BEFORE THE OIL CONSERVATION DIVISION NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

APPLICATION OF CONOCOPHILLIPS COMPANY FOR APPROVAL OF A COOPERATIVE LEASE LINE INJECTION AGREEMENT FOR AN "EXPANDED USE AREA" WITHIN THE EAST VACUUM GRAYBURG-SAN ANDRES UNIT PRESSURE MAINTENANCE PROJECT AREA AND QUALIFICATION OF THE ACREAGE WITHIN THE "EXPANDED USE AREA" FOR THE RECOVERED OIL TAX RATE PURSUANT TO THE NEW MEXICO ENHANCED OIL RECOVERY ACT, LEA COUNTY, NEW MEXICO.

CASE NO. <u>131</u>34

<u>AFFIDAVIT</u>

OUNTY OF SANTA FE)
William F. Carr, attorney in fact and authorized representative of ConocoPhillips Company
the Applicant herein, being first duly sworn, upon oath, states that notice has been given to
all interested persons entitled to receive notice of this application under Oil Conservation
Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached
hereto. William F. Carr
William F. Carr

SUBSCRIBED AND SWORN to before me this ____day of August 2003.

Notary Public

My Commission Expires:

STATE OF NEW MEXICO

august 23,2005

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Case No. 13134 Exhibit No. 10
Submitted by:
CONCOPHILIES COMPANY

CONOCOPHILLIPS COMPANY
Hearing Date: August 21, 2003

HOLLAND & HART LLP. ATTORNEYS AT LAW

DENVER • ASPEN
BOULDER • COLORADO SPRINGS
DENVER TECH CENTER
BILLINGS • BOISE
CHEYENNE • JACKSON HOLE
SALT LAKE CITY • SANTA FE
WASHINGTON, D.C.

P.O. BOX 2208 SANTA FE, NEW MEXICO 87504-2208 110 NORTH GUADALUPE, SUITE 1 SANTA FE, NEW MEXICO 87501-6525 TELEPHONE (505) 988-4421 FACSIMILE (505) 983-6043

William F. Carr

wcarr@hollandhart.com

July 31, 2003

<u>CERTIFIED MAIL</u> RETURN RECEIPT REQUESTED

TO: ALL AFFECTED INTEREST OWNERS.

Re:

Application of ConocoPhillips Company for Approval of a Cooperative Lease Line Injection Agreement for an "Expanded Use Area" within the East Vacuum Grayburg-San Andres Unit Pressure Maintenance Project Area and Qualification of the Acreage within the "Expanded Use Area" for the Recovered Oil Tax Rate Pursuant to the New Mexico Enhanced Oil Recovery Act, Lea County, New Mexico.

Ladies and Gentlemen:

Enclosed is a copy of the application of ConocoPhillips Company in the above-referenced case for approval of a Cooperative Lease Line Injection Agreement for carbon dioxide injection in an Expanded Use Area within the East Vacuum Grayburg-San Andres Unit Pressure maintenance project Area. ConocoPhillips also seeks to qualify the Expanded Use area for the Recovered Tax Rate authorized by the New Mexico Enhanced Oil Recovery Act.

This application has been set for hearing before a Division Examiner on August 21, 2003. You are not required to attend this hearing, but as an owner of the 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 1208.B to file a Pre-hearing Statement three days in advance of a scheduled hearing at the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

Very truly yours

William F. Carr

Attorney for ConocoPhillips Company

Enclosure

EXHIBIT A

APPLICATION OF CONOCOPHILLIPS COMPANY
FOR APPROVAL OF A
COOPERATIVE LEASE LINE INJECTION AGREEMENT FOR AN "EXPANDED USE
AREA" WITHIN THE EAST VACUUM GRAYBURG-SAN ANDRES UNIT
PRESSURE MAINTENANCE PROJECT AREA AND
QUALIFICATION OF THE ACREAGE WITHIN THE "EXPANDED USE AREA"
FOR THE RECOVERED OIL TAX RATE
PURSUANT TO THE NEW MEXICO ENHANCED OIL RECOVERY ACT,
LEA COUNTY, NEW MEXICO.

NOTICE LIST

ARCO Permian (Production Reports Only)
Attn: Randy Jindra
PricewaterhouseCoopers
509 South Boston
Tulsa, Oklahoma 74103

AYCO Energy, L.L.C. 16360 Park Ten Plaza, Suite 115 Houston, Texas 77084

BP America Production Company Permian Basin Performance Unit (SENM) Post Office Box 3092 Houston, Texas 77253-3092

Betelgeuse Petroleum Post Office Box Fredericksburg, Texas 78624

H. M. Bettis Inc. Post Office Box 1240 Graham, Texas 76450

W. T. Boyle & Co. Post Office Box 57 Graham, Texas 76450-0057

Madelon L. Bradshaw 2120 Ridgemar Blvd., Suite 12 Fort Worth, Texas 76116 John R. Bryant 911 West Silver Hobbs, New Mexico 88240

Ann McBee Buell 11241 Russwood Circle Dallas, Texas 75229

Bright Hawk/Burkard Venture c/o Bright Hawk Resources, Inc. Post Office Box 79790 Houston, Texas 77279-9790

ChevronTexaco PBBU Attn: NOJV Manager 15 Smith Road Midland, Texas 79705

Davoil, Inc.
Post Office Box 122269
Fort Worth, Texas 76121-2269

ENAQ, Inc. Post Office Box 73406 Houston, Texas 77273-3406

ExxonMobil Attn: Greg Stoute Post Office Box 4707 Houston, Texas 77210-4707

Frisco Energy LLC Attn: Butch Smith 2431 East 51st Street Tulsa, Oklahoma 74105

Great Western Drilling Co. Attn: Joint Venture Group Post Office Box 1659 Midland, Texas 79701

Larry O. Hulsey Post Office Box 1143 Graham, Texas 76450 Boyd Laughlin Management Trust Marion Gardiner Miller Suc. Tr. Acct 20-0973-00, 300 N. Marienfeld, Suite 102 Midland, Texas 79701

The Josephine Laughlin Living Trust Josephine Laughlin, Trustee 13505 McCall Court, N. E. Albuquerque, New Mexico 87123-1468

Martha Leonard Revocable Trust Bank One Texas, NA, Trustee Post Office Box 2605 Fort Worth, Texas 76113-2605

Martha Leonard Trust 75-6356886 Bank One Texas, NA, Trustee Post Office Box 2050 Fort Worth, Texas 76113

Mary Leonard Children's Trust Bank One Texas, NA, Trustee Post Office Box 2605 Fort Worth, Texas 76113-2605

Mary Leonard Children's Trust 75-6412990 Bank One Texas, NA, Trustee Post Office Box 2050 Fort Worth, Texas 76113

Miranda Leonard Revocable Trust Bank One Texas, NA, Trustee Post Office Box 2605 Fort Worth, Texas 76113-2605

Miranda Leonard Trust 75-6356894 Bank One Texas, NA, Trustee Post Office Box 2050 Fort Worth, Texas 76113

T. W. Little Estate Attn: Belva Little 2513 Boyd Avenue Fort Worth, Texas 76109

MVP Production Inc. 2003 Diamond Blvd. Concord, California 94520 Magnum Hunter Production, Inc. Attn: Earl Krieg 600 East Las Colinas Blvd., Suite 1100 Irving, Texas 75039

Magnum Hunter Production, Inc. Attn: Land Department 3500 William D. Tate Ave., Suite 200 Grapevine, Texas 76051

Marathon Oil Company Attn: Joint Interest Manager Post Office Box 552 Midland, Texas 79702

McBee Operating Company LLC 3738 Oak Lawn LB 200 Dallas, Texas 75219

William D. McBee, Jr. 5942 Averill Way Dallas, Texas 75225

McRae Management Post Office Box 5401 Midland, Texas 79704

OBO, Inc. c/o Lowell S. Dunn II Post Office Box 2577 Hialeah, Florida 33012

OXY USA Inc. Attn: Joint Venture manager Post Office Box 50250 Midland, Texas 79710

Davis Payne Post Office Box 1749 Midland, Texas 79702

S. B. Street & Company Post Office Box 206 Graham, Texas 76046 Patricia Penrose Schieffer, Test. Tr. Bank of America, N.A., Agent Post Office Box 2546 Fort Worth, Texas 76113-2546

C. W. Seely 815 West 10th Street Fort Worth, Texas 76102

Norman D. Stovall, Jr. Post Office Box 10 Graham, Texas 76046

Texaco Exploration & Production Inc. 2003 Diamond Blvd. Concord, California 94520-0000

Toreador Exploration and Production Attn: Ed Marhenka 4809 Cole Avenue, Suite 108 Dallas, Texas 75267

Turnco Inc.
Post Office Box 1240
Graham, Texas 76450-1240

Mary D. Fleming Walsh Attn: Gary F. Goble 500 West Seventh St., Suite 1007 Fort Worth, Texas 76102

U.S. Postal Service CERTIFIED MAIL RECEIPT		
(Domestic Mail Only; No Insurance Coverage F	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Postage \$.83 Certified Fee 2.30 Return Receipt Fee (Endorsement Required) H	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. Article Addressed to: 	A. Received by (Please Print Clearly) B. Date of Delivery 8-5-03 C. Signature X
	ARCO Permian	
	Attn: Randy Jindra	
Sent To Attn. Kanuy Jinura	PricewaterhouseCoopers 509 South Boston	3. Service Type
ricewaternouseCooners	Tulsa, OK 74103	Certified Mail Registered Insured Mail C.O.D.
PS Form 3800, January 2001		4. Restricted Delivery? (Extra Fee) Yes
	7001 1140 0002 5601 8912	
	PS Form 3811, July 1999 Domestic Retu	urn Receipt 102595-00-M-0952
(Domestic Mail Only; No Insurance Coverage)	 item 4 if Restricted Delivery is desired. 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. 	Signature Agent Addressee
Postage \$	Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees Certified Fee 1.55 Post 1.65 A.88	AYCO Energy, L.L.C. 16360 Park Ten Plaza, # 115 Houston, TX 77084	3. Service Type
Sent To AYCO Energy, L.L.C		Certified Mail Express Mail Registered Receipt for Merchandise C.O.D.
1 Street, At 6360 Park Ten Plaza, # 115		4. Restricted Delivery? (Extra Fee)
City, Stati	² 2001 1140 0002 5601 8929	
PSIFOTAL.	PS Form 3811, July 1999 Domestic Ret	urn Receipt 102595-00-M-0952
U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage)	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delivery 8/3/03 C. Signature X/3.C. CMARP Addressee D. Is delivery address different from item 1?
	Article Addressed to:	If YES, enter delivery address below:
Postage \$.83 Certified Fee 2.30 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 4.88	P.O. Box Fredericksburg, TX 78624	3. Service Type Certified Mail
Setelgeuse Petroleum 2.0. Box		4. Restricted Delivery? (Extra Fee)
Sredericksburg, TX 78624	^{2.} 7001 1140 0002 5601 894	3
<u> </u>	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only: No Insurance Coverage	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Postage \$ 2.30	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. 	Received by (Please Print Clearly) B. Date of Delivery C—Signature Agent Addressee
Return Receipt Fee (Endorsement Required)	Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Restricted Delivery Fee (Endorsement Required)	H. M. Bettis Inc.	
Total Postage & Fees \$ 4.88	P.O. Box 1240	
J. M. Bettis Inc.	Graham, TX 76450	3. Service Type
1. M. Bettis file.	Granam, 1A /0450	Certified Mail
or P. G. Box 1240		Registered Return Receipt for Merchandise
City,		☐ Insured Mail ☐ C.O.D.
PS a		4. Restricted Delivery? (Extra Fee)
	² 7001 1140 0002 5601 8967	
U.S. Postal Service	PS Form 3811, July 1999 Domestic Reti	urn Receipt 102595-00-M-0952
CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage P	F/allssel=1 as normary	102585-00-M-0852
(Domestic Wall Only, No insurance Coverage 7		
ANTA	FE	
Postage \$.83 Certified Fee 2.30	THE STATE OF THE S	
Return Receipt Fee	name	
Restricted Delivery Fee		
(Endorsement Required)	01/	
) Iolal Postage & Fees W		
The state of the s		
3. O. Box 57 Graham, TX 76450-0057		
<u>-</u>	1.	
in the second se	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	■ Complete items 1, 2, and 3. Also complete	A. Received by (Please Print Clearly) B. Date of Deliver
U.S. Postal Service CERTIFIED MAIL RECEIPT	item 4 if Restricted Delivery is desired.	
(Domestic Mail Only: No Insurance Goverage 8	Print your name and address on the reverse so that we can return the card to you.	C. Signature AUG - 5-2003
	Attach this card to the back of the mailpiece,	X Addresse
	or on the front if space permits.	D. Is delivery abdress different from item 1? Yes
SAN	1. Article Addressed to:	If YES, enter delivery address below:
Postage \$.83	BP America Production Co.	
Certified Fee 2.30	Permian Basin Performance Unit	
Posi		
Return Receipt Fee (Endorsement Required)		3. Service Type
Restricted Delivery Fee (Endorsement Required)		BCertified Mail Express Mail Registered Return Receipt for Merchandis
! Total Postage & Fees \$ 488 SP America Production Co.		☐ Insured Mail ☐ C.O.D.
Seermian Basin Performance Unit	·	4. Restricted Delivery? (Extra Fee) ☐ Yes
O. Box 3092	2. 7001 1140 0007 5101 0007	
Fig. 10. Box 3092	7001 1140 0002 5601 8936	
i Gir	PS Form 3811, July 1999 Domestic R	leturn Receipt 102595-00-M-0952

Ansire rotes

U.S. Postal Service CERTIFIED MAIL RECE (Domestic Mail Only; No In:	2014年1月2日 日本大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大学、大		
		SENDER: COMPLETE THIS SECTION	COMPLETE T HIS SECTION ON DELIVERY
Postage \$.83	 Complete items 1, 2, and 3. Also complete 1 4 if Restricted Delivery is desired. 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, 	A. Besefved by (Please Print Clearly) B. Date of Delivery TELEST MALONE 8-4-05 C. Signature X. January Malone Addressee
Return Receipt Fee	2.30 S 8750	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item ? Dyes If YES, ent er delivery address below:
Total Postage & Fees \$	4.88	Madelon I. Brodel	11
1adelon L. Bradshaw 120 Ridgemar Blvd., # Fort Worth, TX 76116		2120 Ridgemar Blvd., # 12 Fort Worth, TX 76116	3. Service Ty pe SCertifie d Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
			4. Restricted Delivery? (Extra Fee)
		² 7001 1140 0002 5601 8981	
U.S. Postal Service CERTIFIED MAIL RECE	IPT Comment	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
(Domestic Mail Only; No Ins		Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature
	.83 ANTA FE	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.	X RBy n Addressee
Postage \$ Certified Fee Return Receipt Fee (Endorsement Required)	2/30	Article Addressed to:	D. Is delivery address different from item 1?
Restricted Delivery Fee (Endorsement Required) Total Postage & Fees I ohn R. Bryant 111 West Silver Lobbs, NM 88240	4.88 8750	John R. Bryant 911 West Silver Hobbs, NM 88240	3. Service Type Certified Mail
		C	4. Restricted Delivery? (Extra Fee)
	<u></u> 5	² 7001 1140 0002 5601 8998	
		PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
U.S. Postal Service CERTIFIED MAIL RECE (Domestic Mail Only; No Ins		 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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, 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature Agent
Postage \$.83 SANTA A	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	2.10 M	Ann McBee Buell 11241 Russwood Circle	3. Service Type
(Endorsement Required) Total Postage & Fees \$ nn McBee Buell	4.88	Dallas, TX 75229	Certified Mail
1241 Russwood Circle			4. Restricted Delivery? (Extra Fee) ☐ Yes
allas, TX 75229		7001 1140 0002 5601 9001	
	20	PS Form 3811, July 1999 Domestic Ret	turn Receipt 102595-00-M-0952
	通热		

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage		COMPLETE THIS SECTION ON DELIVERY
	SENDER: COMPLETE THIS SECTION	
TA FE	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received by (Please Print Clearly) B. Plate of Delivery C. Signature A. Received by (Please Print Clearly) B. Plate of Delivery C. Signature
Postage \$.83 S Certified Fee 2.30	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.	X aun Ha Buell Agent Addresser
Return Receipt Fee (Endorsement Required)	Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 4.88	Ann McBee Buell	
.nn McBee Buell	11241 Russwood Circle	
1241 Russwood Circle Pallas, TX 75229	Dallas, TX 75229	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D.
		4. Restricted Delivery? (Extra Fee)
	C. A. M. A. Landers (Consultant consists label)	
U.S.: Postal Service	7001 1140 0002 5601 9018	
CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage)	PS Form 3811, July 1999 Domestic Re Complete Items 1, 2, and 3. Also complete	turn Receipt 102595-00-M-0952 A. Received by (Please Print Clearly) B. Date of Delivery
	item 4 if Restricted Delivery is desired. Print your name and address on the reverse	
OFFICIAL	so that we can return the card to you. Attach this card to the back of the mailpiece,	C. Signature
Postage \$.83	or on the front if space permits.	Addressed
Certified Fee 2.30 (JUL 2	Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	ChevronTexaco PBBU Attn: NOJV Manager 15 Smith Road	
Total Postage & Fees \$ 4.88	Midland, TX 79705	3. Service Type \$\sum_{\text{X}} \text{Certified Mail} \textsup \text{Express Mail}
Sent Sent Nojv Manager Siree 5 Smith Road		Registered Return Receipt for Merchandise
or Palidland, TX 79705		☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
1 City,	2 Article Number (Canufron contine label)	
PSE.	7001 1140 0002 5601 9025	
	PS Form 3811, July 1999 Domestic Ref	urn Receipt 102595-00-M-0952
U.S. Postal Service GERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage P	rovided)	
	Service Servic	
Postage \$.83 SANTA F	EAL	
Certified Fee 2.30 Return Receipt Fee 1.75	ACC.	
Restricted Delivery Fee (Endorsement Required)	01	
Total Postage & Fees \$ 4.88 \$ 875		
O. Box 73406		
orlouston, TX 77273-3406		
<u> </u>	/heineidha	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only: No Insurance Coverage Provi

(Domestic Wall Only, Notice			
		SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees Ser) avoil, Inc.	.83 .30 SANTA FE 1.75 JUL POI 4.88 SPS 81	 4 if Restricted Delivery is desired. 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. Article Addressed to: Davoil, Inc. P.O. Box 122269 	A. Received by (Please Print Clearly) B. Date of Delivery C. Signature: Addressee D. Is delivery address different from item 1? Yes If YES, eriter delivery address below:
.O. Box 122269	1_2260	Fort Worth, TX 76121-2269	3. Sepvice T/pe
Straort Worth, TX 7612	1-2209		CACertified Mail
City	7 11 16		☐ Registered ☐ Return Receipt for Merchandise ☐ Insure J Mail ☐ C.O.D.
PS	general and the second		4. Restricted Delivery? (Extra Fee)
U.S. Postal Service		2. A 7001 1140 0002 5601 903	2
CERTIFIED MAIL RECE (Domestic Mail Only: No Ins	surance Coverage	PS Form 3811, July 1999 Domestic Re	turn Receipt 102595-00-M-0952
Postage \$.83 CANTA	item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Received by (Please Print Clearly) C. Signature A. B. Date of Deliver A. B. Date of Deliver
Certified Fee	2.30	Article Addressed to:	D. Is delivery address different from item 1? Yes
Return Receipt Fee	l Juli Pops		If YES, ∈nter delivery address below: ☐ No
(Endorsement Required)	1.7	ExxonMobil	
Restricted Delivery Fee (Endorsement Required)	4.88 SPS 87	Attn: Greg Stoute	
Total Postage & Fees \$	4.88	P.O. Box 4707	3. Service Type
Attn: Greg Stoute P.O. Box 4707 Houston, TX 77210-470		Houston, TX 77210-4707	Certified Mail Registered Insured Mail C.O.D.
		2. 7001 1740	4. Restricted Delivery? (Extra Fee) Yes
L.	A	^{2.} 7001 1140 0002 5601 9056	
		PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
U.S. Postal Service CERTIFIED MAIL RECE (Domestic Mail Only: No Ins		 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. 	C. Signature D. is defivery address different from item 1? Yes
Postage \$.83 SANTA	Article Addressed to:	If YES, enter delivery address below:
Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	2.30 1.75		3. Service Type SCerti∗ied Mail □/ Express Mail
Total Postage & Face \$ Trisco Energy LLC	4.88 SPS 8	· Tuisa, Oix /7103	Registered Return Receipt for Merchandis
Attn: Butch Smith	-	_	☐ Insur∋d Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
:431 East 51st Street		2001 1100 0000	Tes
Tulsa, OK 74105		7001 1140 0002 5601 9063	
Ĺ	Pro	PS Form 3811, July 1999 Domestic R	leturn Receipt 102595-00-M-0952

J.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only, No Insurance Coverage F SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete B. Date of Delivery item 4 if Restricted Delivery is desired. 5-03 Print your name and address on the reverse C. Signature so that we can return the card to you. ☐ Agent .83 Attach this card to the back of the mailpiece. Postage ☐ Addressee or on the front if space permits. 2.30 D. Is delivery address different from item 1? ☐ Yes Certified Fee 1. Article Addressed to: If YES, enter delivery address below: Return Receipt Fee 1.75 (Endorsement Required) Restricted Delivery Fee Great Western Drilling Co. Attn: Joint Venture Group Total Postage & Fees | \$ 4.88 Great Western Drilling Co. P.O. Box 1659 3. Service Type Attn: Joint Venture Group Midland, TX 79701 Certified Mail Express Mail P.O. Box 1659 Return Receipt for Merchandise Registered Midland, TX 79701 ☐ Insure J Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 7001 1140 0002 5601 9070 PS Form 3811, July 1999 Domestic Return Receipt U.S. Postal Service 102595-00-M-0952 CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage A. Received by (Please Print Clearly) Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse C. Signatur so that we can return the card to you. ☐ Agent Attach this card to the back of the mailpiece, X ☐ Addressee or on the front if space permits. .83 ☐ Yes Postage erent from item 1? 1. Article Addressed to: If YES, er ter delivery address below: 2.30 JL B Certified Fee Return Receipt Fee (Endorsement Required) 1.75 Larry O. Hulsey Restricted Delivery Fee P.O. Box 1143 4.88 Total Postage & Fees \$ 3. Service Type Graham, TX 76450 Certified Mail ☐ Express Mail Larry O. Hulsey ☐ Registered Return Receipt for Merchandise 3.O. Box 1143 ☐ Insured Mail ☐ C.O.D. Graham, TX 76450 4. Restricted Delivery? (Extra Fee) ☐ Yes 7001 1140 0002 5601 9087 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952 Complete items 1, 2, and 3. Also complete A. Received by (Please Print Clearly) B. Date of Delivery CENTISED MAIL RECEIPT item 4 if Restricted Delivery is desired. 9-02-119 Print your name and address on the reverse so that we can return the card to you. □ Agent Attach this card to the back of the mailpiece, □ Addressee or on the front if space permits. ss different from item 1? 1. Article Addressed to: , if YES, enter delivery address below: ☐ No .83 Postage 2.30 Certified Fee The J. Laughlin Living Trust Josephine Laughlin, Trustee Return Receipt Fee 1.75 (Endorsement Required) 13505 McCall Court, N. E. Service Type Restricted Delivery Fee Certified Mail ☐ Express Mail (Endorsement Required) Albuquerque, NM 87123-1468 Total Postage & Fees | \$ 4.88 ☐ Registered Return Receipt for Merchandise ☐ Insured Mail □ C.O.D The J. Laughlin Living Trust 4. Restricted Delivery? (Extra Fee) ☐ Yes osephine Laughlin, Trustee 3505 McCall Court, N. E. 7001 1140 0002 5601 9100 Albuquerque, NM 87123-1468 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

U.S. Postal Service GERTIFIED MAIL REGEIPT (Domestic Mail Only: No Insurance Coverage F SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete Received by (Please Print Clearly) B. Date of Delive item 4 if Restricted Delivery is desired. Print your name and address on the reverse .83 so that we can return the card to you. ☐ Agent Attach this card to the back of the mailpiece, ☐ Addresse 2.30 or on the front if space permits. Certified Fee D. Is delivery address different from tem 1? ☐ Yes 1. Article Addressed to: If YES, enter delivery address below: □ No Return Receipt Fee 1.75 Restricted Delivery Fee Boya Laugniin Management Trust (Endorsement Required) Total Postage & Fees | \$ 4.88 | Oyu Laugnin Management I rust 4.88 Marion Gardiner Miller Suc. 7 Acct 20-0973-00. Aarion Gardiner Miller Suc. Tr. 3. Service Type 300 N. Marienfeld, # 102 rect 20-0973-00. Cert fied Mail ☐ Express Mail Midland, TX 79701 00 N. Marienfeld, # 102 Return Receipt for Merchandis ☐ Registered ☐ Insured Mail ☐ C.O.D. 1idland, TX 79701 4. Restricted Delivery? (Extra Fee) ☐ Yes 7001 1140 0002 5601 9094 U.S. Postal Service PS Form 3811. July 1999 Domestic Return Receipt 102595-00-M-0952 GERNIFIED MAIL REGEIZI (Domestic Mail Only: No Insurance Coverage item 4 if Hestricted Delivery is desired. Print your name and address on the reverse C. Signature azarus Iron so that we can return the card to you. ☐ Agent Attach this card to the back of the mailpiece. □ Addresse or on the front if space permits. nt from item 1? ☐ Yes 1. Article Addressed to: If YES, enter delivery address below: .83 Postage ☐ No 2,30 Certified Fee Return Receipt Fee (Endorsement Required) 1.75 Leonard Children's Trust 75-6412990 Restricted Delivery Fee (Endorsement Required) Bank One TX, NA, Trustee Service Type Total Postage & Fees \$ P.O. Box 2050 4.88 Certified Mail ☐ Express Mail ☐ Registered Return Receipt for Merchandis Fort Worth, TX 76113 _eonard Children's Trust 75-6412990 ☐ Insured Mail ☐ C.O.D. Bank One TX, NA, Trustee 4. Restricted Delivery? (Extra Fee) ☐ Yes 2.O. Box 2050 7001 1140 0002 5601 9148 Fort Worth, TX 76113 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952 A. Received by (Plass Zarus Aro Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. CERTIFIED MAIL RECEIPE Print your name and address on the reverse C. Signature (Domestic Mail Only: No Insurance Coverage so that we can return the card to you. □ Agent Attach this card to the back of the mailpiece, ☐ Addresse or on the front if space permits. D. Is delivery address different from item 1? ☐ Yes 1. Article Addressed to: If YES, enter delivery address below: ☐ No .83 Postage M. Leonard Revocable Trust 2.30 Certified Fee Bank One TX, NA, Trustee Return Receipt Fee (Endorsement Required) 1.75 P.O. Box 2605 3. Service Type ☐ Express Mail Cer ified Mail Fort Worth, TX 76113-2605 Restricted Delivery Fee (Endorsement Required) Registered Return Receipt for Merchandis ☐ Insured Mail □ C.O.D. Total Postage & Fees | \$ 4.88 4. Restricted Delivery? (Extra Fee) ☐ Yes M. Leonard Revocable Trust Bank One TX, NA, Trustee 7001 1140 0002 5601 9117 13.O. Box 2605

PS Form 3811, July 1999

102595-00-M-095

Domestic Return Receipt

Fort Worth, TX 76113-2605

	•	
U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage F	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
(Domestic Mail Offly, 190	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	A. Received by (Please Print Clearly) B. Date of Delivery AZARUS Iroh C. Signature
Postage \$.88	 Attach this card to the back of the mailpiece, or on the front if space permits. 	X Agent Addressee
Certified Fee Return Receipt Fee (Endorsement Required) 1.75 8501	Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
1 (Endorsement Required) \$ 4.88	M. Leonard Trust 75-6356886 Bank One TX, NA, Trustee	
r and Trust /5-055000	P.O. Box 2050	3. Service Type Li Certifie 1 Mail
3ank One TX, NA, Trustee	Fort Worth, TX 76113	☐ Registered
ort Worth, TX 76113		4. Restricted Delivery? (Extra Fee) ☐ Yes
B	2. Artic 7001 1140 0002 5601 91	124
U.S. Postal Service	PS Form 3811, July 1999 Domestic Re	turn Receipt 102595-00-M-0952
CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage)	item 4 if Restricted Delivery is desired. Print your name and address on the reverse	LAZATUO A MIG 0 4 2003
	so that we can return the card to you. Attach this card to the back of the mailpiece,	C. Signature C. Si
GAN	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address on the free 1? Yes If YES, enter delivery places below:
Postage \$.83 (.30)		
Return Receipt Fee 1.75	Miranda Leonard Trust 75-6356894 Bank One TX, NA, Trustee	
Restricted Delivery Fee (Endorsement Required)	P.O. Box 2050 Fort Worth, TX 76113	3. Service Type Certified Mail Express Mail
Viranda Leonard Trust 75-6356894		☐ Registered Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
Sank One TX, NA, Trustee		4. Restricted ⊃elivery? (Extra Fee) ☐ Yes
2.O. Box 2050 Fort Worth, TX 76113	2. 7001 1140 0002 5601 916	.2
	PS Form 3811, July 1999 Domestic R	eturn Receipt 102595-00-M-0952
U.S. Postal Service. CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverag		
r 92	SANTA	
Postage \$.83 Certified Fee 2.30		
Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	Postn Here	
Total Postage & Fees \$ 4.88 I and a Leonard Revocable Trust		
☐ Bank One TX, NA, Trustee ☑ .O. Box 2605		
Fort Worth, TX 76113-2605		
r		

Moslinsimellois

U.S. Postal Service GERTIFIED MAIL RECEIPT		
(Domestic Mail Only; No Insurance Coverage	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Postage \$.83 Certified Fee 2.30 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Tatal Postage \$.83 2.30 Pos H. Septic Postage	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. Article Addressed to: 	A. Received by (Please Print Clearly) B. Date of Delivery Agant Agent Addressee D. Is delivery address diffusion from item 1? Yes If YES, enter delivery address below:
Total Postage & Fees \$ 4.88 Mary Leonard Children's Trust ank One TX, NA, Trustee O. Box 2605 ort Worth, TX 76113-2605	Mary Leonard Children's Trust Bank One TX, NA, Trustee P.O. Box 2605 Fort Worth, TX 76113-2605	3. Service Type Certif ed Mail
	²	1
U.S. Postal Service . CERTIFIED MAIL RECEIPT	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0952
(Domestic Mail Only) No Insurance Coverage	item 4 if Restricted Delivery is desired. 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.	C. Signature: Agent Addressee
Certified Fee 2.30 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 4.88 C. W. Little Estate Attn: Belva Little	T. W. Little Estate Attn: Belva Little 2513 Boyd Avenue Fort Worth, TX 76109	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
513 Boyd Avenue	<u> </u>	4. Restricte d Delivery? (Extra Fee) ☐ Yes
Fort Worth, TX 76109	2. Art 7001 1140 0002 5601 91 PS Form 3811, July 1999 Domestic Re	
	Domestic Ac	turn Receipt 102595-00-M-0952
U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage)	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A Received by Please Print Clearly) B. Date of Delivery S. 4.0.1 C. Signaturi Agent Addressee
C S C C SANTA	Article Addressed to:	D. Is delivery address different from item 1?
Postage \$.83 Certified Fee 2.30 Return Receipt Fee 1.75	MAGNUM HUMEN PRODUCT Attn: Earl Krieg 600 East Las Col:	
Heturn Heckelpt Fee (Endorsement Required) Flestricted Delivery Fee (Endorsement Required) Total Postage & Fees MAGNUM HUNTEN PROP. ttn: Earl Krieg	600 East Las Colinas Blvd., # 1100 Irving, TX 75039	3. Service Type Certif ed Mail Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
00 East Las Colinas Blvd., # 1100	2. Al 2001 1140 0007 Ft 02 02	
rving, TX 75039	7001 1140 0002 5601 91 PS Form 3811, July 1999 Domestic R	And and an analysis and the state of the sta
	FO FORM JOIT, July 1999 Domestic R	eturn Receipt 102595-00-M-0952

		·
U.S. Postal Service CERTIFIED MAIL RECEIPT		
(Domestic Mail Only; No Insurance Coverage)	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Postage \$.83 Certified Fee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. Article Addressed to: Magnum Hunter Production. Inc. 	A. Received by (Please Print Clearly) C. Signature Addresse D. Is delivery address different from Ten 19 Yes If YES, enter delivery address to the low of Deliver
4.88 [Magnum Hunter Production, Inc.	Attn: Land Department 3500 William D. Tate Ave., # 200	2003
Attn: Land Department 5500 William D. Tate Ave., # 200 Grapevine, TX 76051	Grapevine, TX 76051	3. Service Type Certified Mail Regis: ered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
Server Company of the	^{2.} / 7001 1140 0002 5601 920	9 :
U.S. Postal Service	0011	eturn Receipt 102595-00-M-0952
CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage)	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Received by (Please Print Clearly) B. Date of Delive MCW A AUS 4 2003 C. Signature X
Return Receipt Fee (Endorsement Required) Total Postage & Fees Varathon Oil Company Attn: Joint Interest Manager Postage \$ 2.3 1.7 2.8 4.88 4.88 As a 2.501 As a 3.88 As a 3.	1. Article Addressed to: Marathon Oil Company Attn: Joint Interest Manager P.O. Box 552 Midland, TX 79702	If YES, €nter delivery address below: □ No 3. Service Type ★ Certified Mail □ Express Mail □ Registered ▼ Return Receipt for Merchandis □ Insur∋d Mail □ C.O.D.
Midland, TX 79702		4. Restricted Delivery? (Extra Fee)
! c	2. A. 7001 1140 0002 5601 92	<u>16</u>
	PS Form 3811, July 1999 Domestic R	eturn Receipt 102595-00-M-095
U.S. Postal Service CERTIFIED MAIL RECEIPT (Pomestic Mail Only; No Insurance Coverage	 Gomplete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Heceivec by (Please Print Clearly) B. Date of Deliver Shully Date of Deliver B. Date of Deliver B. Date of Deliver B. Date of Deliver Deliver B. Date of Deliver Deli
	Article Addressed to:	D. Is deliver, address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Postage \$.83 Certified Fee 2.30 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 4.88 AcBee Operating Company LLC	McBee Operating Company LLC 3738 Oak Lawn LB 200 Dallas, TX 75219	3. Service Type Certified Mail
j738 Oak Lawn LB 200 Jallas, TX 75219	2. Article Number (2011) 12 0002 5601 92	23
	0044	eturn Receipt 102595-00-M-0952

AND THE PROPERTY OF THE PARTY.

CERTIFIED MAIL RECEIPT (Domestic Mail Only: No Insurance Coverage Provided) SANT Postage .83 Certified Fee 2.3 Return Receipt Fee Restricted Delivery Fee Total Postage & Fees \$ 4.88 William D. McBee, Jr. 5942 Averill Way Dallas, TX 75225 or Instructions CERTIFIED MAIL RECEIPT COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION mestic Mail Only; No Insurance Coverage P A. Received by (Please Print Clearly) | B. Date of Delivery Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse C. Signature so that we can return the card to you. Attach this card to the back of the mailpiece, .83 Addressee Postage or on the front if space permits. D. Is delivery address different from item 1? 2.30 1. Article Addressed to: Certified Fee If YES, enter delivery address below: Return Receipt Fee Endorsement Required) 1.75 Restricted Delivery Fee Endorsement Required) McRae Management 4.88 Total Postage & Fees | \$ P.O. Box 5401 cRae Management 3. Service Type Midland, TX 79704 Certified Mail ☐ Express Mail O. Box 5401 ☐ Registered idland, TX 79704 C.O.D. Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 7001 1140 0002 5601 9247 PS Form 3811, July 1999 102595-00-M-0952 Domestic Return Receipt item 4 if Restricted Delivery is desired. ERTIFIED MAIL RECEIPT mestic Mail Only: No Insurance Coverage Print your name and address on the reverse so that we can return the card to you. ☐ Agent Attach this card to the back of the mailpiece, ☐ Addressee or on the front if space permits. ☐ Yes ery address different from item 1? 1. Article Addressed to: YES, enter delivery address below: .83 Postage Certified Fee MVP Production Inc. turn Receipt Fee sement Required) 2003 Diamond Blvd. 3. Service Type Concord, CA 94520 sted Delivery Fee Certified Mail ☐/ Express Mail Return Receipt for Merchandise ☐ Registered Postage & Fees | \$ 4.88 Insured Mail □ C.O.D. Production Inc. 4. Restricted Delivery? (Extra Fee) ☐ Yes Diamond Blvd. 2. Article Num 1140 0002 5601 9186 rd, CA 94520 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

U.S. Postal Service Germaled Wall regain (Domestic Mail Only: No Insurance Coverage SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Received by (Please Print Clearly) Complete items 1, 2, and 3. Also complete B. Date of Delivery item 4 if Restricted Delivery is desired. aser Print your name and address on the reverse .83 C. Signature Postage so that we can return the card to you. Attach this card to the back of the mailpiece. 2.30 Certified Fee □ Addressee or on the front if space permits. D. Is delivery address differen Return Receipt Fee (Endorsement Required) 1. Article Addressed to: 1.75 If YES, enter delivery and Restricted Delivery Fee (Endorsement Required) Total Postage & Fees | \$ 4.88 OBO, Inc.)BO, Inc. c/o Lowell S. Dunn II o Lowell S. Dunn II Service Type P.O. Box 2577 P.O. Box 2577 Certif ed Mail Express Mail Hialeah, FL 33012 Hialeah, FL 33012 Registered Return Receipt for Merchandise ☐ Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 7001 1140 0002 5601 9254 U.S. Postal Service GERMEIED MAIL REGEIPT PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952 Domestic Mail Only; No Insurance Coverage item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. □ Agent Attach this card to the back of the mailpiece, □ Addressee or on the front if space permits. Postage ☐ Yes Is deliven, address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) OXY USA Inc. Attn: Joint Venture manager Total Doctana & Face \$ 4.88 3. Service Type P.O. Box 50250 SXY USA Inc. Certified Mail Express Mail Midland, TX 79710 Registered Return Receipt for Merekandise Attn: Joint Venture manager □`C.O.D. Insured Mail s).O. Box 50250 4. Restricted Delivery? (Extra Fee) ☐ Yes Midland, TX 79710 7001 1140 0002 5601 9261 PS Form 3811, July 1999 **Domestic Return Receipt** 102595-00-M-0952 Complete items 1, 2, and 3. Also complete A. Received by Date of Deliver GERRIEIED MAIERIEGERI item 4 if Restricted Delivery is desired. Domestic Mail Only: No Insurance Coverag Print your name and address on the reverse C. Signature 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: If YES, ∉nter delivery a Postage Certified Fee **Davis Payne** Return Receipt Fee (Endorsement Required) P.O. Box 1749 3. Service Type Restricted Delivery Fee Midland, TX 79702 (Endorsement Required) Certified Mail Registered ☐ Express Mail Total Postage & Fees | \$ Return Receipt for Merchandise 4.88 ☐ Insured Mail ☐ C.O.D. **Javis Payne** 4. Restricted Delivery? (Extra Fee) ☐ Yes P.O. Box 1749 A Party Blanch as Management and John B 7001 1140 0002 5601 9278 Midland, TX 79702 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage) SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY ■ Complete items 1, 2, and 3. Also complete ived by Please Print Clearly) Date of Peliver item 4 if Restricted Delivery is desired. Print your name and address on the reverse Signature so that we can return the card to you. Postage ☐ Agent Attach this card to the back of the mailpiece, or on the front if space permits. Certified Fee □ Addressee s delive y address different from item 1? ☐ Yes Return Receipt Fee 1. Article Addressed to: If YES, enter delivery address below: ☐ No (Endorsement Required) Restricted Delivery Fee (Endorsement Required) ratricia renrose Schieffer, 1est. 1) Total Postage & Fees | \$ 4.88 | atricia Penrose Schieffer, Test. Ir. Bank of America, N.A., Agent P.O. Box 2546 Bank of America, N.A., Agent Fort Worth, TX76113-2546 Service Type .O. Box 2546 Certified Mail Express Mail ੌort Worth, TX76113-2546 Return Receipt for Merchandise ☐ Registered `□ `c.o.ɒ. ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes 7001 1140 0002 5601 9292 PS Form 3811, July 1999 Domestic Return Receipt CERTIFIED MAIL RECEIPT 102595-00-M-0952 omestic Mail Only: No Insurance Coverag Complete items 1, 2, and 3. Also complete A. neceived by (Frease Fillit Cically) item 4 if Restricted Delivery is desired. Print your name and address on the reverse C. Signature so that we can return the card to you. □ Agent Attach this card to the back of the mailpiece, ☐ Addressee or on the front if space permits. .83 ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: ☐ No 2.30 Certified Fee Return Receipt Fee 1.75 (Endorsement Required) C. W. Seely Restricted Delivery Fee (Endorsement Required) 815 West 10th Street Fort Worth, TX 76102 Total Postane & Fees | \$ 4.88 3. Service Type J. W. Seely Certified Mail Express Mail 315 West 10th Street ☐ Registered Return Receipt for Merchandise Fort Worth, TX 76102 ☐ Insured Mail □ C.O.D. Restrict∈d Delivery? (Extra Fee) ☐ Yes 2. Art 7001 1140 0002 5601 9308 PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Gaburad Walabacaba Print your name and address on the reverse (Domestic Mail Only; No Insurance Covera C. Signature so that we can return the card to you. X Agent Attach this card to the back of the mailpiece, ☐ Addressed or on the front if space permits. ☐ Yes D. Is delivery address different from item 1? 1. Article Addressed to: If YES, ∉nter delivery address below: □ No .83 Postage 2.30 Certified Fee Norman D. Stovall, Jr. Return Receipt Fee P.O. Box 10 1.75 (Endorsement Required) Sepvice Type Graham, TX 76046 Restricted Delivery Fee (Endorsement Required) Certified Mail Express Mail Return Receipt for Merchandise ☐ Registered Total Postage & Fees | \$ C.O.D. 4.88 ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes Sen orman D. Stovall, Jr. $\frac{1}{Stree}$.O. Box 10 7001 1140 0002 5601 9315 or PGraham, TX 76046 102595-00-M-0952 City, Domestic Return Receipt PS Form 3811, July 1999

S. Postal Service ERTIFIED MAIL RECEIPT	51/2 2	
Domestic Mail Only: No Insurance Coverage		
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Received try (Please Print Clearly) B. Date of De
Postage \$.83	so that we can return the card to you. Attach this card to the back of the mailpiece,	C. Signature Agen
Certified Fee 2.30	or on the front if space permits.	D. Is delivery address different from item 1? Yes
Return Receipt Fee (Endorsement Required) 1.75	Article Addressed to:	If YES, enter delivery address below: No
Restricted Delivery Fee (Endorsement Required)	S. B. Street & Company	
7. B. Street & Company	p O. Box 206	
O. Box 206	Graham, TX 76046	3. Servies Type
Fraham, TX 76046	market	Ce tified Mail
	•	4. Restricted Delivery? (Extra Fee)
	2. Article Nt 7001 1140 0002 5601	9285
U.S. Postal Service CERTIFIED MAIL RECEIPT	PS Form 3811, July 1999 Domestic Re	sturn Receipt 102595-00-M-
(Domestic Mail Only; No Insurance Coverage)	tem 4 if Restricted Delivery is desired.	A. Hecewed/by (Please Print Clearly) B. Date of D
<u>u</u>	Print your name and address on the reverse	C. Sprature
	so that we can return the card to you. Attach this card to the back of the mailpiece,	X A
84	or on the front if space permits.	T Add
Postage \$.83	1. Article Addressed to:	D. If delivery address different from item 42
Certified Fee 2.30		
Return Receipt Fee (Endorsement Required)	Texaco Exploration & Production	
Restricted Delivery Fee (Endorsement Required)	2003 Diamond Blvd.	
☐ Total Postage & Fees \$ 4.88	Concord, CA 94520-0000	3. Service Type
Sefexaco Exploration & Production		Certified Mail Registered Return Receipt for Me Insured Mail C.O.D.
Sin Concord, CA 94520-0000		4. Restricted Delivery? (Extra Fee)
or Concord, CA 94520-0000	2 Article Number Constitution 1	
PSI.	7001 1140 0002 5601 9322	
	PS Form 3811, July 1999 Domestic Re	eturn Receipt 1025
U.S. Postal Service CERTIFIED MAIL RECEIPT	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Received by (Please Print Clearly) B. O.
(Domestic Mail Only; No Insurance Coverage F	Print your name and address on the reverse so that we can return the card to you.	C. Signature
<u> </u>	Attach this card to the back of the mailpiece, or on the front if space permits.	11x Summers
	Article Addressed to:	D. Is delivery address different from item 1?
Postage §		If YES, enter delivery address below:
Certified Fee	Toreador Exploration and Prod.	
Polyun Possint Fos	Attn: Ed Marhenka	
(Endorsement Required)	4809 Cole Avenue, # 108	3. Service Type
Restricted Delivery Fee (Endorsement Required)	Dallas, TX 75267	Certified Mail D'Express Mail
Total Postage & Fees \$ 4.88 Fees \$ 5 Fees \$ 4.88 Fees \$ 4.88 Fees \$ 5 Fees		☐ Registered
ন্তি oreador Exploration and Prod. বি Attn: Ed Marhenka		4. Restricted Delivery? (Extra Fee)
ਜ਼ੂ ਤੰਪ809 Cole Avenue, # 108	PEEP 1042 5000 0411 1007	
TX 75267	DO F 2011 1 does	

PS Form 3811, July 1999

Domestic Return Receipt

	All managements and the second of the second	
U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage. Postage \$.83 Certified Fee 2.30 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. Article Addressed to:	COMFLETE THIS SECTION ON DELIVERY Received by (Please Print Clearly) Signature Agent Addres D. Is delivery address different from item 1? Yes If Yt:S, enter delivery address below:
Total Postage & Fees \$ 4.88 Se Furnco Inc. Sito. O. Box 1240 2017 raham, TX 76450-1240	Turnco Inc. P.O. Box 1240 Graham, TX 76450-1240	3. Serv ce Type Certified Mail
<u> </u>	^{2.} 7001 1140 0002 5601 934	<u> </u>
U.S. Postal Service GERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage I	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: 	A. Received by (Please Print Clearly) B. Date of D C. Signature X July Thousant Garden Ager G Adden D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Return Receipt Fee idorsement Required) stricted Delivery Fee idorsement Required) stal Postage & Fees Mary D. Fleming Walsh Attn: Gary F. Goble 100 West Seventh St., # 1007	Fort Worth, TX 76102	3. Service Type Certified Mail
ort Worth, TX 76102		353
	PS Form 3811, July 1999 Domestic Re	eturn Receipt 102595-00-M-0