Siesta Ct.
Minden, NV 89423

Walter L. Jennings and Pat Jennings
1004 N. Alameda
Carlsbad, NM 88220

Wilbur L. Motley
4718 Cindy Pl.
Midland, TX 79707

William Allan Gay
817 Colorado
Houston, Texas 77007

William Allan Gay
110 Main St.
Palacios, Texas 77465

William T. Duncan
1658 Wild Pine Way
Reston, VA 20194-5600

Winifred McNama Drake
c/o Shirley Heil
56525 Nelson
Yucca Valley, CA 92284

Virginia James
4431 Cristy Way
Castro Valley, CA 94546

Carmen Calles
22790 Vermont Street #2
Nayward, CA 94541

Carol Martinez
4431 Cristy Way
Castro Valley, CA 94546

Lilia Campos
P. O. Box 5092
Carlsbad, NM 88220

Antonio Lopez
P. O. Box 96
Malaga, NM 88263

Orlando Campos
20411 Marshall St. #9
Castro Valley, CA 94546

HOLLAND&HART LLP

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

October 7, 2016

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Application of Matador Production Company to Re-Open Case No. 14932 To Pool The Interests Of Additional Mineral Owners Under The Terms Of Compulsory Pooling Order R-13666, Eddy County, New Mexico.
Marra Well No. 1

Ladies & Gentlemen:

This letter is to advise you that Matador Production Company 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 October 27, 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 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 Chris Carleton, at (972) 371-5430 or ccarleton@matadorresources.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR
MATADOR PRODUCTION COMPANY

7015 1520 0002 0438 9175

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

MHF/Matador
Marra Well 1

For delivery information, visi
OFFIC

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 $

2.80

Postage
$
Total P
$
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Street
City, St

Amy Winningham
1038 Spruce Street
Lake Oswego, OR 97034

USPS SANTA DEVI
OCT
Postmark Here
2016
97594
POST OFFICE

PS For 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:

Amy Winningham
1038 Spruce Street
Lake Oswego, OR 97034

9590 9401 0129 5225 0130 29

2. Article Number (Transfer from service label)
7015 1520 0002 0438 9175

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

7016 1370 0000 0803 8930

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MHF/Matador
Marra Well 1

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Certified Mail Fee
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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 $

2.80

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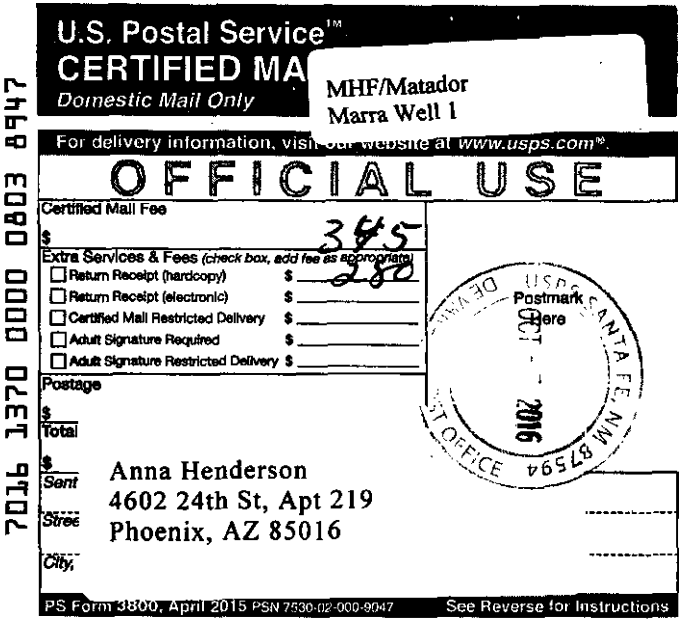
Sent T
Street
City, St

Anastacia R. Blanco
713 West Irvin
Carlsbad, NM 88220

Postmark Here
OCT
2016
POST OFFICE

PS For See Reverse for Instructions


U.S. Postal Service™
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Domestic Mail Only
MHF/Matador
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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)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
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Total
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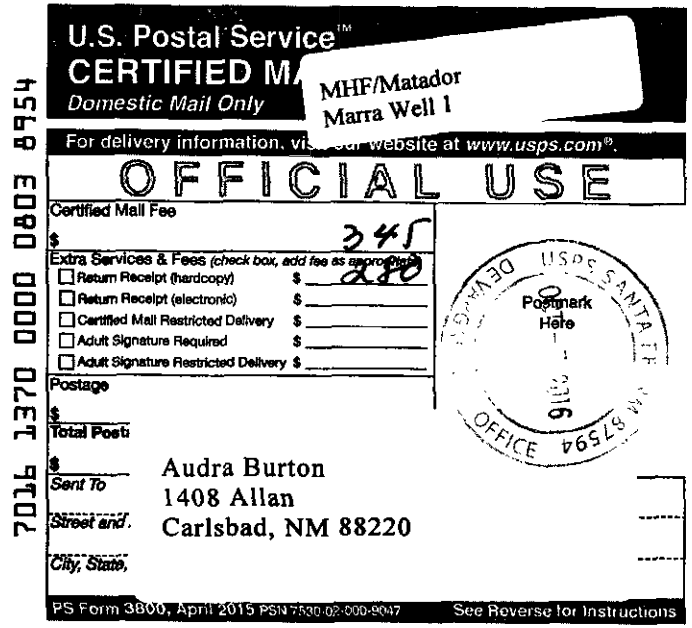
Stree
City,
Anna Henderson
4602 24th St, Apt 219
Phoenix, AZ 85016
USPS SANTA FE, NM 87594
Postmark Here
OCT - 1 2016
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7016 1370 0000 0803 8947


U.S. Postal Service™
CERTIFIED MA
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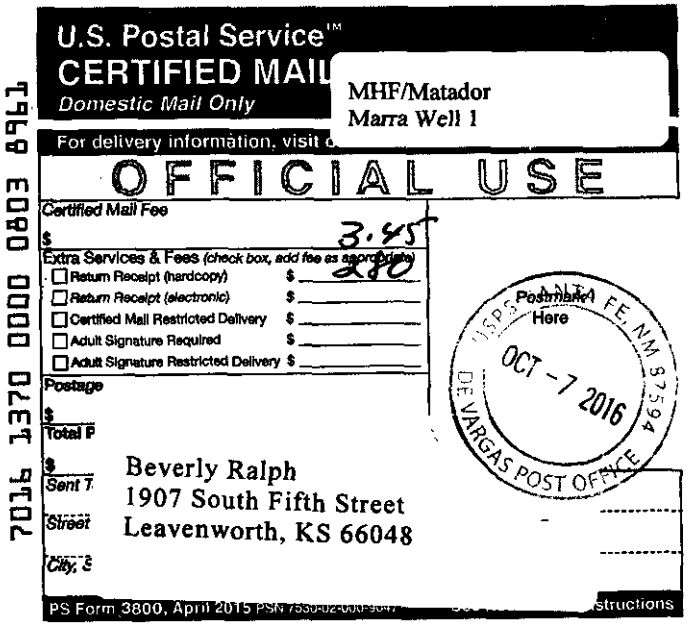
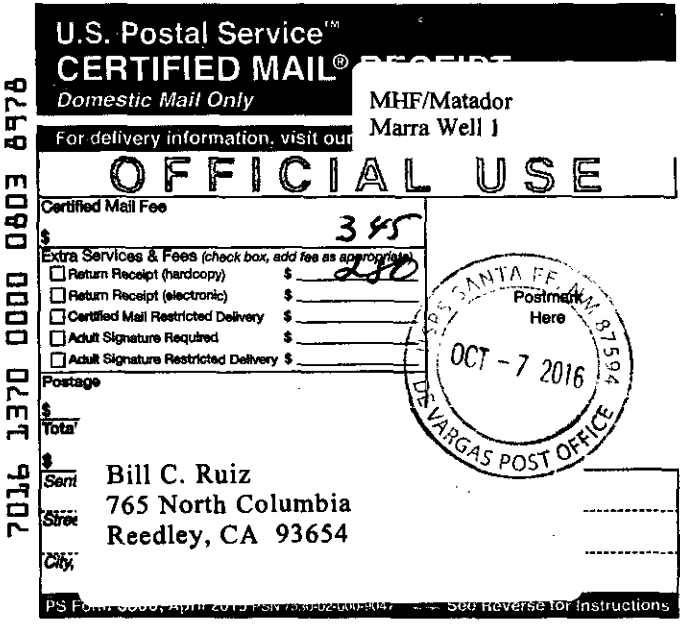
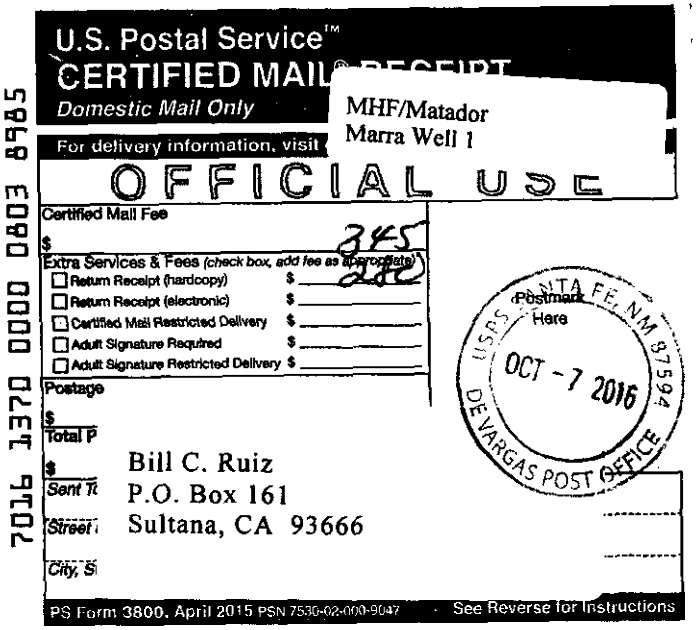
Marra Well 1
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Posti
$
Sent To
Street and
City, State,
Audra Burton
1408 Allan
Carlsbad, NM 88220
USPS SANTA FE, NM 87594
Postmark Here
OCT - 1 2016
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
7016 1370 0000 0803 8954



RETURNED



RETURNED



U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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MHF/Matador
Marra Well 1
OFFICIAL USE
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 $ 2.80
Postage
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Total P
$
Sent T
Street
City, S
Bill C. Ruiz
P.O. Box 161
Sultana, CA 93666
USPS SANTA FE, NM 87594
Postmark Here
OCT -7 2016
DEVARGAS POST OFFICE
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions
7016 1370 0000 0803 8985

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:
Bill C. Ruiz
P.O. Box 161
Sultana, CA 93666

9590 9401 0129 5225 0134 18

2. Article Number (Transfer from service label)
7016 1370 0000 0803 8985

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X
☐ Agent
☐ Addressee
B. Received by (Printed Name)
C. Date of Delivery
10-17-16
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

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

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit
MHF/Matador
Marra Well 1
OFFICIAL USE
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 $ 2.80
Postage
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Total Postag
$
Sent To
Street and Ap
City, State, Zi
Billye Ramsey Johnston
9415 Forest Hills Pl.
Dallas, TX 75248
USPS SANTA FE, NM 87594
Postmark Here
OCT -7 2016
DEVARGAS POST OFFICE
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions
7016 1370 0000 0803 8992

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:
Billye Ramsey Johnston
9415 Forest Hills Pl.
Dallas, TX 75248

9590 9401 0129 5225 0133 26

2. Article Number (Transfer from service label)
7016 1370 0000 0803 8992

COMPLETE THIS SECTION ON DELIVERY
A. Signature
X Billye Johnston
☐ Agent
☐ Addressee
B. Received by (Printed Name)
Billye Johnston
C. Date of Delivery
10/15/16
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

WHITE ROCK STATION USPS DALLAS TX 75218-9998
OCT 15 2016

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

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OFFIC... USE

Certified Mail Fee
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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 Pos
$

Sent To: Brent A. Nearhood
Street an: 821 South Taylor
City, Stat: El Dorado, KS 67042

USPS SANTA FE, NM 87501 — OCT 7 2016 — Postmark Here — DE VARGAS POST OFFICE

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

7016 1370 0000 0803 9005

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:

Brent A. Nearhood
821 South Taylor
El Dorado, KS 67042

9590 9401 0129 5225 0133 19

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9005

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Stanlene Nearhood ☒ Agent ☐ Addressee

B. Received by (Printed Name) Stanlene Nearhood
C. Date of Delivery 10/11/16

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

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Marra Well 1

OFFIC... USE

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 Pos
$

Sent To: Charlotte E. Cook
Street and: Post Office Box 7480
City, State: Columbia, MO 65205

USPS SANTA FE, NM 87501 — Postmark Here — OCT 7 2016 — DE VARGAS POST OFFICE

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

7016 1370 0000 0803 9012

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:

Charlotte E. Cook
Post Office Box 7480
Columbia, MO 65205

9590 9401 0129 5225 0133 02

2. Article Number (Transfer from service label)
7016 1370 0000 0803 9012

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X D Cook ☐ Agent ☐ Addressee

B. Received by (Printed Name) D Cook
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
- ☐ 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

7016 1370 0000 0803 8831

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

For delivery information, vis MHF/Matador
OFFIC Marra Well 1

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 280
- ☐ Return Receipt (electronic) $
- ☑ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage a
$

Sent To: Danny O. Florez & Alex O. Florez,
Street and Apt.: 1505 Bryan Circle
City, State, ZIP4: Carlsbad, NM 88220

USPS SANTA FE NM 87504 Postmark Here OCT - 7 2016 DEVARGAS POST OFFICE

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

7016 1370 0000 0803 8848

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

For delivery information, MHF/Matador
OFFI Marra Well 1

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 280
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total P
$

Sent To: David Huffer
Street a: c/o Jeanette, Carmen, Michael, and Joy Huffer
City, Sta: 717 St. Charles Avenue, New Orleans, LA 70017

USPS SANTA FE NM 87504 Postmark Here OCT 7 2016 DEVARGAS 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:

Danny O. Florez & Alex O. Florez,
1505 Bryan Circle
Carlsbad, NM 88220

9590 9401 0129 5225 0132 89

2. Article Number (Transfer from service label)
7016 1370 0000 0803 8831

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Danny O. Florez ☐ 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

CARLSBAD NM 88220 POSTAL SERVICE OCT 11 2016

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

7016 1370 0000 0803 8855

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

For delivery information, vis

MHF/Matador
Marra Well 1

OFFIC

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 Pos
$

Sent To: David Huffer
Street an: c/o George Huffer
1473 Royal Palm Dr.
City, Sta: Slidell, LA 70458

USPS SANTA FE NM 87594
Postmark Here
2016

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

7016 1370 0000 0803 8862

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

For delivery information, vis

MHF/Matador
Marra Well 1

OFFIC

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 $

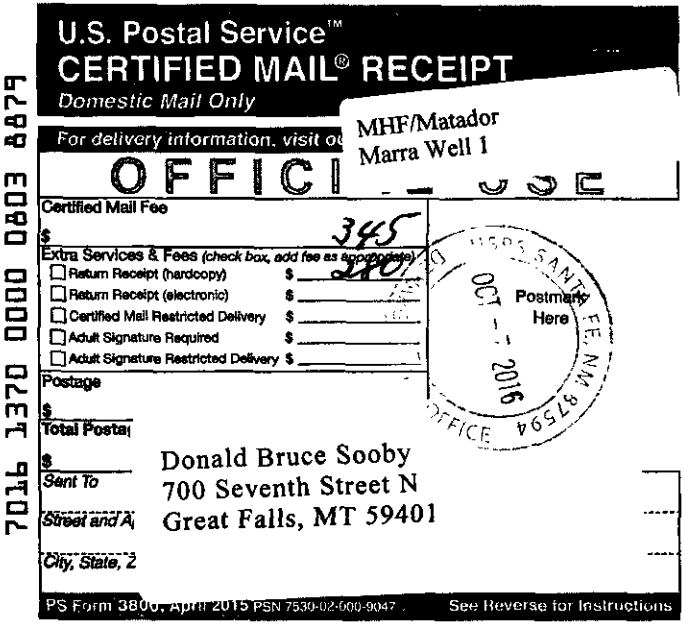
Postage
$

Total Post
$

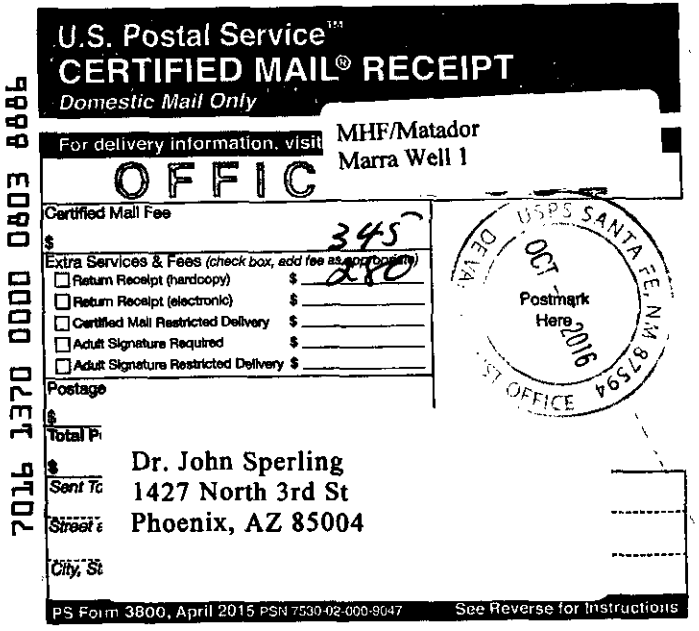
Sent To: Dela Inez Masterpolito
Street and: 2650 Hillsview Ave.
City, State, Fresno, CA 93720

USPS SANTA FE NM 87594
Postmark Here
2016

PS Form 3
See Reverse for Instructions



RETURNED



RETURNED

7016 1370 0000 0803 8893

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

For delivery information, visit

MHF/Matador
Marra Well 1

OFFIC

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
$

Sent T
Street
City, St

Postmark Here
OCT 2016
SANTA FE, NM 87594
OFFICE

Edna McNama Milland
409 Western Ave, #3
Glendale, CA 91201

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

RETURNED

7016 1370 0000 0803 8909

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

For delivery information, visit

MHF/Matador
Marra Well 1

OFFIC USE

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
$

Tot
$
Sen
Stre
City,

Postmark Here
OCT 2016
SANTA FE, NM 87594
OFFICE

Esmera R. Carrasco
c/o James W. Klipstine, Jr.
1601 N. Turner St. #400
Hobbs, NM 88240

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

STICKER AT TOP OF ENVELOPE TO THE RIGHT
PRESS 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:

Esmera R. Carrasco
c/o James W. Klipstine, Jr.
1601 N. Turner St. #400
Hobbs, NM 88240

9590 9401 0129 5225 0133 33

2. 7016 1370 0000 0803 8909

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X B Erwin
☐ Agent
☐ Addressee

B. Received by (Printed Name) B Erwin
C. Date of Delivery 10-14-16

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

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

(over $500)

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

7016 1370 0000 0803 8916

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

For delivery information, vi

OFFIC

MHF/Matador
Marra Well 1

Certified Mail Fee
$ 345

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

Postage
$

Total
$

Sent T

Street

City, S

USPS SANTA FE, NM 87594 OCT - 2016 OFFICE
Postmark Here

Estate of David L. Barnes, Deceased
3201 Riverpark Drive, #1230
Fort Worth, TX 76116

PS Fo April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7016 1370 0000 0803 8923

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

For delivery information, vis

OFFIC

MHF/Matador
Marra Well 1

Certified Mail Fee
$ 345

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 Pos
$

Sent To

Street an

City, Stat

USPS SANTA FE, NM 87594 OCT - 2016 OFFICE
Postmark Here

Estate of Elizabeth McNama Scott, Deceased
c/o Shirley Heil
56525 Nelson
Yucca Valley, CA 92284

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

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

For delivery information, v

OFFIC

MHF/Matador
Marra Well 1

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 $ 2.80

Postage $
Total P $

Sent To Estate of Elsie Warren
Street a 2826 S. 8th Terrace
City, St Kansas City, KS 66103

Postmark Here
OCT 2016
SANTA FE NM 87594
POST OFFICE

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

7016 1370 0000 0803 8749

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

For delivery information: visi

OFFIC

MHF/Matador
Marra Well 1

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 $ 2.80

Postage $
Total Postag $

Sent To Estate of Lena Dunn
Street and Ap c/o John R. Rogers, Jr
City, State, Z 1212 E. 27th
Farmington, NM 87401

Postmark Here
OCT 2016
SANTA FE NM 87594
POST OFFICE

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

7016 1370 0000 0803 8756

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:

Estate of Lena Dunn
c/o John R. Rogers, Jr
1212 E. 27th
Farmington, NM 87401

FARMINGTON NM 87401 USPS OCT 30 2016

9590 9401 0129 5225 0133 86

2. Article Number (Transfer from service label)
7016 1370 0000 0803 8756

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) Kip Hohenberger
C. Date of Delivery 10-17-16

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

PO Box 176
Fruitland, NM 87416

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

7016 1370 0000 0803 8763

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

For delivery information, visit MHF/Matador Marra Well 1
OFFIC

Certified Mail Fee $ 3.45
Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 2.80
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage $
Total $
Sent
Stree
City,

Postmark Here
USPS SANTA FE DELIVERY OCT 2016 OCT OFFICE

Estate of M. F. Fraley, Deceased
c/o Mark Fraley
344 Northpointe Parkway
Jackson, MS 39211

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:

Estate of M. F. Fraley, Deceased
c/o Mark Fraley
344 Northpointe Parkway
Jackson, MS 39211

9590 9401 0129 5225 0133 95

2. Article Number (Transfer from service label) 7016 1370 0000 0803 8763

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Mark Fraley ☐ Agent ☐ Addressee

B. Received by (Printed Name) MARK FRALEY 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

7016 1370 0000 0803 8770

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

For delivery information, visit MHF/Matador Marra Well 1
OFFIC

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 Po
Sent To
Street an
City, Stat

Postmark Here
OCT 2016

Estate of Max D. Owen
c/o F. W. Owen
16 Sail Court
Sacramento, CA 95831

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:

Estate of Max D. Owen
c/o F. W. Owen
16 Sail Court
Sacramento, CA 95831

9590 9401 0129 5225 0134 01

2. Article Number (Transfer from service label) 7016 1370 0000 0803 8770

COMPLETE THIS SECTION ON DELIVERY

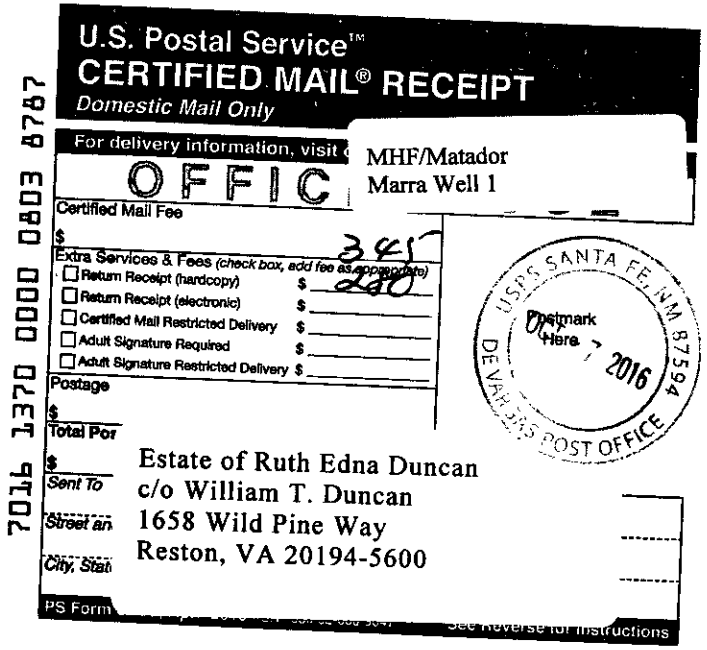
A. Signature
x ☐ Agent ☐ Addressee

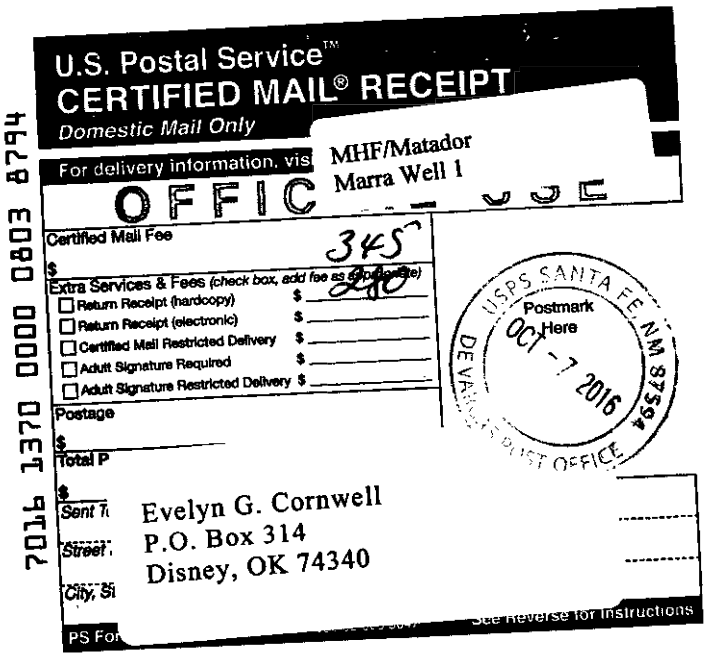
B. Received by (Printed Name) C. Date of Delivery

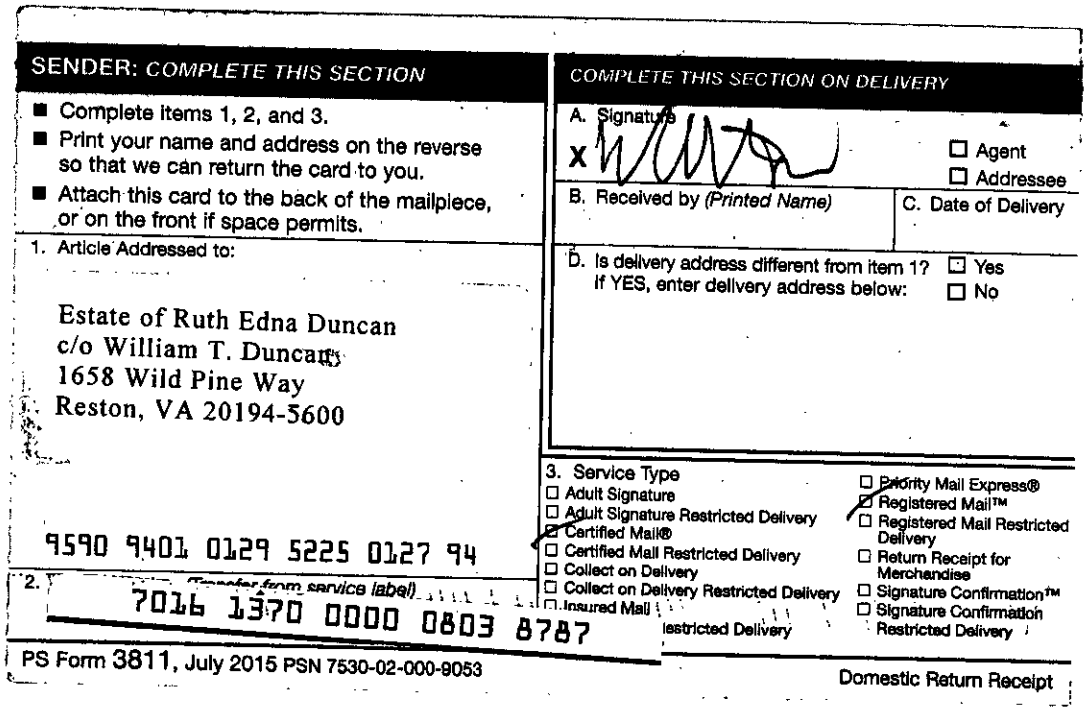
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit
OFFIC
MHF/Matador
Marra Well 1
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $
Return Receipt (electronic) $ 2.80
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total Pos
Sent To
Street an
City, Stat
Estate of Ruth Edna Duncan
c/o William T. Duncan
1658 Wild Pine Way
Reston, VA 20194-5600
PS Form
See Reverse for Instructions
USPS SANTA FE, NM 87594
Postmark Here
OCT 7 2016
DEVARGAS POST OFFICE
7016 1370 0000 0803 8787


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, vis
OFFIC
MHF/Matador
Marra Well 1
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $
Return Receipt (electronic) $ 2.80
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total P
Sent T
Street
City, St
Evelyn G. Cornwell
P.O. Box 314
Disney, OK 74340
PS For
See Reverse for Instructions
USPS SANTA FE, NM 87594
Postmark Here
OCT 7 2016
7016 1370 0000 0803 8794


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:
Estate of Ruth Edna Duncan
c/o William T. Duncan
1658 Wild Pine Way
Reston, VA 20194-5600
9590 9401 0129 5225 0127 94
2. (Transfer from service label)
7016 1370 0000 0803 8787
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
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

7016 1370 0000 0803 8800

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

For delivery information, v

OFFIC

MHF/Matador
Marra Well 1

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 Postag	$

USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
POST OFFICE

Sent To: Franklin Charles Owen
Street and A: 1774 Route 73
City, State, Z: Keene Valley, NY 12943

PS Form 38 ... 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:

Franklin Charles Owen
1774 Route 73
Keene Valley, NY 12943

9590 9401 0129 5225 0128 17

2. 7016 1370 0000 0803 8800

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Franklin C. Owen ☐ Agent ☐ Addressee

B. Received by (Printed Name): Franklin C. Owen
C. Date of Delivery: 10-14-16

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

7016 1370 0000 0803 8817

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

For delivery information, vis

OFFIC

MHF/Matador
Marra Well 1

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	$

USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
POST OFFICE

Sent To: Geraldine R. Lyons
Street and: 1287 Siesta Ct.
City, State, Minden, NV 89423

PS Form 3 ... See Reverse for Instructions

7016 1370 0000 0803 8824

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

For delivery information: MHF/Matador Marra Well 1

OFFI

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 $ 2.80

Postage $

Total Pos $

Sent To: H. B. Amerine
Estate of H.B. Amerine
c/o Terry Amerine

Street and: 2316 W. Purdue

City, State: Enid, OK 73703

Postmark Here
OCT 7 2016
SANTA FE, NM 87594
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:

H. B. Amerine
Estate of H.B. Amerine
c/o Terry Amerine
2316 W. Purdue
Enid, OK 73703

9590 9401 0129 5225 0128 31

2. Article Number (Transfer from service label) 7016 1370 0000 0803 8824

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Terry W. ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery 10-11-16

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

7016 1370 0000 0804 0803

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

For delivery information: MHF/Matador Marra Well 1

OFFI

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 $ 2.80

Postage $

Total P $

Sent T: Helen Margaret McCabe
c/o F. W. Owen

Street: 16 Sail Court

City, S: Sacramento, CA 95831

Postmark Here
OCT 7 2016
SANTA FE, NM 87594
POST OFFICE

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:

Helen Margaret McCabe
c/o F. W. Owen
16 Sail Court
Sacramento, CA 95831

9590 9401 0129 5225 0128 48

2. Article Number (Transfer from service label) 7016 1370 0000 0804 0803

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

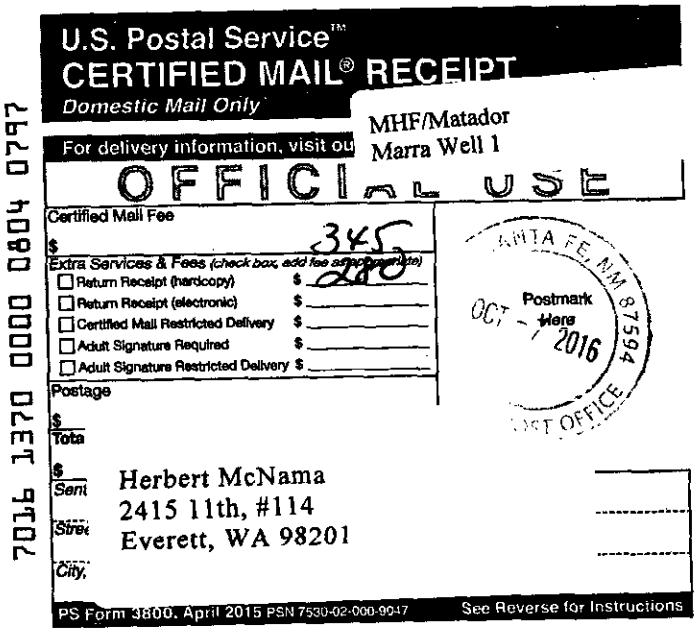
B. Received by (Printed Name)

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



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

For delivery information, visit ou

MHF/Matador
Marra Well 1

OFFICIAL USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $ 280
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $

Postage
$

Tota

$
Sent

Stree

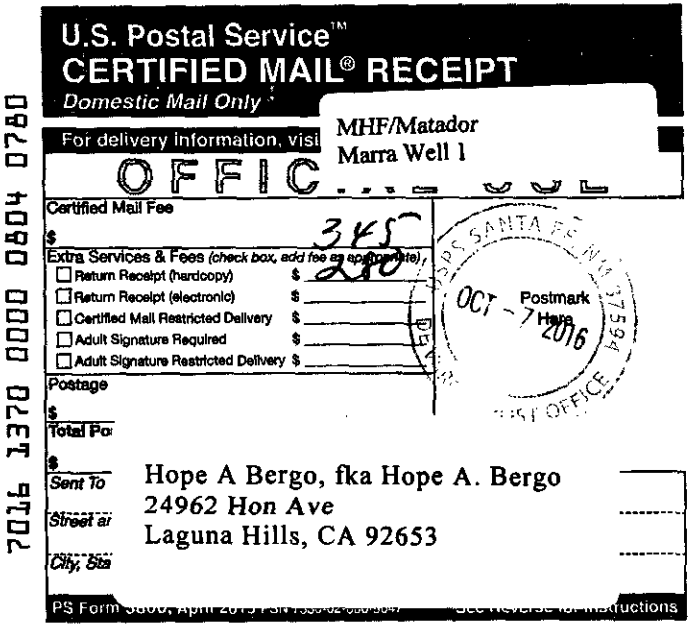
City,

Herbert McNama
2415 11th, #114
Everett, WA 98201

SANTA FE, NM 87594
OCT - 7 2016
Postmark Here
POST OFFICE

7016 1370 0000 0804 0797

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



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

For delivery information, visi

MHF/Matador
Marra Well 1

OFFIC... USE

Certified Mail Fee
$ 345

Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) $ 280
- Return Receipt (electronic) $
- Certified Mail Restricted Delivery $
- Adult Signature Required $
- Adult Signature Restricted Delivery $

Postage
$

Total Po

$
Sent To

Street ar

City, Sta

Hope A Bergo, fka Hope A. Bergo
24962 Hon Ave
Laguna Hills, CA 92653

SANTA FE, NM 87594
OCT - 7 2016
Postmark Here
POST OFFICE

7016 1370 0000 0804 0780

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

RETURNED

7014 1370 0000 0804 0723

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

MHF/Matador
Marra Well 1

For delivery information, vis

OFFIC.AL USE

Certified Mail Fee
$ 345

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 Pr
$

Sent To Jack L. Roberts, Jr.
Street a PO Box 2396
City, Sta Claremore, OK 74018

PS Form ... See Reverse for Instructions

Postmark Here
OCT 7 2016
SANTA FE, NM 87594
POST OFFICE

7014 1370 0000 0804 0716

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

MHF/Matador
Marra Well 1

For delivery information, vi

OFFIC.AL USE

Certified Mail Fee
$ 345

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 Po
$

Sent To Jack McNama
Street ar 56525 Nelson
City, Sta Yucca Valley, CA 92284

PS Form ... See Reverse for Instructions

Postmark Here
OCT 7 2016
DE VARGAS POST OFFICE
SANTA FE, NM 87594

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:

Jack L. Roberts, Jr.
PO Box 2396
Claremore, OK 74018

9590 9401 0129 5225 0128 79

2. Article Number (Transfer from service label)
7016 1370 0000 0804 0723

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
10-11-16

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

CLAREMORE OCT 11 2016
OCT 11 2016
USPS

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

7016 1370 0000 0804 0759

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

For delivery information, vi

MHF/Matador
Marra Well 1

OFFICIAL USE

Certified Mail Fee	345
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	$ 280
☐ Return Receipt (electronic)	$
☐ Certified Mail Restricted Delivery	$
☐ Adult Signature Required	$
☐ Adult Signature Restricted Delivery	$
Postage	
Total Post	

Postmark Here OCT 2016
DE VARGAS POST OFFICE 87594

Sent To: Jacqueline Faith Sperling Dutton
Street and: 2924 Concord Blvd
City, State: Concord, CA 94522

PS Form ... actions

PLACE STICKER AT TOP OF 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:

Jacqueline Faith Sperling Dutton
2924 Concord Blvd
Concord, CA 94522

9590 9401 0129 5225 0129 16

2. Article Number (Transfer from service label)
7016 1370 0000 0804 0759

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 ... cted 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

7016 1370 0000 0804 0742

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

For delivery information, vi

MHF/Matador
Marra Well 1

OFFIC

Certified Mail Fee	345
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	$ 280
☐ Return Receipt (electronic)	$
☐ Certified Mail Restricted Delivery	$
☐ Adult Signature Required	$
☐ Adult Signature Restricted Delivery	$
Postage	
Total Pos	

Postmark Here OCT 2016
DE VARGAS POST OFFICE 87594

Sent To: Jacquelyn Jo Sooby
Street an: c/o Deanna Poteet
City, Stat: 921 Montcrest Dr.
Redding, CA 96003

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:

Jacquelyn Jo Sooby
c/o Deanna Poteet
921 Montcrest Dr.
Redding, CA 96003

9590 9401 0129 5225 0129 23

2. Article Number (Transfer from service label)
7016 1370 0000 0804 0742

COMPLETE THIS SECTION ON DELIVERY

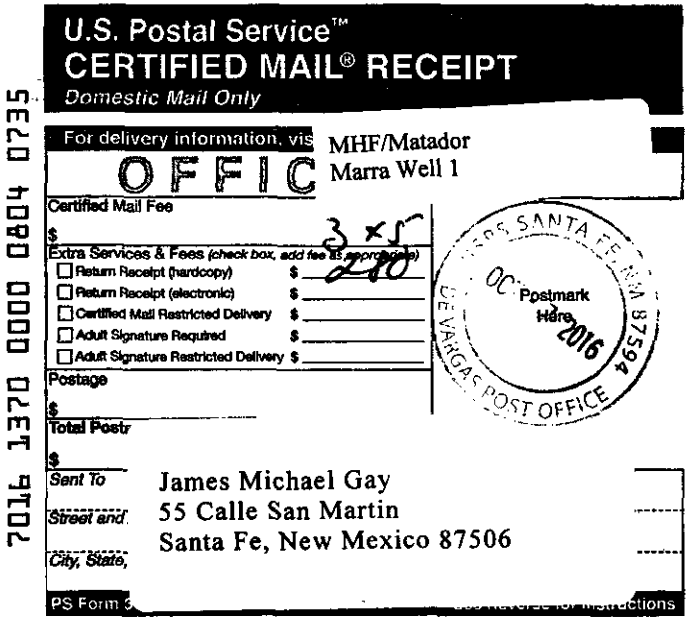
A. Signature
X ☐ Agent ☐ Addressee

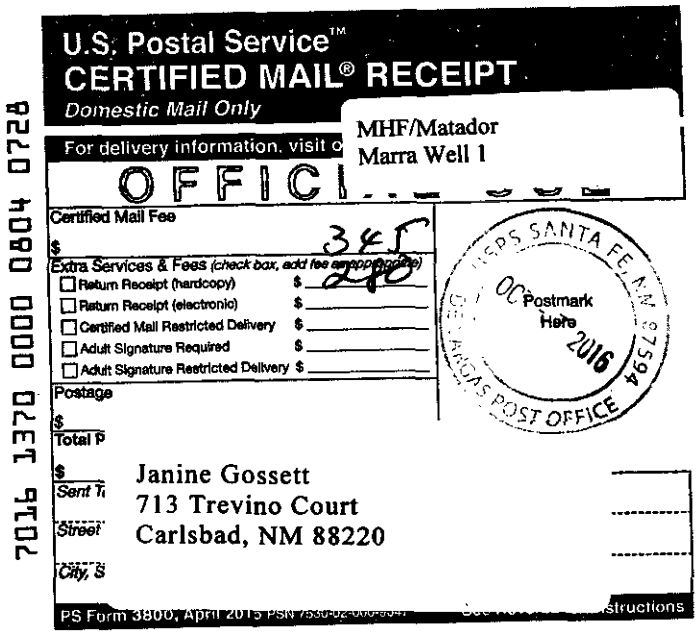
B. Received by (Printed Name) Rich Poteet | C. Date of Delivery 10/11

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
☐ ... stricted 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/Matador
Marra Well 1
Certified Mail Fee
$
3 x 5
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
$
Total Postr
$
Sent To James Michael Gay
Street and 55 Calle San Martin
City, State, Santa Fe, New Mexico 87506
PS Form
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE
OC Postmark Here
2016
7016 1370 0000 0804 0735


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit o
OFFICI
MHF/Matador
Marra Well 1
Certified Mail Fee
$
3 x 5
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
$
Total P
$
Sent T Janine Gossett
Street 713 Trevino Court
City, S Carlsbad, NM 88220
PS Form 3800, April 2015
USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE
OC Postmark Here
2016
7016 1370 0000 0804 0728

RETURNED

7016 1370 0000 0804 0711

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

For delivery information, visit MHF/Matador Marra Well 1
OFFIC

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 Pos $

Sent To: Jeanette Huffer
Street an: c/o George Huffer
City, Stat: 1473 Royal Palm Dr.
Slidell, LA 70458

USPS SANTA FE NM 87594 POST OFFICE
Postmark Here
OCT 2016

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

7016 1370 0000 0803 7537

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

For delivery information, visit MHF/Matador Marra Well 1
OFFIC

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 $
To

John Duncan Gay
1038 SW Exmoor Land
Topeka, Kansas 66604

USPS SANTA FE NM
Postmark Here
OCT 2016
POST OFFICE

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

PLACE STICKER AT TOP OF ENVELOPE TO 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 Duncan Gay
1038 SW Exmoor Land
Topeka, Kansas 66604

9590 9401 0129 5225 0129 78

2. Article Number (Transfer from service label)
7016 1370 0000 0803 7537

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 10-12-16

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

7016 1370 0000 0803 7520

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

For delivery information, visit c
OFFICI

MHF/Matador
Marra Well 1

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 Po

Sent To: John H. Sooby c/o Deanna Poteet
Street a: 921 Montcrest Dr.
City, Sta: Redding, CA 96003

USPS SANTA FE NM 87594 OCT 2016 Postmark Here POST OFFICE

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 H. Sooby c/o Deanna Poteet
921 Montcrest Dr.
Redding, CA 96003

9590 9401 0129 5225 0129 85

2. Article Number (Transfer from
7016 1370 0000 0803 7520

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Rich
☐ Agent
☐ Addressee

B. Received by (Printed Name) Rich Poteet
C. Date of Delivery 10-11

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
- ☐ 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

7016 1370 0000 0803 7513

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

For delivery information, visi
OFFIC

MHF/Matador
Marra Well 1

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 Pos

Sent To: Jose A. H. Pino and Agapita R. Pino
Street an: 141 East Santa Fe
City, Stat: Santa Fe, NM 87501

OCT 2016 Postmark Here DEVARGAS 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:
Jose A. H. Pino and Agapita R. Pino
141 East Santa Fe
Santa Fe, NM 87501

9590 9401 0129 5225 0129 92

2. Article Number (Transfer from
7016 1370 0000 0803 7513

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Herman Pino
☐ Agent
☐ Addressee

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

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

CARSON STATION SANTA FE NM 87 OCT 11 2016

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

7016 1370 0000 0804 0872

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

For delivery information, vi

MHF/Matador
Marra Well 1

OFFIC

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

Joshua Allen Winningham
8406 Southgate Commons Dr.
Charlotte, North Carolina 28277

USPS SANTA FE NM 87594
Postmark Here
OCT 7 2016
POST OFFICE

PS Form

ctions

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:

Joshua Allen Winningham
8406 Southgate Commons Dr.
Charlotte, North Carolina 28277

9590 9401 0129 5225 0127 87

2. Article Number (Transfer from service label)
7016 1370 0000 0804 0872

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

stricted Delivery
(over $500)

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

7016 1370 0000 0804 0865

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

For delivery information, visi

MHF/Matador
Marra Well 1

OFFIC

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
$

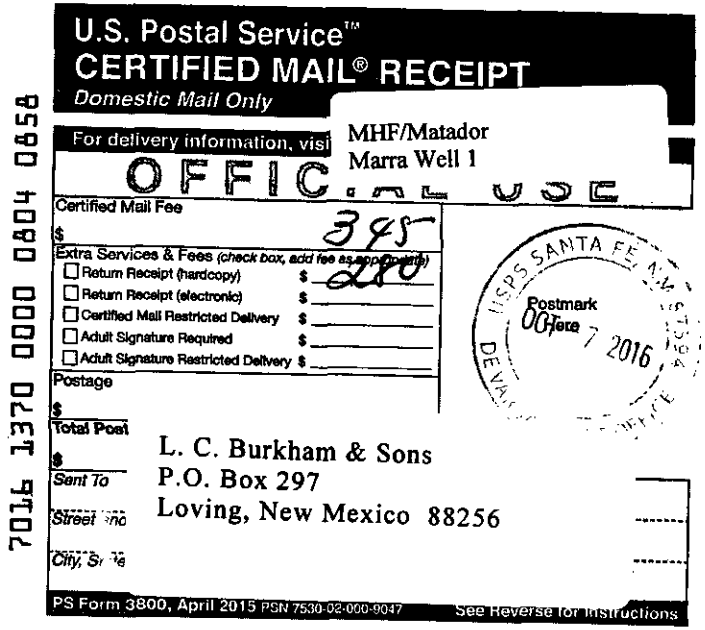
Sent To
Street and
City, State,

Kay Stevens
2685 Quebec St.
Denver, CO 80207

USPS SANTA FE NM 87594
Postmark Here
OCT 7 2016
POST OFFICE

PS Form 3

See Reverse for Instructions



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

For delivery information, visi

MHF/Matador
Marra Well 1

OFFIC[illegible] USE

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
L. C. Burkham & Sons

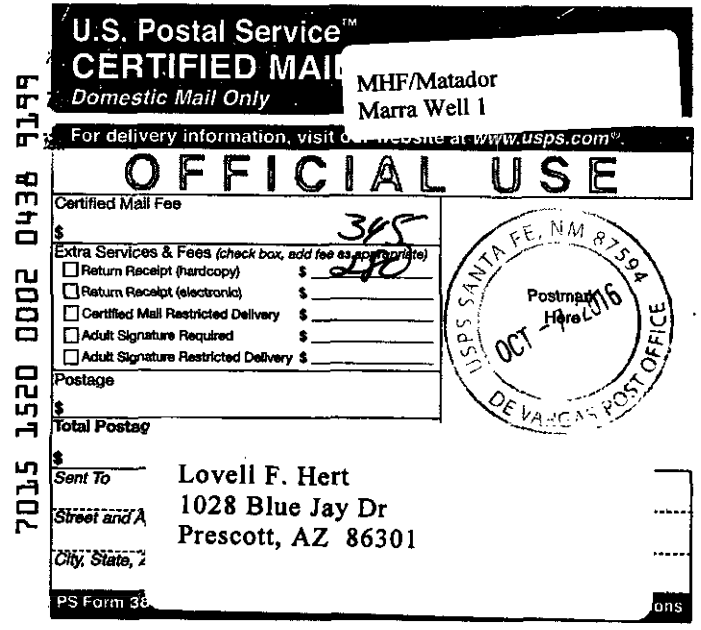
Street and
P.O. Box 297

City, St
Loving, New Mexico 88256

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

USPS SANTA FE, NM
DE VARGAS POST OFFICE
Postmark Here
OCT 7 2016

7016 1370 0000 0804 0858



U.S. Postal Service™
CERTIFIED MAI[illegible]
Domestic Mail Only

MHF/Matador
Marra Well 1

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

Postage
$

Total Postag
$

Sent To
Lovell F. Hert

Street and A
1028 Blue Jay Dr

City, State, Z
Prescott, AZ 86301

PS Form 38[illegible] ons

USPS SANTA FE, NM 87594
DE VARGAS POST OFFICE
Postmark Here
OCT 7 2016

7015 1520 0002 0438 9199

RETURNED

7016 1370 0000 0804 0841

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

For delivery information, vi

OFFIC

MHF/Matador
Marra Well 1

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	$

USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DEVARGAS

Sent To: Margaret Elaine Severin Baumgartner
Street and: 43 W. 720 Nottingham Dr.
City, State: Elburn, Illinois 60119

PS Form 3800, April 2015 PSN 7530-02-000-0047 See Reverse for Instructions

7016 1370 0000 0804 0834

U.S. Postal Service™
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Domestic Mail Only

For delivery information, vis

OFFIC

MHF/Matador
Marra Well 1

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	$

USPS SANTA FE, NM 87594
OCT - 7 2016
Postmark Here
DEVARGAS POST OFFICE

Sent To: Margurett E. Petschke Revocable Trust as Amended & Restated May 29, 2001
Street and: **41346 Carmelo Dr.**
City, State: **W. Clinton Township, MI 48038**

PS Form 3800, April 2015 PSN 7530-02-000-0047 ctions

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:

Margaret Elaine Severin
Baumgartner
43 W. 720 Nottingham Dr.
Elburn, Illinois 60119

9590 9401 0129 5225 0125 58

2. Article Number (Transfer from service label) 7016 1370 0000 0804 0841

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☐ Agent
☐ Addressee

B. Received by (Printed Name) M. Baumgartner
C. Date of Delivery 10-11-16

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

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

7016 1370 0000 0804 0827

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

For delivery information, visit MHF/Matador
OFFIC Marra Well 1

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 Mary Jane Ruiz
Street and 758 W. Shaw, #20
City, State Clovis, CA 93612

Postmark Here

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

7016 1370 0000 0804 0810

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

For delivery information, visit o MHF/Matador
OFFICI Marra Well 1

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 $

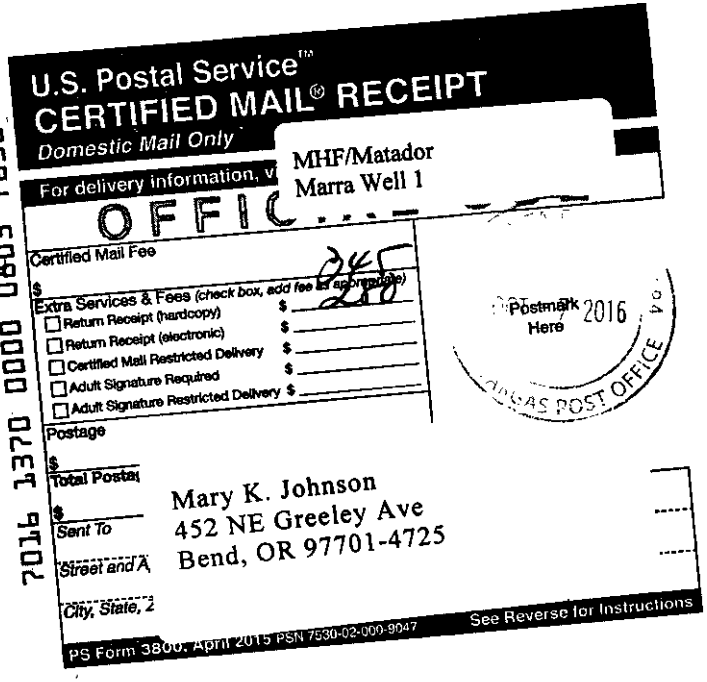
Postage
$

Total Posta
$

Sent To Mary K. Johnson
Street and 3587 NW McCready Dr
City, State, Bend, OR 97703-8650

Postmark Here

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



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

For delivery information, v

MHF/Matador
Marra Well 1

OFFIC

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 Postag
$

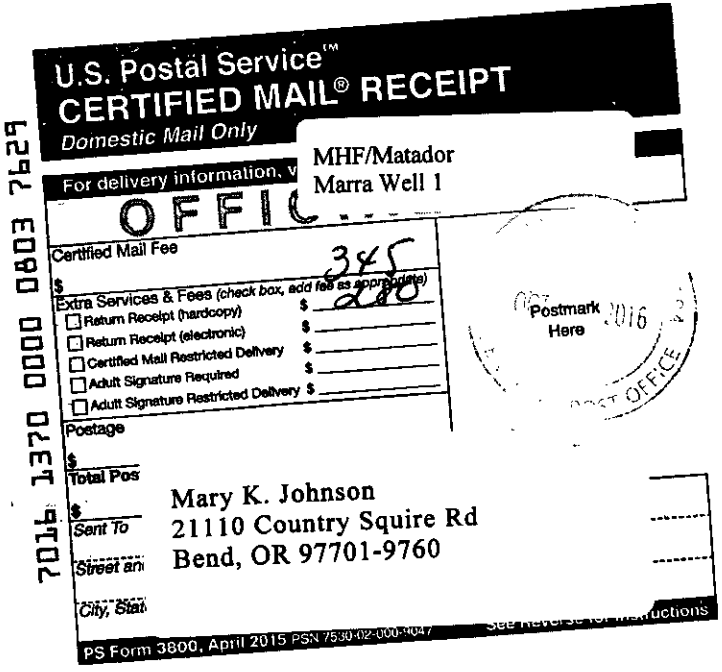
Sent To Mary K. Johnson
Street and A 452 NE Greeley Ave
City, State, Z Bend, OR 97701-4725

Postmark Here 2016

KANSAS POST OFFICE

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

7016 1370 0000 0803 7636



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

For delivery information, v

MHF/Matador
Marra Well 1

OFFIC

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 Pos
$

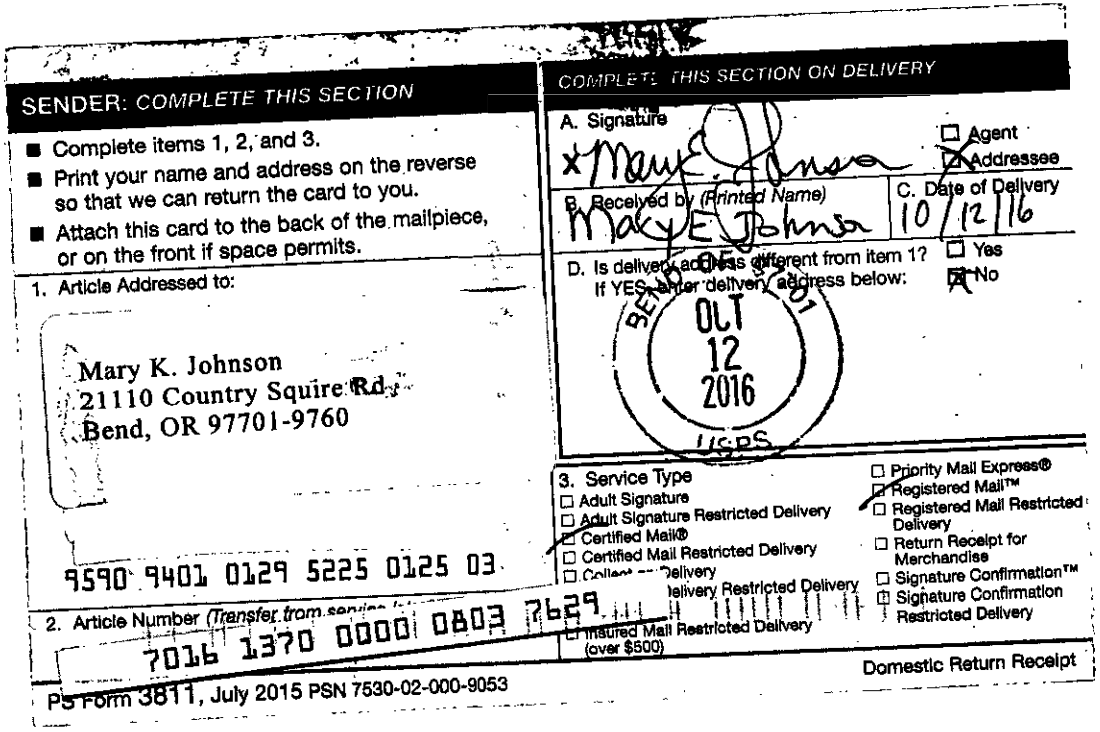
Sent To Mary K. Johnson
Street an 21110 Country Squire Rd
City, Stat Bend, OR 97701-9760

Postmark Here 2016

POST OFFICE

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

7016 1370 0000 0803 7629



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 K. Johnson
21110 Country Squire Rd
Bend, OR 97701-9760

9590 9401 0129 5225 0125 03

2. Article Number (Transfer from service label)
7016 1370 0000 0803 7629

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Mary K. Johnson
☐ Agent
☒ Addressee

B. Received by (Printed Name) MARY E JOHNSON
C. Date of Delivery 10/12/16

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

RECEIVED OCT 12 2016 USPS

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

7016 1370 0000 0803 7599

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

For delivery information, vis

MHF/Matador
Marra Well 1

OFFIC

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 Pc

Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

Sent To Michael Lynn Plank, II
Street a 6376 N. SR 7
City, Sta Madison, IN 47250

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

7016 1370 0000 0803 7612

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

For delivery information, v

MHF/Matador
Marra Well 1

OFFIC

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 Pos

Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

Sent To Mildred Johnson Burden
Street an P.O. Box 368
City, Stat Ennis, TX 75119

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

RETURNED

7016 1370 0000 0803 7575

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

For delivery information, vis
OFFIC

MHF/Matador
Marra Well 1

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 2.60
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Tota

Postmark Here
OCT - 7 2016
SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sen
Paul C. Duncan, Jr.
2120 Hackberry Creek Ave.
Yukon, OK 73099

Stre
City,

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:

Paul C. Duncan, Jr.
2120 Hackberry Creek Ave.
Yukon, OK 73099

9590 9401 0129 5225 0126 57

2. Article Number (Transfer from service label)
7016 1370 0000 0803 7575

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Douglas Lower
☐ Agent
☐ Addressee

B. Received by (Printed Name)
Douglas Lower

C. Date of Delivery
10-12-2016

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

(over $500)

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

7016 1370 0000 0803 7568

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

For delivery information, vis
OFFIC

MHF/Matador
Marra Well 1

Certified Mail Fee
$ 3.45

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $ 2.60
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Tota

Postmark Here
OCT 2016
DE VARGAS POST OFFICE

Sen
Phyllis P. Guitierrez-Brown,
individually & and as Executrix of
Irene Brown Estate
Stre
14415 87th Ave, NE
City,
Bothell, WA 98011

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

7016 1370 0000 0803 7551

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

For delivery information: MHF/Matador Marra Well 1

OFFI

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 $ 2.80

Postage $

Total P $

Postmark Here

Sent To: Rick Winningham
Street a: P.O. Box 1266
City, St: Ruidoso, New Mexico 88345

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:

Rick Winningham
P.O. Box 1266
Ruidoso, New Mexico 88345

9590 9401 0129 5225 0126 33

2. Article Number (Transfer from service label)
7016 1370 0000 0803 7551

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x [signature] ☐ Agent ☐ Addressee

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

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

RUIDOSO NM 883 OCT 18 '16

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

7016 1370 0000 0803 7544

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

For delivery information: MHF/Matador Marra Well 1

OFFI

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 $ 2.80

Postage $

Total Postage $

Postmark Here OCT 2016 DEVARGAS POST OFFICE

Sent To: Robert Dean Gaines
Street and Apt.: c/o Geraldine R. Lyons
City, State, ZIP: 1287 Siesta Ct.
Minden, NV 89423

PS Form 3800 See Reverse for Instructions

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

For delivery information, visit MHF/Matador Marra Well 1
OFFICIAL USE

Certified Mail Fee $ 3.45
Extra Services & Fees (check box, add fee as appropriate) 2.80
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Total

Postmark Here
OCT 7 2016
SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sent To: Robert Scott Owen
Street: 16 Sail Court
City: Sacramento, CA 95831

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

7016 1370 0000 0803 7735

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

For delivery information, visit MHF/Matador Marra Well 1
OFFICIAL USE

Certified Mail Fee $ 3.45
Extra Services & Fees (check box, add fee as appropriate) 2.80
- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Total

Postmark Here
OCT - 7 2016
SANTA FE, NM 87504
DE VARGAS POST OFFICE

Sent To: Ronald Johnson
Street: P.O. Box 6161
City: Lake Charles, LA 70606

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

7016 1370 0000 0803 7728

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:

Robert Scott Owen
16 Sail Court
Sacramento, CA 95831

9590 9401 0129 5225 0126 19

2. Article Number (Transfer from service label)
7016 1370 0000 0803 7735

COMPLETE THIS SECTION ON DELIVERY

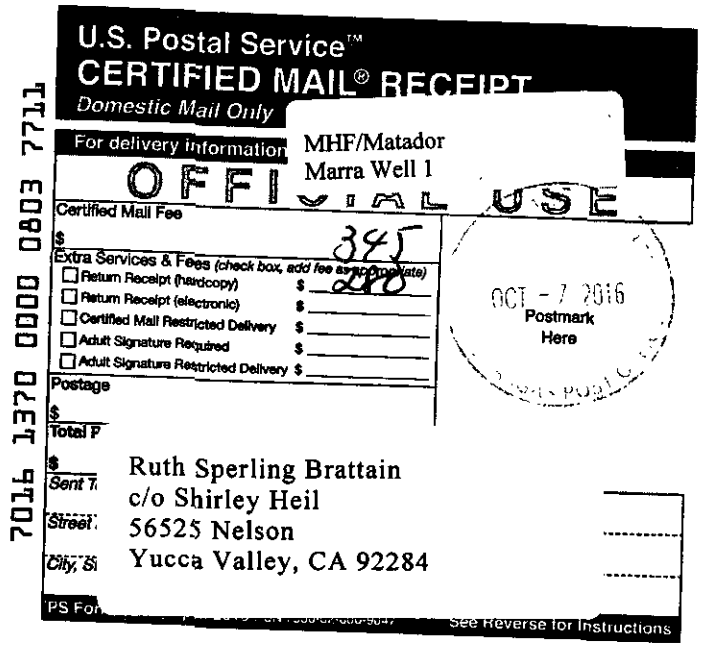
A. Signature
X [signature] ☐ Agent ☐ Addressee

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

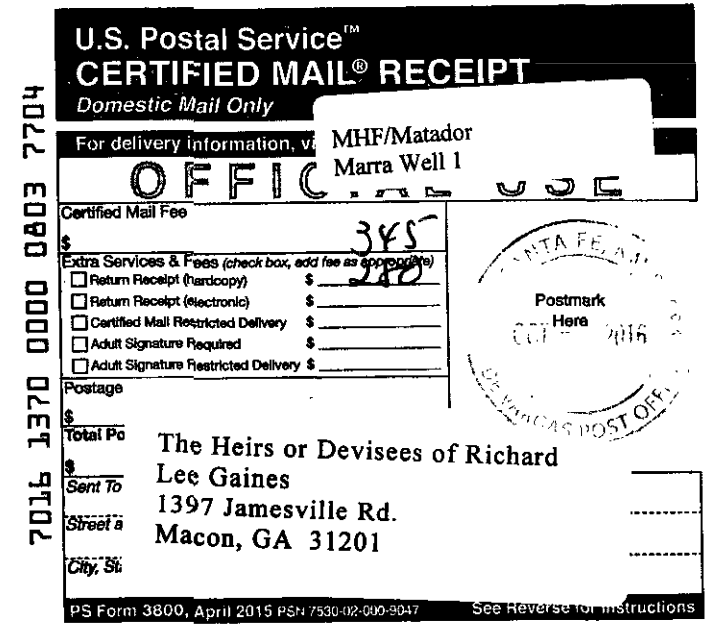
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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

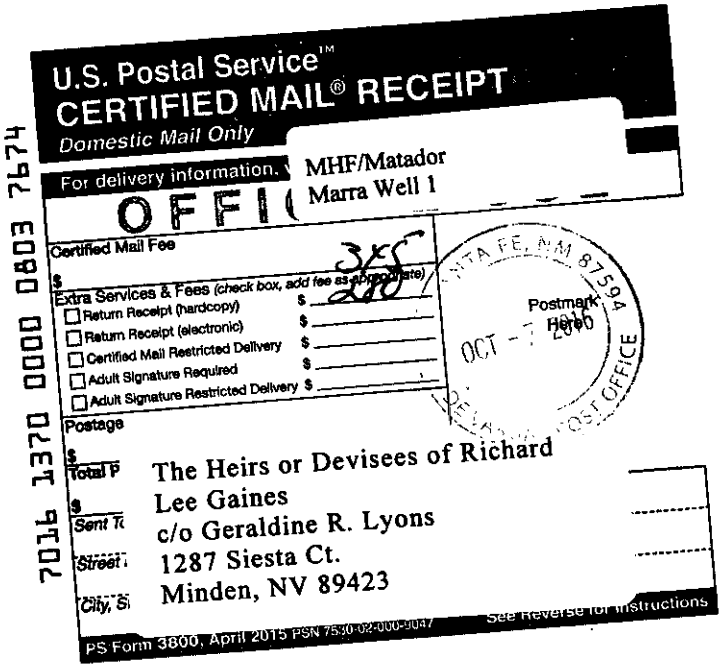
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

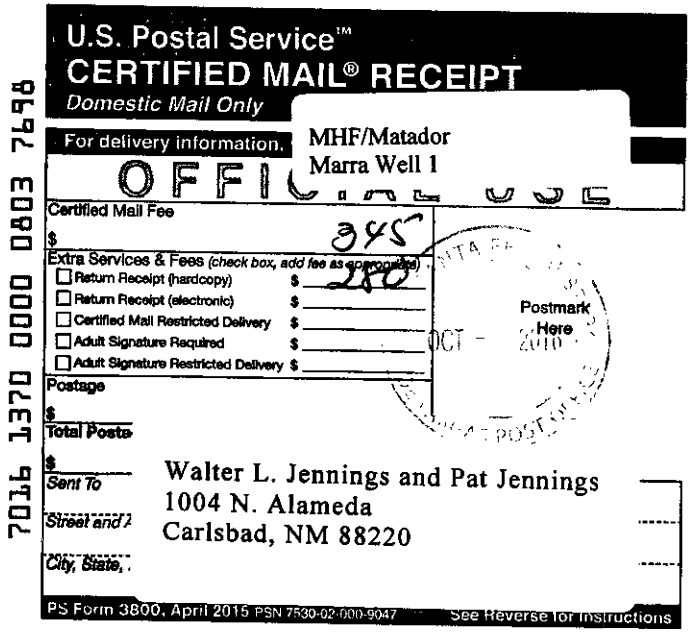


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information
MHF/Matador
Marra Well 1
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $ 2.80
Return Receipt (electronic) $
Certified Mail Restricted Delivery $
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total P
$
Sent T
Street
City, St
Ruth Sperling Brattain
c/o Shirley Heil
56525 Nelson
Yucca Valley, CA 92284
PS For
See Reverse for Instructions
OCT - 7 2016
Postmark
Here
7016 1370 0000 0803 7711



U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, vi
MHF/Matador
Marra Well 1
OFFICIAL USE
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 Po
$
Sent To
Street a
City, St
The Heirs or Devisees of Richard
Lee Gaines
1397 Jamesville Rd.
Macon, GA 31201
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
Postmark
Here
7016 1370 0000 0803 7704


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information,
MHF/Matador
Marra Well 1
OFFI
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
Sent To
Street
City, St
The Heirs or Devisees of Richard
Lee Gaines
c/o Geraldine R. Lyons
1287 Siesta Ct.
Minden, NV 89423
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
Postmark Here
OCT - 7 2016
7016 1370 0000 0803 7674


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information,
MHF/Matador
Marra Well 1
OFFI
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 Posta
Sent To
Street and
City, State,
Walter L. Jennings and Pat Jennings
1004 N. Alameda
Carlsbad, NM 88220
PS Form 3800, April 2015 PSN 7530-02-000-9047
See Reverse for Instructions
Postmark Here
OCT - 2016
7016 1370 0000 0803 7698

RETURNED

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

For delivery information, vis

MHF/Matador
Marra Well 1

OFFICIAL USE

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 $ 2.80

Postage
$

Total Postage
$

Sent To
Street and
City, State,

Wilbur L. Motley
4718 Cindy Pl.
Midland, TX 79707

PS Form 3

SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

7016 1370 0000 0803 7681

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

For delivery information, vis

MHF/Matador
Marra Well 1

OFFICIAL USE

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 $ 2.80

Postage
$

Total P

Sent T
Street
City, S

William Allan Gay
110 Main St.
Palacios, Texas 77465

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

SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE

7016 1370 0000 0803 7667

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

TE THIS SECTION ON DELIVERY

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

1. Article Addressed to:

William Allan Gay
110 Main St.
Palacios, Texas 77465

9590 9401 0129 5225 0127 49

2. Article Number (Transfer from service label)
7016 1370 0000 0803 7667

A. Signature
X
☐ Agent
☐ Addressee

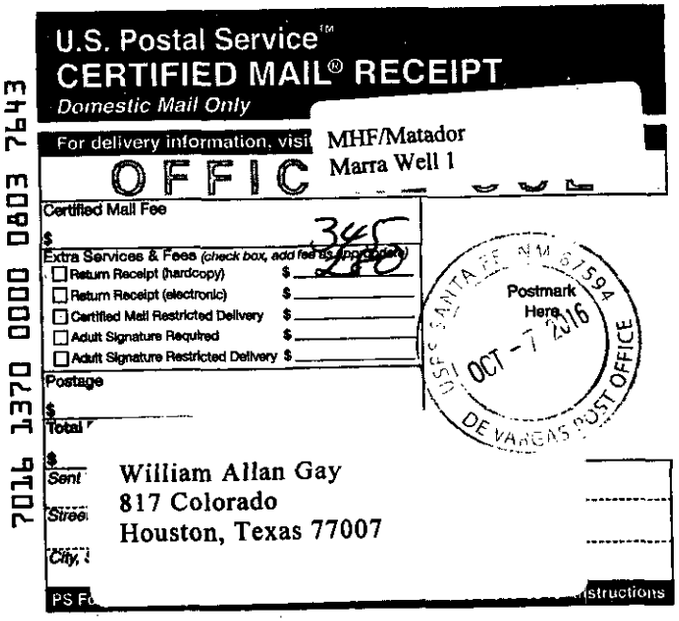
B. Received by (Printed Name) William Allan Gay
C. Date of Delivery 10/11/16

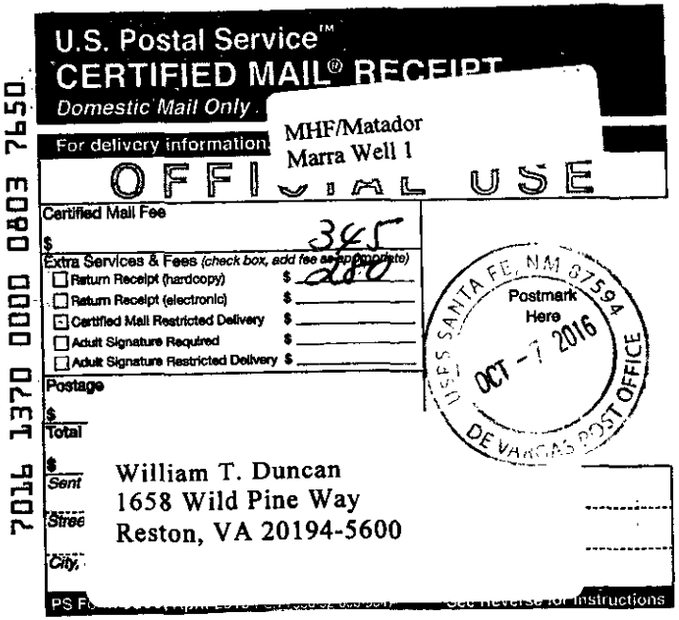
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

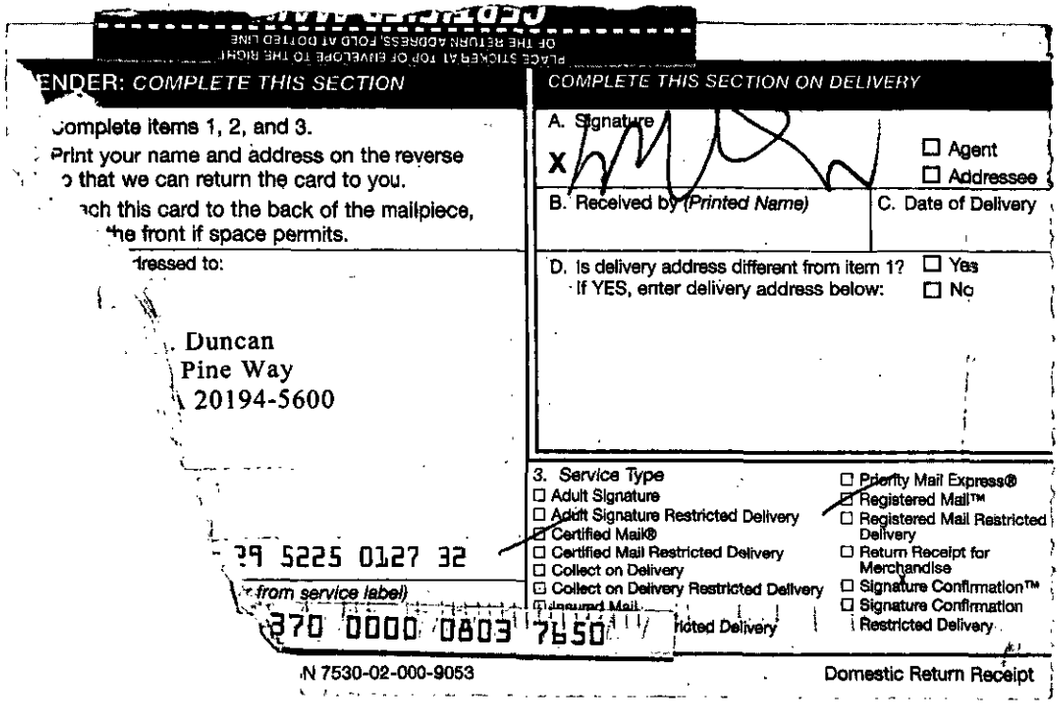
3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return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

Restricted Delivery

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


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit
MHF/Matador
Marra Well 1
OFFICIAL USE
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
$
Total
$
Sent
Street
City,
William Allan Gay
817 Colorado
Houston, Texas 77007
PS Form
Instructions
USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE
7016 1370 0000 0803 7643


U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information
MHF/Matador
Marra Well 1
OFFICIAL USE
Certified Mail Fee
$ 3.45
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $
Return Receipt (electronic) $
Certified Mail Restricted Delivery $ 2.80
Adult Signature Required $
Adult Signature Restricted Delivery $
Postage
$
Total
$
Sent
Stree
City,
William T. Duncan
1658 Wild Pine Way
Reston, VA 20194-5600
PS F
See Reverse for Instructions
USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
DE VARGAS POST OFFICE
7016 1370 0000 0803 7650


PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
ENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3.
Print your name and address on the reverse
o that we can return the card to you.
ach this card to the back of the mailpiece,
he front if space permits.
dressed to:
. Duncan
Pine Way
20194-5600
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
Priority Mail Express®
Registered Mail™
Registered Mail Restricted Delivery
Return Receipt for Merchandise
Signature Confirmation™
Signature Confirmation Restricted Delivery
9590 9402 2529 5225 0127 32
(from service label)
7016 1370 0000 0803 7650
PS Form 3811, July 2015 PSN 7530-02-000-9053
Domestic Return Receipt

7015 1520 0002 0438 9182

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OFFIC Marra Well 1

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 Po

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DE VARGAS POST OFFICE

Sent To Winifred McNama Drake
Street an c/o Shirley Heil
56525 Nelson
City, Stat Yucca Valley, CA 92284

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

7015 1520 0002 0438 9212

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OFFIC Marra Well 1

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 Posta

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USPS SANTA FE, NM 87594
OCT - 7 2016
DE VARGAS POST OFFICE

Sent To Virginia James
Street and 4431 Cristy Way
City, State, Castro Valley, CA 94546

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

7016 1370 0000 0803 7605

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Marra Well 1

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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
$

Tota

Postmark Here OCT 2016

Ser

Carmen Calles
22790 Vermont Street #2
Nayward, CA 94541

Stre

City

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

7016 1370 0000 0803 7582

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MHF/Matador
Marra Well 1

OFFIC - - USE

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

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Sent To

Carol Martinez
4431 Cristy Way
Castro Valley, CA 94546

Street and

City, State,

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

7016 1370 0000 0804 0704

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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 Po
$
Sent To Lilia Campos
Street a P. O. Box 5092
City, Sta Carlsbad, NM 88220

USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
POST OFFICE

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

7016 1370 0000 0803 9029

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OFFIC

MHF/Matador
Marra Well 1

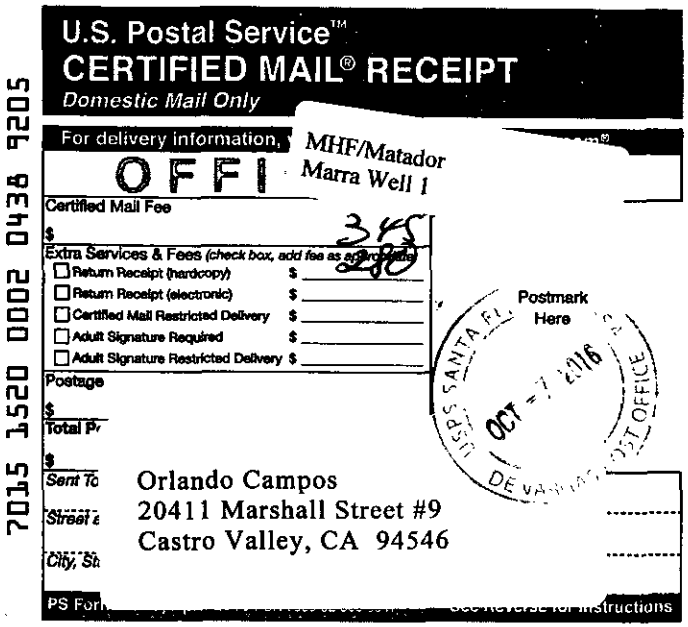
Certified Mail Fee
$ 3.45

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 Po
$
Sent To Antonio Lopez
Street an P. O. Box 96
City, Stat Malaga, NM 88263

USPS SANTA FE, NM 87594
Postmark Here
OCT - 7 2016
POST OFFICE

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



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Marra Well 1

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 $ 2.80

Postage
$

Total Postage and Fees
$

Postmark Here

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OCT - 7 2016

Sent To
Orlando Campos

Street and Apt. No., or PO Box No.
20411 Marshall Street #9

City, State, ZIP+4®
Castro Valley, CA 94546

PS Form ... See Reverse for Instructions

7015 1520 0002 0438 9205