

THE OIL CONSERVATION COMMISSION

CASE NO. 14001 & 14002

EXHIBIT

27

HOLLAND & HART^{LLP}



William F. Carr
wcarr@hollandhart.com

August 22, 2008

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: ALL AFFECTED INTEREST OWNERS IN THE QUAIL-QUEEN UNIT AREA.

Re: Case No. 14001 & Case No. 14002 - Amended Application of Chesapeake Operating Inc. for statutory unitization, of the Quail-Queen Unit Area, Lea County, New Mexico and for Approval of a Waterflood Project and Qualification of the Project Area of the Quail-Queen Unit Area for the Recovered Oil Tax Rate Pursuant to the Enhanced Oil Recovery Act, Lea County, New Mexico.

Ladies and Gentlemen:

By letter dated July 1, 2008, you were advised that Chesapeake Exploration, L.L.C. had received an order approving an application for statutory unitization of the Quail-Queen Unit Area, Lea County, New Mexico as well as approval of a waterflood project and qualification of the recovered oil tax rate pursuant to the Enhanced Oil Recovery Rate. Chesapeake has amended the application to reflect the correct operator name which is Chesapeake Operating Inc. There are no other changes to the application or previously provided agreements. The amended application is enclosed for your reference.

This application has been set for hearing before the New Mexico Oil Conservation Commission at 9 a.m. on September 11, 2008. 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 affected party 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 with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

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

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ☺

HOLLAND & HART^{LLP}



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,

A handwritten signature in cursive script, appearing to read "William F. Carr".

William F. Carr

Attorney for Chesapeake Operating Inc.

Enclosure

cc: Mr. Terry Frohnappel

Affidavit of Publication

STATE OF NEW MEXICO)
) ss.
 COUNTY OF LEA)

Joyce Clemens being first duly sworn on oath deposes and says that she is Advertising Director of THE LOVINGTON LEADER, a daily newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

That the notice which is hereto attached, entitled

Legal Notice

was published in a regular and entire issue of THE LOVINGTON LEADER and not in any supplement thereof, for

one (1) day, beginning with the issue of August 28, 2008 and ending with the issue of August 28, 2008.

And that the cost of publishing said notice is the sum of \$ 82.40 which sum has been (Paid) as Court Costs.

Joyce Clemens

Subscribed and sworn to before me this 10th day of September 2008

Jebbie Schilling

Jebbie Schilling
 Notary Public, Lea County, New Mexico
 My Commission Expires June 22, 2010

**LEGAL NOTICE
 NOTICE OF PUBLICATION
 STATE OF NEW MEXICO
 ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
 OIL CONSERVATION DIVISION
 SANTA FE, NEW MEXICO**

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on September 11, 2008, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-475-3458 or through the New Mexico Relay Network, 1-800-659-3779 by September 9, 2008. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:
 All named parties and persons having any right, title, interest or claim in the following cases and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

CASE 14002:

Re-Advised Amended Application of Chesapeake Operating Inc. for approval of a waterflood project and qualification of the Project Area of the Quail-Queen Unit for the Recovered Oil Tax rate pursuant to the Enhanced Oil Recovery Act, Lea County, New Mexico. Applicant in the above-styled cause, seeks approval of its Quail-Queen Unit Waterflood Project by injection of water into the Queen formation through six injection wells located in the following described area:

TOWNSHIP 12 SOUTH, RANGE 34 EAST, N10PM
 Section 1: S2, NE/4
 Section 2: W/2 NW/4, NW/4, SW/4
 Section 14: NE/4, N/2 NW/4

The applicant requests that the Division establish procedures for the administrative approval of additional injection wells within the unit area without the necessity of further hearings and the adoption of any provisions necessary for such other matters as may be appropriate for said waterflood operations. Said area is located approximately 22 miles west of Hobbs, New Mexico.

Given under the Seal of the State of New Mexico Oil Conservation Commission at Santa Fe, New Mexico on this 22nd day of August 2008.

STATE OF NEW MEXICO
 OIL CONSERVATION DIVISION

Mark E. Beardsley, P.E., Director
 Published in the Lovington Leader August 28, 2008

Attn: Olivia

Affidavit of Publication

STATE OF NEW MEXICO)
) ss.
COUNTY OF LEA)

Joyce Clemens being first duly sworn on oath deposes and says that she is Advertising Director of **THE LOVINGTON LEADER**, a daily newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

That the notice which is hereto attached, entitled

Legal Notice

was published in a regular and entire issue of **THE LOVINGTON LEADER** and not in any supplement thereof, for *one (1) day*, beginning with the issue of *August 28*, 2008 and ending with the issue of *August 28*, 2008.

And that the cost of publishing said notice is the sum of \$ *98.52* which sum has been (Paid) as Court Costs.

Joyce Clemens
Subscribed and sworn to before me this *10th day of September 2008*

Debbie Schilling
Debbie Schilling
Notary Public, Lea County, New Mexico
My Commission Expires June 22, 2010

LEGAL NOTICE NOTICE OF PUBLICATION

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

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on September 11, 2008, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appointed for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1778 by September 1, 2008. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF NEW MEXICO TO:
All named parties and persons having any right, title, interest or claim in the following cases and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

CASE 14001:

(Re-Advertised) Amended Application of Chesapeake Operating Inc. for statutory unitization of the Quail-Queen Unit Area, Lea County, New Mexico. Applicant in the above-styled cause, seeks an order unitizing, for the purpose of establishing an enhanced recovery project, all mineral interest in the Queen formation, Quail-Queen Pool, underlying 640 acres, more or less, of State and Fee lands in the following acreage:

TOWNSHIP 19 SOUTH, RANGE 34 EAST, NMPM
Section 11: S/2, NE/4
Section 13: W/2 NW/4,
Section 14: NE/4, N/2 NW/4

Said unit to be designated the Quail-Queen Unit. Among the matters to be considered at the hearing will be the necessity of unit operations; the designation of a unit operator; the designation of horizontal and vertical limits of the unit area; the determination of the fair, reasonable, and equitable allocation of production and costs of production, including capital investment, to each of the various tracts in the unit area; the determination of credits and charges to be made among the various owners in the unit area for their investment in wells and equipment and such other matters as may be necessary and appropriate for carrying on efficient unit operations; including but not limited to, unit voting procedures, selection, removal or substitution of unit operator, and time of commencement and termination of unit operations. Applicant also requests that any such order issued in this case include a non-consent penalty for risk to be charged against carried working interests within the unit area upon such terms and conditions to be determined by the Division as just and reasonable. Said unit area is located approximately 22 miles West of Hobbs, New Mexico.

Given under the Seal of the State of New Mexico Oil Conservation Commission at Santa Fe, New Mexico on this 22nd day of August 2008.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION
Mark E. Faemire, P.E., Director
Published in the Lovington Leader August 28, 2008.

EXHIBIT A

**APPLICATION OF
CHESAPEAKE EXPLORATION L.L.C. FOR STATUTORY UNITIZATION
OF THE QUAIL QUEEN UNIT AREA, LEA COUNTY, NEW MEXICO.**

NOTIFICATION LIST

MINERAL INTEREST OWNER

State of New Mexico
Commissioner of Public Lands
310 Old Santa Fe Trail
Post Office Box 1148
Santa Fe, New Mexico 87504-1148

OVERRIDING ROYALTY INTEREST OWNERS

Cimarex Energy Company
15 E. 5th Street, Suite 1000
Tulsa, Oklahoma 74103-4346

Columbine II Ltd Partnership
Post Office Box 22854
Denver, Colorado 80222

Diverse GP III
111 Fannin, Suite 680
Houston, Texas 77002-6922

Macey & Mershon Oil Inc.
1801 Broadway, Suite 1600
Denver, Colorado 80201

Magnum Hunter Production Inc.
4031 Solutions Center
#774031
Chicago, Illinois 60677-4000

Ann W. Morris
2865 Macvicar
Topeka, Kansas 66611-1704

Paul and Patricia Slayton

Post Office Box 2035
Roswell, New Mexico 88202-2035

WORKING INTEREST OWNERS

Roy G. Barton and Opal Barton
Rev. Trust, Roy G. Barton, Jr.
Aka George Barton Trust
1919 N. Turner Street
Hobbs, New Mexico 88240-2712

William A. Bradshaw
701 Three Cross
Roswell, New Mexico 88201

CLM Production Company
Post Office Box 881
Roswell, New Mexico 88202

First Century Oil Inc.
Post Office Box 1518
Roswell, New Mexico 88201-1518

Fisco Inc.
Post Office Box 3087
Roswell, New Mexico 88202-3087

Randall R. Fort
9716 Admiral Enerson Ave NE
Albuquerque, New Mexico 87111

Tommy L. Fort
Post Office Box 2044
Midland, Texas 79702-2044

New Mexico Western Minerals, Inc.
Post Office Box 1738
Roswell, New Mexico 88202-1738

Pintail Production Company Inc.
3450 West Vickery Blvd.
Fort Worth, Texas 76107

Patricia L. Pruitt
1405 Latigo Lane
Roswell, New Mexico 88201-3430

Pride Energy Company
Post Office Box 701950
Tulsa, Oklahoma 74170-1950

Read & Stevens Inc.
Post Office Box 1518
Roswell, New Mexico 88201-1518

Laura Read
Post Office Box 1518
Roswell, New Mexico 88201-1518

Gene A. Snow Operating
Post Office Box 1270
Lovington, New Mexico 88260

Joe M. and Nancy Wigley
1502 N. Missouri
Roswell, New Mexico 88201

OFFSET LESSEES/MINERAL OWNERS

Big Three Energy Group LLC
1801 West 2nd
Roswell, NM 88201

Chevron USA, Inc.
PO Boc 1635
Houston, TX 77251

Charles D. Ray
PO Box 51608
Midland, TX 79710

Crown Oil Partners III, LP
PO Box 51608

Devon Energy Production Company
Attn: Linda Guthrie
20 N Broadway
Oklahome City, OK 73102

Featherstone Development Corp

1801 West 2nd
Roswell, NM 88201

Marbob Energy Corp
PO Box 227
Artesia, NM 88211-0227

Parrot Head Properties LLC
1801 West 2nd
Roswell, NM 88201

Pitch Energy Corp
PO Box 304

Prospector LLC
1801 West 2nd
Roswell, NM 88201

Read & Stevens
PO Box 2126
Roswell, NM 88201

United States Department of Interior
Bureau of Land Management
Roswell Field Office
2909 West Second Street
Roswell, NM 88201

7006 2760 0001 6391 5816

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our web

OFFICIAL

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage \$.76
Certified Fee 2.70
Return Receipt Fee (Endorsement Required) 2.20
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.66

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. Signature Agent Addressee
X *[Signature]*
B. Received by (Printed Name) C. Date of Delivery

To:
State of New Mexico
Commissioner of Public Lands
310 Old Santa Fe Trail
Post Office Box 1148
Santa Fe, New Mexico 87504-11

1. Article Addressed to:
state of NM,
Commissioner of Public Lands
310 Old Santa Fe Trail
PO Box 1148
Santa Fe NM 87504

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

7006 2760 0001 6391 5816

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
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OFFICIAL

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage \$.76
Certified Fee 2.70
Return Receipt Fee (Endorsement Required) 2.20
Restricted Delivery Fee (Endorsement Required) 5.1
Total Postage & Fees \$ 10.76

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. Signature Agent Addressee
X *[Signature]*
B. Received by (Printed Name) C. Date of Delivery
[Signature] AUG 25

To:
Cimarex Energy
15 E. 5th Street
Tulsa, Oklahoma

1. Article Addressed to:
Cimarex Energy Company
15 E. 5th Street, Suite 1000
Tulsa, Oklahoma 74103-4346

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our web

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SENDER: COMPLETE THIS SECTION

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Return Receipt Fee (Endorsement Required) 2.20
Restricted Delivery Fee (Endorsement Required) 5.1
Total Postage & Fees \$ 10.76

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. Signature Agent Addressee
X *[Signature]*
B. Received by (Printed Name) C. Date of Delivery
[Signature] AUG 25

To:
Columbine II Ltd
Post Office Box 2
Denver, Colorado

1. Article Addressed to:
Columbine II Ltd Partnership
Post Office Box 22854
Denver, Colorado 80222

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

2. Article Number (Transfer from service label) 7006 2760 0001 6391 5816

7006 2760 0001 6391 5816

7006 2760 0001 6391 5809

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
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Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66



Diverse GP III
111 Fannin, Suite 680
Houston, Texas 77002-6922

or instructions

7006 2760 0001 6391 5793

U.S. Postal Service CERTIFIED MAIL™ (Domestic Mail Only)
For delivery information visit our website at www.usps.com

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.

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

1. Article Addressed to:
**Macey & Mershon Oil Inc.
1801 Broadway, Suite 1600
Denver, Colorado 80201**

2. Article Number (Transfer from service label) **7006 2760 0001 6391 5793**

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Nola Porter* Agent Addressee

B. Received by (Printed Name) *Nola Porter* C. Date of Delivery *8-25-08*

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 2760 0001 6391 5786

U.S. Postal Service CERTIFIED MAIL™ (Domestic Mail Only)
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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.

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

1. Article Addressed to:
**Magnum Hunter Production Inc.
4031 Solutions Center
#774031
Chicago, Illinois 60677-4000**

2. Article Number (Transfer from service label) **7006 2760 0001 6391 5786**

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Simon* Agent Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 2760 0001 6391 5779

U.S. Postal Service
CERTIFIED MAIL - REC
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OFFICIAL

Postage	\$ 76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Ann W. Morris
2865 Macvicar
Topeka, Kansas 66611-1704

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.

1. Article Addressed to:

Ann W. Morris
2865 Macvicar
Topeka, Kansas 66611-1704

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Ann W. Morris Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
8-25

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7006 2760 0001 6391 5779

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL - REC
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For delivery information, visit our website.

OFFICIAL

Postage	\$ 76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Paul and Patricia Slayton
Post Office Box 2035
Roswell, New Mexico 82035

- 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:

Paul and Patricia Slayton
Post Office Box 2035
Roswell, New Mexico 88202-2035

A. Signature
Jane Andrews Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Jane Andrews 8-25-08

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

Box 2035

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7006 2760 0001 6391 5762

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.

1. Article Addressed to:

Roy G. Barton and Opal Barton
Rev. Trust, Roy G. Barton, Jr.
Aka George Barton Trust
1919 N. Turner Street
Hobbs, New Mexico 88240-2712

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Brenda Stewart Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Brenda Stewart 8/25/08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7006 2760 0001 6391 5755

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

U.S. Postal Service
CERTIFIED MAIL - REC
(Domestic Mail Only; No Insurance Coverage)

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Postage	\$ 76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Roy G. Barton and Opal Barton
Rev. Trust, Roy G. Barton, Jr.
Aka George Barton Trust
1919 N. Turner Street
Hobbs, New Mexico 88240-2712

7006 2760 0001 6391 5755

7006 2760 0001 6391 5745

U.S. Postal Service
CERTIFIED MAIL, RECEIPT
(Domestic Mail Only, No Insurance Coverage)
For delivery information, visit our website at www.usps.com
OFFICIAL

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

William A. Bradshaw
701 Three Cross
Roswell, New Mexico

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.

1. Article Addressed to:
William A. Bradshaw
701 Three Cross
Roswell, New Mexico 88201

2. Article Number (Transfer from service label) 7006 2760 0001 6391 5748

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
William A. Bradshaw

B. Received by (Printed Name) Date of Delivery
William A. Bradshaw *8-25-08*

C. Date of Delivery Yes No

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 2760 0001 6391 5731

U.S. Postal Service
CERTIFIED MAIL, RECEIPT
(Domestic Mail Only, No Insurance Coverage)
For delivery information, visit our website at www.usps.com
OFFICIAL

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

CLM Production Comp
Post Office Box 881
Roswell, New Mexico

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.

1. Article Addressed to:
CLM Production Company
Post Office Box 881
Roswell, New Mexico 88202

2. Article Number (Transfer from service label) 7006 2760 0001 6391 5731

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
John C. Maxey

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

C. Date of Delivery Yes No

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 2760 0001 6391 5724

U.S. Postal Service
CERTIFIED MAIL, RECEIPT
(Domestic Mail Only, No Insurance Coverage)
For delivery information, visit our website at www.usps.com
OFFICIAL

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

First Century Oil Inc.
Post Office Box 1518
Roswell, New Mexico 88201-1518

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.

1. Article Addressed to:
First Century Oil Inc.
Post Office Box 1518
Roswell, New Mexico 88201-1518

2. Article Number (Transfer from service label) 7006 2760 0001 6391 5724

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Consuelo Campos

B. Received by (Printed Name) Date of Delivery
Consuelo Campos *8-25-08*

C. Date of Delivery Yes No

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7001 1140 0002 9558 8674

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

Se
Fisco Inc.
Post Office Box 3087
Roswell, New Mexico
3087

- 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:

Fisco Inc.
Post Office Box 3087
Roswell, New Mexico 88202-3087

A. Signature

X *[Signature]* Agent Addressee

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: *8-25-08*

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

3. Service Type
- Certified Mail Express Mail
 - Registered Return Receipt for Merchandise
 - Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7001 1140 0002 9558 8674

7001 1140 0002 9558 8667

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

S
Randall R. Fort
9716 Admiral Enerson
Albuquerque, New
87111

- 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:

Randall R. Fort
9716 Admiral Enerson Ave NE
Albuquerque, New Mexico 87111

A. Signature

X *[Signature]* Agent Addressee

B. Received by (Printed Name): *P BOVERIE* C. Date of Delivery: *8-23-08*

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

3. Service Type
- Certified Mail Express Mail
 - Registered Return Receipt for Merchandise
 - Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7001 1140 0002 9558 8667

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance Coverage Provided)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7001 1140 0002 9558 8650

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total	\$ 5.66

Sent
Tommy L. Fort
Post Office Box 2044
Midland, Texas 79702-2044

Postmark Here

Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

7001 1140 0002 9558 8643

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.16

- 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. Signature
 X *Michael P. Carrico* Agent Addressee

B. Received by (Printed Name)
Michael P. Carrico

C. Date of Delivery
8-25-08

1. Article Addressed to:
 New Mexico Western Minerals, Inc.
 Post Office Box 1738
 New Mexico Western Roswell, New Mexico 88202-1738
 Inc.
 Post Office Box 1738
 Roswell, New Mexico
 1738

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label) **7001 1140 0002 9558 8643**

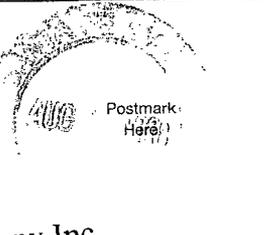
U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

OFFICIAL USE

7001 1140 0002 9558 8636

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.16



Pintail Production Company Inc.
 3450 West Vickery Blvd.
 Fort Worth, Texas 76107

Returned

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

7001 1140 0002 9558 8629

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.11

- 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. Signature
 X *Patricia L. Pruitt* Agent Addressee

B. Received by (Printed Name)
 Patricia L. Pruitt

C. Date of Delivery
8-26-08

1. Article Addressed to:
 Patricia L. Pruitt
~~1405 Latigo Lane~~ *905 Belaire*
 Roswell, New Mexico 88201-3430

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label) **7001 1140 0002 9558 8629**

Sen. Patricia L. Pruitt
 1405 Latigo Lane
 Roswell, New Mexico
 3430

**U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)**

7001 1140 0002 9558 8612

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11



Pride Energy Company
Post Office Box 701950
Tulsa, Oklahoma 74170-1950

Instructions

**U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)**

7001 1140 0002 9558 8605

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

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.

1. Article Addressed to:
Read & Stevens Inc.
Post Office Box 1518
Roswell, New Mexico 88201-1518

Read & Stevens Inc.
Post Office Box 1518
Roswell, New Mexico 1518

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
* Consuelo Campuz

B. Received by (Printed Name) C. Date of Delivery
Consuelo Campuz 8-25-8

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label) 7001 1140 0002 9558 8605

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

**U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)**

7001 1140 0002 9558 8582

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

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.

1. Article Addressed to:
Gene A. Snow Operating
Post Office Box 1270
Lovington, New Mexico 88260

Gene A. Snow Op
Post Office Box 12
Lovington, New M

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
* Harvey D Taylor

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

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

1. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label) 7001 1140 0002 9558 8582

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7001 1140 0002 9558 8575

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Ins)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage \$.76
Certified Fee 2.70
Return Receipt Fee (Endorsement Required) 2.15
Restricted Delivery Fee (Endorsement Required) _____
Total Postage & Fees \$ 5.61

- 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:

Joe M. and Nancy Wigley
1502 N. Missouri
Roswell, New Mexico 88201

A. Signature
 Scott Burns Agent Addressee

B. Received by (Printed Name) Scott Burns C. Date of Delivery 8-25-08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

To: Joe M. and Nancy
1502 N. Missouri
Roswell, New M

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Ins)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage \$.71
Certified Fee 2.70
Return Receipt Fee (Endorsement Required) 2.15
Restricted Delivery Fee (Endorsement Required) _____
Total Postage & Fees \$ 5.56

- 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:

Big Three Energy Group LLC
1801 West 2nd
Roswell, NM 88201

A. Signature
 John Gray Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 9-2-08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

To: Big Three Energy
1801 West 2nd
Roswell, NM 88

2. Article Number 7001 1140 0002 9558 856A
(Transfer from service label)

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Ins)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage \$.71
Certified Fee 2.70
Return Receipt Fee (Endorsement Required) 2.2
Restricted Delivery Fee (Endorsement Required) _____
Total Postage & Fees \$ 5.61

- 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:

Chevron USA, Inc.
PO Boc 1635
Houston, TX 77251

A. Signature
 [Signature] Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 5/2/08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

To: Chevron USA, Inc
PO Boc 1635
Houston, TX 7725

2. Article Number 7001 1140 0002 9558 8551
(Transfer from service label)

7001 1140 0002 9558 8551

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Instructions

7001 1140 0002 9558 8544

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

SENDER: COMPLETE THIS SECTION

SECTION ON DELIVERY

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Charles D. Ray
PO Box 51608
Midland, TX 79710

- 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:

Charles D. Ray
PO Box 51608
Midland, TX 79710

A. Signature
 Charles D. Ray Agent Addressee

B. Received by (Printed Name) *FRANK RILEY* C. Date of Delivery *8-27-08*

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

7001 1140 0002 9558 8537

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

SENDER: COMPLETE THIS SECTION

SECTION ON DELIVERY

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Sen: Crown Oil Partner:
PO Box 51608
Midland, TX 79710

- 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:

Crown Oil Partners III, LP
PO Box 51608
Midland, TX 79710

A. Signature
 Charles D. Ray Agent Addressee

B. Received by (Printed Name) *FRANK RILEY* C. Date of Delivery *8-28-08*

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7001 1140 0002 9558 8537

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 2760 0001 6391 5854

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

SENDER: COMPLETE THIS SECTION

SECTION ON DELIVERY

Postage	\$.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.11

Devon Energy Production
Company
Attn: Linda Guthrie
20 N Broadway
Oklahoma City, OK 73102

- 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:

Devon Energy Production Company
Attn: Linda Guthrie
20 N Broadway
Oklahoma City, OK 73102

A. Signature
 Linda Guthrie 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
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7006 2760 0001 6391 5854

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

7006 2760 0001 6391 5847

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

For delivery information, visit our website

OFFICIAL

Postage	\$ 1.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	

PS Form 3800, August 2006

SENDER: GO

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:

Featherstone Development Corp
1801 West 2nd
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery
 Roswell NM 88202 9-2-08

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

P.O. Box 429
Roswell NM 88202

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7001 1140 0002 9558 8506

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

OFFICIAL

Postage	\$ 1.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	

PS Form 3800, January 2001

2. Article Number (Transfer from service label) 7006 2760 0001 6391 5847

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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:

Marbob Energy Corp
PO Box 227
Artesia, NM 88211-0227

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery
 Artesia NM 88211-0227

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7001 1140 0002 9558 8490

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance)

OFFICIAL

Postage	\$ 1.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	

PS Form 3800, January 2001

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.

1. Article Addressed to:

Parrot Head Properties LLC
1801 West 2nd
Roswell, NM 88201

2. Article Number (Transfer from service label) 7001 1140 0002 9558 8490

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery
 Parrot Head Properties LLC 9-26-08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only, No Insurance)

SENDER: COM1

PLACE STICKER AT TOP OF ENVELOPE OR FRONT OF MAILPIECE TO IDENTIFY MAIL

IN DELIVERY

7001 1140 0002 9558 8483

Postage	\$ 1.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.66

St Pitch Energy Corp
St PO Box 304
St Artesia, NM 878211-0304

- 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:

Pitch Energy Corp
PO Box 304
Artesia, NM 878211-0304

A. Signature Agent Addressee
 X *[Signature]*
 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
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number 7001 1140 0002 9558 8483
 (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only, No Insurance)

7001 1140 0002 9558 8476

Postage	\$ 1.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.16

Sent Prospector LLC
Street or PO 1801 West 2nd
City, S Roswell, NM 88201

- 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:

Prospector LLC
1801 West 2nd
Roswell, NM 88201

A. Signature Agent Addressee
 X *[Signature]*
 B. Received by (Printed Name)
 C. Date of Delivery 9-2-08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number 7001 1140 0002 9558 8476
 (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only, No Insurance)

7001 1140 0002 9558 8469

Postage	\$ 1.76
Certified Fee	2.70
Return Receipt Fee (Endorsement Required)	2.20
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.16

St Read & Stevens
St PO Box 2126
St Roswell, NM 88201

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.

1. Article Addressed to:

Read & Stevens
PO Box 2126
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X *[Signature]*
 B. Received by (Printed Name) *[Signature]*
 C. Date of Delivery 8-25-08

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number 7001 1140 0002 9558 8469
 (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7001 1140 0002 9558 8452

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance)

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Carol Hines Agent
 Addressee

B. Received by (Printed Name) *CH HINES* C. Date of Delivery *8/25/08*

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

Postage \$ *.76*

Certified Fee *2.70*

Return Receipt Fee (Endorsement Required) *2.20*

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees **\$ 5.66**

United States Department of Interior
 Bureau of Land Management
 Roswell Field Office
 2909 West Second Street
 Roswell, NM 88201

1. Article Addressed to:

United States Department of Interior
 Bureau of Land Management
 Roswell Field Office
 2909 West Second Street
 Roswell, NM 88201

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number **7001 1140 0002 9558 8452**
 (Transfer from service label)

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only, No Insurance)

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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Consuelo Campos Agent
 Addressee

B. Received by (Printed Name) *Consuelo Campos* C. Date of Delivery *8-25-08*

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

Postage \$ *.76*

Certified Fee *2.70*

Return Receipt Fee (Endorsement Required) *2.20*

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees **\$ 5.66**

Laura Read
 Post Office Box 151
 Roswell, New Mexico
 1518

1. Article Addressed to:

Laura Read
 Post Office Box 1518
 Roswell, New Mexico 88201-1518

Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number **7001 1140 0002 9558 8599**
 (Transfer from service label)