

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

APPLICATION OF GP II ENERGY, INC.
FOR APPROVAL OF A WATERFLOOD PROJECT,
EDDY COUNTY, NEW MEXICO.

CASE NO. 12112

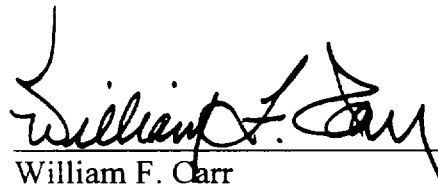
APPLICATION OF GP II ENERGY, INC.
FOR STATUTORY UNITIZATION,
EDDY COUNTY, NEW MEXICO.

CASE NO. 12113

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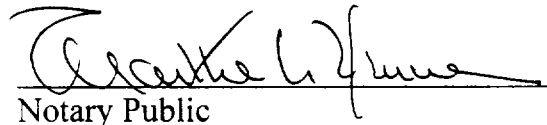
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

William F. Carr, attorney in fact and authorized representative of GP II Energy, Inc., 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

SUBSCRIBED AND SWORN to before me this 3rd day of February, 1999.



Notary Public

My Commission Expires:

August 19, 1999

EXHIBIT A

Square Lake Partners, LLC
Post Office Box 50682
Midland, TX 79710

K. M. Jones Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Staples Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Max W. Coll, II
Rt. 9, Box 72F
Santa Fe, NM 87505

Jon F. Coll
Post Office Box 1818
Roswell, NM 88202

Charles H. Coll
Post Office Box 1818
Roswell, NM 88202

Borland, Inc.
#9 Westwood
Dothan, AL 36303

C. Y. Production, LLC
Post Office Box 563
Boerne, TX 78006

GBN, Inc.
2503 Elmwood Circle North
Wichita Falls, TX 76308

R. Mace Holman, Jr.
Post Office Box 1414
Dothan, AL 36302

J. L. Smith Co., Inc.
4204 S. Park Ave.
Dothan, AL 36301

Lathrop Diamond Bit
5080 Spectrum Dr., LB 51
Dallas, TX 75248-4621

Rachel Lyman
Post Office Box 3726
Midland, TX 79702

C.V. Lyman Testamentary Trust
Post Office Box 3726
Midland, TX 79702

Pride Energy Co.
Post Office Box 701602
Tulsa, OK 74170

RBP Land Company
Post Office Box 10392
Midland, TX 79702

SE Com & Equip. Co.
Post Office Box 1646
Dothan, AL 36302

W. Watson, Inc.
Post Office Box 2253
Midland, TX 79702

Chase Oil Corp.
Post Office Box 1767
Artesia, NM 88211

Marbob Energy Corp.
Post Office Drawer 217
Artesia, NM 88210

Bulldog Energy Corp.
Post Office Box 668
Artesia, NM 88211

David C. Collier
3400 West 8th Street
Roswell, NM 88201

Robert S. Gleason
Post Office Box 798
Artesia, NM 88211

BHW, LLC.
101 South 4th Street
Artesia, NM 88210

B & H Properties
2410 Auburn Place
Midland, TX 79705

Logan Royalties, Ltd.
Post Office Box 804
Midland, TX 79702

Rocky Mountain Resources
Post Office Box 7405
Midland, TX 79708

Victor J. Sirgo
3300 North "A" Street
Bldg. 2, Suite 104
Midland, TX 79705

Selma E. Andrews #518801
c/o NationsBank Trust
Post Office Box 840738
Dallas, TX 75284

James N. Coll
Post Office Box 1818
Roswell, NM 88202

Columbine II Ltd. Partnership
Post Office Box 22066
Denver, CO 80222

Vera Cox Haefs
9909 Glenrio Lane
Dallas, TX 75220

James Petroleum Trust
Post Office Box 4648
Tulsa, OK 74159

Tommye June Robinson
5809 Wedgeworth Rd.
Fort Worth, TX 76133

Ward Investment, Ltd.
101 South 4th Street
Artesia, NM 88210

Carl Brininstool
201 Blackberry
Midland, TX 79707

Pogar Petroleum, Ltd.
Post Office Box 10095
Midland, TX 79702

William J. and Margaret Colby
901 W. 6th Street
Silver City, NM 88061

OXY USA, Inc.
Post Office Box 841735
Dallas, TX 75284-1735

Braille Institute of America
Oil & Gas Trust NCNB
Post Office Box 840738
Dallas, TX 75284

Max W. Coll
Post Office Box 1818
Roswell, NM 88202

Rose M. Cottingham
1119 Montedito
San Angelo, TX 76901

Higgins Trust, Inc.
Post Office Box 2421
Gainesville, GA 30505

Marshall & Winston, Inc.
Post Office Box 50880
Midland, TX 79710

Josephine Smith Trust
Wells Fargo Bank
Post Office Box 5825
Denver, CO 80217

Gertrude McDorman, Trustee
511 Centre Avenue
Artesia, NM 88210

Robert E. Boling
305 South 5th Street
Artesia, NM 88210

Therylene K. Helm
4401 Edmonson
Dallas, TX 75205

Mrs. T. B. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

Bert H. Murphy
Post Office Drawer 2164
Roswell, NM 88201

Lillie Mabel Bates
Post Office Box 840
Artesia, NM 88211-0840

Wendell W. Iverson 1990 Trust
Post Office Box 10508
Midland, TX 79702

PIP Trust
Post Office Box 10508
Midland, TX 79702

John Ashby Yates
105 South 4th Street
Artesia, NM 88210

Tonya W. Malliard
135 Van Winkle Drive
San Anselmo, CA 94960

SJI, Jr. 1990 Trust
Post Office Box 10508
Midland, TX 79702

Mae Chang Plasch
3883 Turtle Creek Blvd., #1004
Dallas, TX 75219-4429

Harvey E. Yates
Post Office Box 1933
Roswell, NM 88208-1933

Sharbro Oil Ltd., Co.
Post Office Box 840
Artesia, NM 88211-0840

Lynne Wildman Chapman
1324 Old Gulph Rd.
Villanova, PA 19085

Charles Deguigne
1001 Chelsea Way
Redwood City, CA 94061-3665

S. P. Yates
207 Fourth Street
Artesia, NM 88210-2193

Siegfried J. Iverson, Jr.
2518 Sinclair
Midland, TX 79705-8422

John & Peggy Yates Estate
105 South 4th Street
Artesia, NM 88210

Ray and Karen Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Robert N. Avery Martial Trust
74133 El Paseo, Suite E
Palm Desert, CA 92260-4123

Jack D. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

Roger D. Lapham, Jr.
Post Office Box 721
Pebble Beach, CA 93953-0721

Texacal Oil & Gas, Inc.
4299 McCarthur Blvd., Suite 207
Newport Beach, CA 92660

Lloyd McGhee
Post Office Box 16399
Fort Worth, Tx 76162-0399

Hal C. Porter
Post Office Box 17004
Fountain Hills, AZ 85269-7004

Phoebe Shelton
Post Office Box 430
Amarillo, TX 79105-0430

Wendell W. Iverson
Post Office Box 1343
Midland, TX 79702

Christian DeGuigue
Post Office Box 1739
San Mateo, CA 94401-0920

Summit Overseas Exploration
Irongate 3, Suite 201
7775 Wadsworth Blvd.
Lakewood, CO 80226

Jacqueline Dickerson
3901 Innwood Road
Fort Worth, TX 76109

Vicky Moser
Post Office Box 67
Stephenville, TX 76401

Bernard D. Alpern
400 Jericho Tpke #205
Jericho, NY 11753

C. Beal Family Trust for
Barry Beal
104 South Pecos
Midland, TX 79701

Harvey M. Black Trust
Post Office Box 22900
Rochester, NY 14692

Cerri Family Trust
9561 Borba Circle
Huntington Beach, CA 92646

Patsy Ann Iverson Page
1155 Maurlands Vista Way
La Jolla, CA 92037-6210

Flora Whittington
7709 E. Glenroso Ave., Apt. 202
Scottsdale, AZ 85251-4047

Colby Revocable Living Trust
901 West 6th Street
Silver City, NM 88061-4505

Frank Darden
1619 Pennsylvania Ave.
Fort Worth, TX 76104

Carole Gauntt
Post Office Box 7275
Carmel, CA 93921

Peggy Runyan
Post Office Box 869
Kapaa, HI 96746

C. Beal Family Trust for
Carlton Beal, Jr.
104 South Pecos
Midland, TX 79701

C. Beal Family Trust for
Spencer Beal
104 South Pecos
Midland, TX 79701

C. Beal Family Trust for
Karleen Geuber
104 South Pecos
Midland, TX 79701

Carol Brookman Acct: 637602
Post Office Box 840738
Dallas, TX 75284

D. Flugstad
#1112000 NationsBank
Post Office Box 840738
Dallas, TX 75284

M. B. Foreman
Bank NA f/b/o M.B. Foreman
One Lincoln Square
Rochester, NY 14643

Robert L. Halverson
Post Office Box 3713
Midland, TX 79702

Thomas F. Lugaric
14 Lerape Trail
Cedar Grove, NJ 70009

Stephen McNall
NationsBank #1112001
Post Office Box 840738
Dallas, TX 75284

Florence Joyce Miller
109 Caversham Woods
Pottsford, NY 14534

Elizabeth Wolff Murov
Cedar Swamp Road
Old Brookville, NY 11545

Zachary Murov
999 Brush Hollow Road
Westbury, NY 11590

Ellen Palma Trust
Chase Lincoln First Bank
Post Office Box 1412
Rochester, NY 14643

Nadine Parr
1217 Georgina Avenue
Santa Monica, CA 90402

Morris Radman
999 Brush Hollow Road
Westbury, NY 11590

Patricia Ann Wolff Schaen
11 E. 86th Street, #2-A
New York, NY 10028

Melba V. Trobaugh
4305 N. Garfield, Suite 233
Midland, TX 79705

Gerald N. Frank Estate
Morgan Guaranty Trust
New York, NY 10019

William Horton
NationsBank #637603
Post Office Box 840738
Dallas, TX 75284

Samuel Luks
648 Broadway, Suite 505
New York, NY 10012-2314

William H. McNall
NationsBank #:1112001
Post Office Box 840738
Dallas, TX 75284

Erica Murov
999 Brush Hollow Road
Westbury, NY 11590

Robert W. Page
74874 Via Royale
Palm Desert, CA 92260

Ellen Palma
1471 Long Pond Road, Apt. 142
Rochester, NY 14626

Bernice L. Rosenthal, Trustee
2195 East Avenue
Rochester, NY 14610

Morris & Babette Goldman Radman
999 Brush Hollow Road
Westbury, NY 11590

Judith Franklin Smith
401 El Cielito Road
Santa Barbara, CA 93105

Harvey H. Wachtel
24 Clover Lane
Roslyn Heights, NY 11577

Carole Winter Estate
c/o William Crandall
161 East 72nd St.
New York, NY 10021

Yates Employees 87 Ltd.
105 South 4th Street
Artesia, NM 88210

Calvin E. Staples
5121 McKinney Avenue
Dallas, TX 75205-3321

John Boyle Trust
NationsBank #1071005
Post Office Box 840738
Dallas, TX 75283

Dorothy Foster Rev. Trust
First National Bank of Artesia
Post Office Box AA
Artesia, NM 88211-7526

Ruth W. Taylor
NationsBank #1071003
Post Office Box 840738
Dallas, TX 75283

Leland Price, Inc.
2701 Clayton
Artesia, NM 88210

Enterloc Resources, Inc.
Post Office Box 1375
Roswell, NM 88202-1375

Jack Halbert
Post Office Box 6990
Tyler, TX 75711

Giebel Petroleum Ltd.
130 Spring Park, Suite 100
Midland, TX 79705

Florence M. Major
279 W. Strickland Drive
Del Rio, TX 78840-5729

Nancy Winter
c/o Elsa Riess
15 West 72nd Street, #3N
New York, NY 10023

Warren Sallee
107 Rocket
Austin, TX 78734-3814

E. T. Boyle Trust
NationsBank #1071004
Post Office Box 840738
Dallas, TX 75283

James T. Wood
1917 Rosewood Lane
Huntsville, TX 77340-4938

W. R. Phillips
1120 Ridgecrest
Gallup, NM 87301

R. L. Taylor, Jr.
NationsBank #1071001
Post Office Box 840738
Dallas, TX 75283

Conoco, Inc.
Post Office Box 951063
Dallas, TX 75395

Marathon Oil Company
Post Office Box 890882
Dallas, TX 75389-0882

Louis Dreyfus Natural Gas
Post Office Box 960116
Oklahoma City, OK 73196-0116

Kimberly Kay Combs
Rt. 3, Box 140
Nonona, TX 76255

Patricia Cherry Stewart
Post Office Box 578
Nonona, TX 76225-0578

George A. Chase
1908 Briscoe Ave.
Artesia, NM 88210

Titan Resources
500 W. Texas Ave.
Midland, TX 79701

Amoco
200 N. Loraine St.
Midland, TX 79701

OXY USA
Post Office Box 50250
Midland, TX 79710

BTA
104 South Pecos
Midland, TX 79701

Paul Slayton
Post Office Box 1936
Roswell, NM 88202

Ray Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Fred Allison
201 W. Wall Avenue
Midland, TX 79701

Shell Oil Co.
200 N. Loraine Street
Midland, TX 79701

Merit Energy
12222 Merit Drive, Suite 1500
Dallas, TX 75251-3206

Burk Royalty Co.
1000 Petroleum Building
Post Office Box BRC
Wichita Falls, TX 76307-7507

J.C. Thompson
325 N. Saint Paul, Suite 4500
Dallas, TX 75201-3828

Exxon
No. 25 Desta Drive
Midland, TX 79705

B & W Oil Company
5944 Luther Ln., Suite 709
Dallas, TX 75225-5919

Ryder Scott Management
1100 Louisiana, Suite 3800
Houston, TX 77002

Windfohr Oil Co.
Post Office Box 188
Loco Hills, NM 88255-0188

Burnett Oil Co., Inc.
801 Cherry Street, Suite 1500
Interfirst Tower
Fort Worth, TX 76102-6815

Armer Oil Co.
159 N. Riverside Dr.
Fort Worth, TX 76111-3911

Lobo Resources
2000 S. Dairy Ashford, Suite 410
Houston, TX 77077-5727

J & G Enterprises Ltd. Co.
Post Office Box 100
Artesia, NM 88211-0100

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 73102-8260

Cima Capitan Cima Energy
1111 Fannin, Suite 1490
Houston, TX 77002

Yates Petroleum Corp.
105 South 4th Street
Artesia, NM 88210

Mack Energy Corporation
Post Office Box 960
Artesia, NM 88211-0960

Rodney Webb
Post Office Box 1125
Artesia, NM 88211-1125

Texaco Exploration & Production
Post Office Box 3109
Midland, TX 79702

C. Beal Family Trust for
Kelly Beal
104 South Pecos
Midland, TX 79701

Donald B. Anderson
409 E. College Blvd.
Roswell, NM 88202

Kennedy Oil Company
Artesia, NM 88210

CAMPBELL, CARR, BERGE
& SHERIDAN, P.A.
LAWYERS

MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
MARK F. SHERIDAN
MICHAEL H. FELDEWERT
ANTHONY F. MEDEIROS
PAUL R. OWEN
KATHERINE M. MOSS

JACK M. CAMPBELL
OF COUNSEL

JEFFERSON PLACE
SUITE 1 - 110 NORTH GUADALUPE
POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
FACSIMILE: (505) 983-6043
E-MAIL: ccbspa@ix.netcom.com

December 17, 1998

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

TO ALL OPERATORS AND UNLEASED MINERAL OWNERS IN THE SQUARE LAKE UNIT AREA; ALL UNLEASED OPERATORS WITHIN ONE-HALF MILE OF THE PROPOSED UNIT WATERFLOOD PROJECT AREA AND TO THE OWNERS OF THE SURFACE OF THE LAND ON WHICH INJECTION WELLS WILL BE LOCATED IN THE WATERFLOOD PROJECT AREA

Re: *Applications of GP II Energy, Inc. for Statutory Unitization and Approval of a Waterflood Project, Eddy County, New Mexico*

Gentlemen:

This letter is to advise you that GP II Energy, Inc. has filed an application with the New Mexico Oil Conservation Division seeking an order statutorily unitizing for the purpose of establishing a secondary recovery project, all mineral interests in the Grayburg and San Andres formations, Square lake-Grayburg-San Andres Pool underlying 6120 acres, more or less, of Federal and State lands in portions of Township 16 South, Ranges 30 and 31 East. Said unit is to be designated the Square Lake Unit. Among the matters to be considered at the hearing will be the necessity of unit operations; the designation of a unit operator; the determination of the 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 provision for carrying and nonconsenting working interest owner within the unit area upon such terms and conditions to be determined by the Division as just and reasonable. Attached hereto as Exhibit A is a description of the lands to be included in the proposed unit.

December 17, 1998

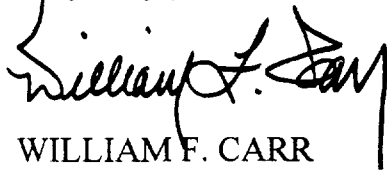
Page 2

GP II Energy, Inc. has also filed an application seeking authority to implement secondary recovery operations in this unit by means of waterflooding, a copy of this application (OCD Form C-108) is enclosed for your information.

These applications have been set for hearing before a Division Examiner on January 7, 1999. You are not required to attend this hearing but, as the owner of an interest that may be affected by these applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging these matters at a later date.

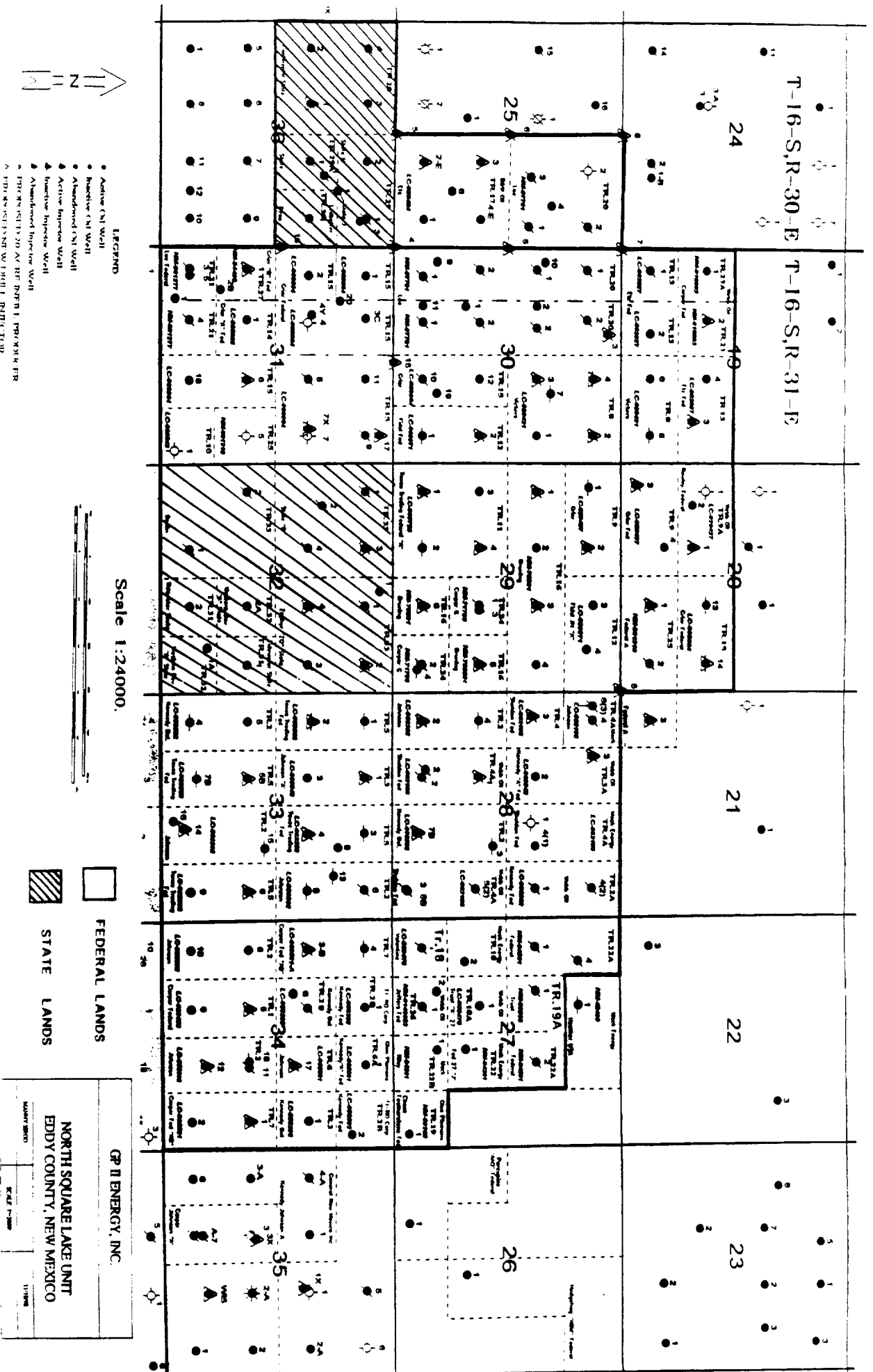
Parties appear in cases have been requested by the Division (Memorandum 2-90) to file a Pre-Hearing Statement substantially in the form prescribed by the Division. Pre-Hearing Statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,

A handwritten signature in black ink, appearing to read "William F. Carr", with a stylized flourish at the end.

WILLIAM F. CARR
ATTORNEY FOR GP II ENERGY, INC.

WFC:mlh
Enclosures



APPLICATION FOR AUTHORIZATION TO INJECT

I. PURPOSE: ☒ Secondary Recovery ☐ Pressure Maintenance ☐ Disposal ☐ Storage
Application qualifies for administrative approval? ☐ Yes ☐ No

II. OPERATOR: GP II Energy

ADDRESS: P. O. Box 50682 Midland, Tx. 79710

CONTACT PARTY: Robert Lee PHONE: (915) - 682-1251

III. WELL DATA: Complete the data required on the reverse side of this form for each well processed for injection. Additional sheets may be attached, if necessary.

IV. Is this an expansion of an existing project: ☒ Yes ☐ No
If yes, give the Division order number authorizing the project R-2977, R-2920, R-3217 & R-1112

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well within a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
5. If injection is for disposal purposes into a zone not productive of oil or gas as or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

*VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

*X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted.)

*XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certifications: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

NAME: Robert Lee TITLE: Consulting Engineer

SIGNATURE: Robert Lee DATE: 12/8/98

* If the information required under Section VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal. _____

Z 559 572 086

US Postal Service

Receipt for Certified Mail

Square Lake Partners, LLC
Post Office Box 50682
Midland, TX 79710

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 1998
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	SANTA FE, NM

PS Form 3800 April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

Square Lake Partners, LLC
Post Office Box 50682
Midland, TX 79710

4a. Article Number

Z 559 572 086

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Z 559 572 087

US Postal Service

Receipt for Certified Mail

K. M. Jones Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 1998
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	SANTA FE, NM

PS Form 3800 April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

K. M. Jones Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

4a. Article Number

Z 559 572 087

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12 2 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 088

US Postal Service

Receipt for Certified Mail

Staples Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Staples Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Phyllis Rae*

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 088

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

122 198

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 089

US Postal Service

Receipt for Certified Mail

Max W. Coll, II
Rt. 9, Box 72F
Santa Fe, NM 87505

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark or Date	

PS Form 3800, April 1995

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Max W. Coll, II
Rt. 9, Box 72F
Santa Fe, NM 87505

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Max W. Coll, II*

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 089

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/18/98

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 090

US Postal Service

Receipt for Certified Mail

Jon F. Coll
Post Office Box 1818
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Jon F. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number

Z 559 572 090

4b. Service type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 091

US Postal Service

Receipt for Certified Mail

Charles H. Coll
Post Office Box 1818
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Charles H. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number

Z 559 572 091

4b. Service type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 092

US Postal Service

Receipt for Certified Mail

Borland, Inc.
#9 Westwood
Dothan, AL 36303

Postage	\$.78
Certified Fee	\$ 1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Borland, Inc.
#9 Westwood
Dothan, AL 36303

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number
Z 559 572 092

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
DEC 22 1998

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 093

US Postal Service

Receipt for Certified Mail

C. Y. Production, LLC
Post Office Box 563
Boerne, TX 78006

Postage	\$.78
Certified Fee	\$ 1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

C. Y. Production, LLC
Post Office Box 563
Boerne, TX 78006

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Bette Post

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number
Z 559 572 093

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
12-28-98 (KS)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 094

US Postal Service

Receipt for Certified Mail

GBN, Inc.

2503 Elmwood Circle North
Wichita Falls, TX 76308

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark or Date	DEC 1 1995

USPS 8150

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

GBN, Inc.
2503 Elmwood Circle North
Wichita Falls, TX 76308

4a. Article Number

Z 559 572 094

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-26-95

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 095

US Postal Service

Receipt for Certified Mail

R. Mace Holman, Jr.
Post Office Box 1414
Dothan, AL 36302

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark or Date	DEC 1 1995

USPS 8150

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

R. Mace Holman, Jr.
Post Office Box 1414
Dothan, AL 36302

4a. Article Number

Z 559 572 095

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-95

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X R. Mace Holman Jr.

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 096

US Postal Service

Receipt for Certified Mail

J. L. Smith Co., Inc.
4204 S. Park Ave.
Dothan, AL 36301

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 1995
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

J. L. Smith Co., Inc.
4204 S. Park Ave.
Dothan, AL 36301

4a. Article Number

Z 559 572 096

4b. Service type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-22-95

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102596-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 097

US Postal Service
Receipt for Certified Mail

Lathrop Diamond Bit
5080 Spectrum Dr., LB 51
Dallas, TX 75248-4621

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restrictions	
Return Receipt Showing to Whom & Date Delivered	10
Return Receipt Showing to Whom & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark	

PS Form 3800, April 1995

AMPHILL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

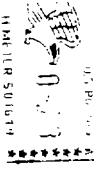
TO:
Lathrop Diamond Bit
5080 Spectrum Dr., LB 51
Dallas, TX 75248-4621

FIRST CLASS MAIL

DNK
128

MAIL

Z 559 572 097



ILLEGIBLE

Z 559 572 098

US Postal Service

Receipt for Certified Mail

Rachel Lyman
Post Office Box 3726
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Rachel Lyman
Post Office Box 3726
Midland, TX 79702

4a. Article Number

Z 559 572 098

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-23-98

5. Received By: (Print Name)

ANNE L. MACTA

6. Signature: (Addressee or Agent)

Anne L. Macta

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 099

US Postal Service

Receipt for Certified Mail

C.V. Lyman Testamentary Trust
Post Office Box 3726
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

C.V. Lyman Testamentary Trust
Post Office Box 3726
Midland, TX 79702

4a. Article Number

Z 559 572 099

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-23-98

5. Received By: (Print Name)

ANNE L. MACTA

6. Signature: (Addressee or Agent)

Anne L. Macta

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 100

US Postal Service

Receipt for Certified Mail

Pride Energy Co.
Post Office Box 701602
Tulsa, OK 74170

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 1 1998

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Pride Energy Co.
Post Office Box 701602
Tulsa, OK 74170

4a. Article Number

Z 559 572 100

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Matthew L. Luce*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 101

US Postal Service

Receipt for Certified Mail

RBP Land Company
Post Office Box 10392
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 1 1998

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RBP Land Company
Post Office Box 10392
Midland, TX 79702

4a. Article Number

Z 559 572 101

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *William L. Luce*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 102

US Postal Service

Receipt for Certified Mail

SE Com & Equip. Co.
Post Office Box 1646
Dothan, AL 36302

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 21 1998
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 21 1998

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

SE Com & Equip. Co.
Post Office Box 1646
Dothan, AL 36302

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Kathie Denton*

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 102

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 21 1998

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 103

US Postal Service

Receipt for Certified Mail

W. Watson, Inc.
Post Office Box 2253
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 21 1998
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 21 1998

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

W. Watson, Inc.
Post Office Box 2253
Midland, TX 79702

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *W. Watson*

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 103

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 104

US Postal Service

Receipt for Certified Mail

Chase Oil Corp.
Post Office Box 1767
Artesia, NM 88211

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	030 1.10
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Chase Oil Corp.
Post Office Box 1767
Artesia, NM 88211

4a. Article Number

Z 559 572 104

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-96

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 106

US Postal Service

Receipt for Certified Mail

Bulldog Energy Corp.
Post Office Box 668
Artesia, NM 88211

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bulldog Energy Corp.
Post Office Box 668
Artesia, NM 88211

4a. Article Number

Z 559 572 106

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Sylvia Housley

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 107

US Postal Service

Receipt for Certified Mail

David C. Collier
3400 West 8th Street
Roswell, NM 88201

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

David C. Collier
3400 West 8th Street
Roswell, NM 88201

4a. Article Number

Z 559 572 107

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

12/21

5. Received By: (Print Name)

David C. Collier

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Marbob Energy Corp.
 Post Office Drawer 217
 Artesia, NM 88210

Postage	\$.78
Certified Fee	1.75
Special Delivery Fee	
Registered Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date & Address	
TOTAL Postage & Fees	\$ 2.53
Postman's Mark	

Small print text, likely containing terms and conditions or a barcode reference.

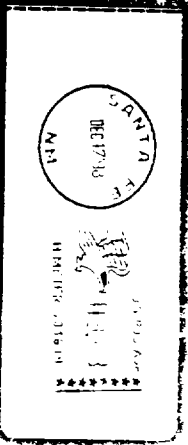
MAIL

CAMPBELL, CARR, HERGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

TO:

Marbob Energy Corp.
 Post Office Drawer 217
 Artesia, NM 88210

FIRST CLASS MAIL



ILLEGIBLE

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Registered Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Address: Address	
TOTAL Postage & Fees	\$ 7.23
Postmark or Date	

PS Form 3800 April 1995

MAIL

2 554 572 104

RECEIVED

DEC 8 0 00 PM '93

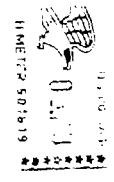
CAMPBELL, CARR, BERGE & SHERIDAN, P.A.

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

TO:

Robert S. Gleason
 Post Office Box 798
 Artesia, NM 88211

FIRST CLASS MAIL



ILLEGIBLE

Z 559 572 109

US Postal Service
Receipt for Certified Mail

BHW, LLC.
 101 South 4th Street
 Artesia, NM 88210

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-19-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BHW, LLC.
 101 South 4th Street
 Artesia, NM 88210

4a. Article Number

Z 559 572 109

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

12-19-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 110

US Postal Service
Receipt for Certified Mail

B & H Properties
2410 Auburn Place
Midland, TX 79705

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

B & H Properties
2410 Auburn Place
Midland, TX 79705

4a. Article Number
Z 559 572 110

4b. Service type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
DEC 23 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-08-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Z 559 572 111

US Postal Service
Receipt for Certified Mail

Logan Royalties, Ltd.
Post Office Box 804
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Logan Royalties, Ltd.
Post Office Box 804
Midland, TX 79702

4a. Article Number
Z 559 572 111

4b. Service type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-08-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Z 559 572 112

US Postal Service

Receipt for Certified Mail

Rocky Mountain Resources
Post Office Box 7405
Midland, TX 79708

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	1.00
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Rocky Mountain Resources
Post Office Box 7405
Midland, TX 79708

4a. Article Number

Z 559 572 112

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

Michael G. Moroney

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 113

US Postal Service

Receipt for Certified Mail

Victor J. Sirgo
3300 North "A" Street
Bldg. 2, Suite 104
Midland, TX 79705

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	1.00
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Victor J. Sirgo
3300 North "A" Street
Bldg. 2, Suite 104
Midland, TX 79705

4a. Article Number

Z 559 572 113

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

12-23-98

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Michael D. Puchard*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 114

US Postal Service

Receipt for Certified Mail

Selma E. Andrews #518801
c/o NationsBank Trust
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	0501-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Selma E. Andrews #518801
c/o NationsBank Trust
Post Office Box 840738
Dallas, TX 75284

4a. Article Number

Z 559 572 114

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 115

US Postal Service

Receipt for Certified Mail

James N. Coll
Post Office Box 1818
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

James N. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number

Z 559 572 115

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 116

US Postal Service

Receipt for Certified Mail

Columbine II Ltd. Partnership
Post Office Box 22066
Denver, CO 80222

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Columbine II Ltd. Partnership
Post Office Box 22066
Denver, CO 80222

4a. Article Number

Z 559 572 116

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X *[Signature]*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

10-595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 117

US Postal Service

Receipt for Certified Mail

Vera Cox Haefs
9909 Glenrio Lane
Dallas, TX 75220

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 118

US Postal Service

Receipt for Certified Mail

James Petroleum Trust
Post Office Box 4648
Tulsa, OK 74159

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

James Petroleum Trust
Post Office Box 4648
Tulsa, OK 74159

4a. Article Number

Z 559 572 118

4b. Service type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Receipt for Certified Mail

Tommye June Robinson
5809 Wedgeworth Rd.
Fort Worth, TX 76133

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Registered Mail Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Form Package Showing to Whom & Date Delivered	
Addressed to Addressee	
TOTAL FEE	\$ 3.23
Postmark of Origin	

April 1, 1995
PS Form 3800 0086

RECEIVED
DEC 3 0 1998

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.

Z 559 572 119
MAIL

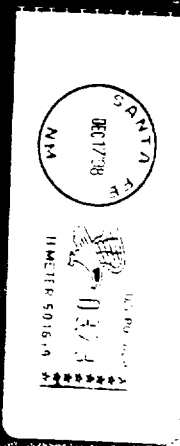
TO:

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

Tommye June Robinson
5809 Wedgeworth Rd.
Fort Worth, TX 76133

FIRST CLASS MAIL

UNDELIVERABLE
NO FORWARDING



ILLEGIBLE

Z 559 572 120

US Postal Service

Receipt for Certified Mail

Ward Investment, Ltd.
101 South 4th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-19-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ward Investment, Ltd.
101 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 120

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-19-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Optim Knight*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 121

US Postal Service

Receipt for Certified Mail

Carl Brininstool
201 Blackberry
Midland, TX 79707

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Carl Brininstool
201 Blackberry
Midland, TX 79707

4a. Article Number

Z 559 572 121

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-20

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Carl Brininstool*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 122

US Postal Service

Receipt for Certified Mail

Pogar petroleum, Ltd.
Post Office Box 10095
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	0.00
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Pogar petroleum, Ltd.
Post Office Box 10095
Midland, TX 79702

4a. Article Number

Z 559 572 122

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/22/98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt



Thank you for using Return Receipt Service.

Z 559 572 123

US Postal Service

Receipt for Certified Mail

William J. and Margaret Colby
901 W. 6th Street
Silver City, NM 88061

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	0.00
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

William J. and Margaret Colby
901 W. 6th Street
Silver City, NM 88061

4a. Article Number

Z 559 572 123

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/22/98

5. Received By: (Print Name)

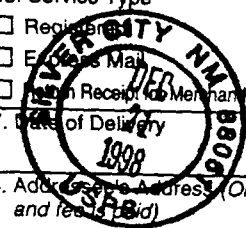
6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt



Thank you for using Return Receipt Service.

Z 559 572 124

US Postal Service

Receipt for Certified Mail

OXY USA, Inc.
Post Office Box 841735
Dallas, TX 75284-1735

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

OXY USA, Inc.
Post Office Box 841735
Dallas, TX 75284-1735

4a. Article Number

Z 559 572 124

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

C. Jackson

6. Signature: (Addressee or Agent)

X Jackson

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 125

US Postal Service

Receipt for Certified Mail

Braille Institute of America
Oil & Gas Trust NCNB
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Braille Institute of America
Oil & Gas Trust NCNB
Post Office Box 840738
Dallas, TX 75284

4a. Article Number

Z 559 572 125

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

C. Jackson

6. Signature: (Addressee or Agent)

X Jackson

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 126

US Postal Service

Receipt for Certified Mail

Max W. Coll
Post Office Box 1818
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Max W. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number

Z 559 572 126

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Max W. Coll*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 127

US Postal Service

Receipt for Certified Mail

Rose M. Cottingham
1119 Montedito
San Angelo, TX 76901

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Rose M. Cottingham
1119 Montedito
San Angelo, TX 76901

4a. Article Number

Z 559 572 127

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

X *Rose M. Cottingham*

6. Signature: (Addressee or Agent)

X *Rose M. Cottingham*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 128

US Postal Service

Receipt for Certified Mail

Higgins Trust, Inc.
Post Office Box 2421
Gainesville, GA 30505

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Higgins Trust, Inc.
Post Office Box 2421
Gainesville, GA 30505

4a. Article Number

Z 559 572 128

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Kathleen Edwards

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 129

US Postal Service

Receipt for Certified Mail

Marshall & Winston, Inc.
Post Office Box 50880
Midland, TX 79710

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Marshall & Winston, Inc.
Post Office Box 50880
Midland, TX 79710

4a. Article Number

Z 559 572 129

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 130

US Postal Service

Receipt for Certified Mail

Josephine Smith Trust
Wells Fargo Bank
Post Office Box 5825
Denver, CO 80217

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-78
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Josephine Smith Trust
Wells Fargo Bank
Post Office Box 5825
Denver, CO 80217

4a. Article Number

Z 559 572 130

4b. Service type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12/21

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Gertrude McDorman, Trustee
511 Centre Avenue
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

April 1995
PS Form 3800

TO:

CAMPBELL, CARR, BEGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

Gertrude McDorman, Trustee
511 Centre Avenue
Artesia, NM 8

FIRST CI

082102003 1097 02 12/21/98
FORWARD TIME EXE ATN TO SEND
MCDORMAN, GERTRUDE
501 W CENTRE AVE
ARTESIA NM 88210-2716

RETURN TO SENDER

MAIL

2 559 572 131



ILLEGIBLE

Z 559 572 132

US Postal Service

Receipt for Certified Mail

Robert E. Boling
305 South 5th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Robert E. Boling
305 South 5th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 132

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Like Boling

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Robert E. Boling

PS Form 3811, December 1994

02595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 133

US Postal Service

Receipt for Certified Mail

Therylene K. Helm
4401 Edmonson
Dallas, TX 75205

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Therylene K. Helm
4401 Edmonson
Dallas, TX 75205

4a. Article Number

Z 559 572 133

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-24-98

5. Received By: (Print Name)

X Therylene K. Helm

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 134

US Postal Service

Receipt for Certified Mail

Mrs. T. B. Knox
300 Crescent Court, Suite 162
Dallas, TX 75021

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mrs. T. B. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

4a. Article Number

Z 559 572 134

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

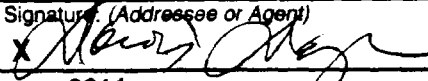
7. Date of Delivery

DEC 22 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 135

US Postal Service

Receipt for Certified Mail

Bert H. Murphy
Post Office Drawer 2164
Roswell, NM 88201

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bert H. Murphy
Post Office Drawer 2164
Roswell, NM 88201

4a. Article Number

Z 559 572 135

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

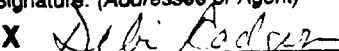
7. Date of Delivery

12-22-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 136

US Postal Service

Receipt for Certified Mail

Lillie Mabel Bates
Post Office Box 840
Artesia, NM 88211-0840

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	-
Restricted Delivery Fee	-
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	-
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Lillie Mabel Bates
Post Office Box 840
Artesia, NM 88211-0840

4a. Article Number

Z 559 572 136

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Toni Hamilton

6. Signature: (Addressee or Agent)

X Toni Hamilton

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 137

US Postal Service

Receipt for Certified Mail

Wendell W. Iverson 1990 Trust
Post Office Box 10508
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	-
Restricted Delivery Fee	-
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	-
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Wendell W. Iverson 1990 Trust
Post Office Box 10508
Midland, TX 79702

4a. Article Number

Z 559 572 137

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

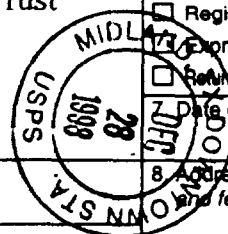
X Pamela Buel

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt



Z 559 572 138

US Postal Service

Receipt for Certified Mail

PIP Trust
Post Office Box 10508
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

PIP Trust
Post Office Box 10508
Midland, TX 79702

4a. Article Number

Z 559 572 138

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Tam Buck*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 139

US Postal Service

Receipt for Certified Mail

John Ashby Yates
105 South 4th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	1.03
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

John Ashby Yates
105 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 139

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

X *Joann Griggs*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 140

US Postal Service
Receipt for Certified Mail

Tonya W. Malliard
135 Van Winkle Drive
San Anselmo, CA 94960

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Tonya W. Malliard
135 Van Winkle Drive
San Anselmo, CA 94960

4a. Article Number

Z 559 572 140

4b. Service type

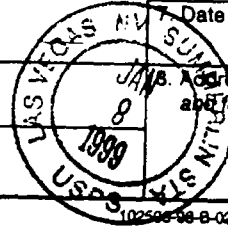
- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

5. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Tonya Malliard*



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 141

US Postal Service
Receipt for Certified Mail

Mae Chang Plasch
3883 Turtle Creek Blvd., #1004
Dallas, TX 75219-4429

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mae Chang Plasch
3883 Turtle Creek Blvd., #1004
Dallas, TX 75219-4429

4a. Article Number

Z 559 572 141

4b. Service type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Mae Plasch*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 142

US Postal Service

Receipt for Certified Mail

Sharbro Oil Ltd., Co.
Post Office Box 840
Artesia, NM 88211-0840

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Sharbro Oil Ltd., Co.
Post Office Box 840
Artesia, NM 88211-0840

4a. Article Number

Z 559 572 142

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Toni Hamilton

6. Signature: (Addressee or Agent)

X Toni Hamilton

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 143

US Postal Service

Receipt for Certified Mail

Charles Deguigne
1001 Chelsea Way
Redwood City, CA 94061-3665

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	0.31.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Charles Deguigne
1001 Chelsea Way
Redwood City, CA 94061-3665

4a. Article Number

Z 559 572 143

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Charles Deguigne

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 144

US Postal Service

Receipt for Certified Mail

Siegfried J. Iverson, Jr.
2518 Sinclair
Midland, TX 79705-8422

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Siegfried J. Iverson, Jr.
2518 Sinclair
Midland, TX 79705-8422

4a. Article Number

Z 559 572 144

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 145

US Postal Service

Receipt for Certified Mail

Ray and Karen Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ray and Karen Westall
Post Office Box 4
Loco Hills, NM 88255-0004

4a. Article Number

Z 559 572 145

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 146

US Postal Service

Receipt for Certified Mail

Jack D. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Jack D. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

4a. Article Number

Z 559 572 146

4b. Service type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1998

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service!

Z 559 572 147

US Postal Service

Receipt for Certified Mail

Texacal Oil & Gas, Inc.
4299 McCarthur Blvd., Suite 207
Newport Beach, CA 92660

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Texacal Oil & Gas, Inc.
4299 McCarthur Blvd., Suite 207
Newport Beach, CA 92660

4a. Article Number

Z 559 572 147

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service!

US Postal Service
Receipt for Certified Mail

Hal C. Porter
Post Office Box 17004
Fountain Hills, AZ 85269-7004

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postman or Date	

From 1980 And 1995

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

Hal C. Porter
Post Office Box 17004
Fountain Hills, AZ. ~~85269~~-7004

FIRST CLASS MAIL

PORT004 85261914 IN 45 12/24/98
RETURN TO SENDER
NO FORWARD/ORDER ON FILE
UNABLE TO FORWARD
RETURN TO SENDER

[illegible]

STANTON
DEC 17 1933
MA

14 MAY 1965 5 01 16 11

ILLEGIBLE

Z 559 572 149

US Postal Service

Receipt for Certified Mail

Wendell W. Iverson
Post Office Box 1343
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Wendell W. Iverson
Post Office Box 1343
Midland, TX 79702

4a. Article Number

Z 559 572 149

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X [Signature]

7. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102505-00-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 150

US Postal Service

Receipt for Certified Mail

SJI, Jr. 1990 Trust
Post Office Box 10508
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SJI, Jr. 1990 Trust
Post Office Box 10508
Midland, TX 79702

4a. Article Number

Z 559 572 150

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

5. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Tom Burke*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 151

US Postal Service

Receipt for Certified Mail

Harvey E. Yates
Post Office Box 1933
Roswell, NM 88208-1933

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Harvey E. Yates
Post Office Box 1933
Roswell, NM 88208-1933

4a. Article Number

Z 559 572 151

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-22-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Harvey Yates*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 152

US Postal Service

Receipt for Certified Mail

Lynne Wildman Chapman
1324 Old Gulph Rd.
Villanova, PA 19085

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Lynne Wildman Chapman
1324 Old Gulph Rd.
Villanova, PA 19085

4a. Article Number

Z 559 572 152

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

11/23/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

Lynne Wildman Chapman

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 153

US Postal Service

Receipt for Certified Mail

S. P. Yates
207 Fourth Street
Artesia, NM 88210-2193

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

S. P. Yates
207 Fourth Street
Artesia, NM 88210-2193

4a. Article Number

Z 559 572 153

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

X Joann Griggs

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 154

US Postal Service

Receipt for Certified Mail

John & Peggy Yates Estate
105 South 4th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

John & Peggy Yates Estate
105 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 154

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

Jo Ann Griggs
PS Form 3811, December 1994

8. Addressee's Address (Only if requested and fee is paid)

102595-98-8-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 155

US Postal Service

Receipt for Certified Mail

Robert N. Avery Martial Trust
74133 El Paseo, Suite E
Palm Desert, CA 92260-4123

Postage	\$.72
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

Robert N. Avery Martial Trust
74133 El Paseo, Suite E
Palm Desert, CA 92260-4123

4a. Article Number

Z 559 572 155

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-24-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

R. N. Avery
PS Form 3811, December 1994

8. Addressee's Address (Only if requested and fee is paid)

102595-98-8-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 156

US Postal Service

Receipt for Certified Mail

Roger D. Lapham, Jr.
Post Office Box 721
Pebble Beach, CA 93953-072

Postage	\$ 1.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Roger D. Lapham, Jr.
Post Office Box 721
Pebble Beach, CA 93953-0721

4a. Article Number

Z 559 572 156

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-23-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-08-B-0229 Domestic Return Receipt

Z 559 572 157

US Postal Service

Receipt for Certified Mail

Lloyd McGhee
Post Office Box 16399
Fort Worth, Tx 76162-039

Postage	\$.71
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Lloyd McGhee
Post Office Box 16399
Fort Worth, Tx 76162-0399

4a. Article Number

Z 559 572 157

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-23-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-08-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 158

US Postal Service
Receipt for Certified Mail
 Phoebe Shelton
 Post Office Box 430
 Amarillo, TX 79105-0430

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Phoebe Shelton
 Post Office Box 430
 Amarillo, TX 79105-0430

4a. Article Number

Z 559 572 158

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

23

5. Received By: (Print Name)

Verita Silvertooth

6. Signature: (Addressee or Agent)

Verita Silvertooth

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 159

US Postal Service
Receipt for Certified Mail
 Christian DeGuigue
 Post Office Box 1739
 San Mateo, CA 94401-0920

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Christian DeGuigue
 Post Office Box 1739
 San Mateo, CA 94401-0920

4a. Article Number

Z 559 572 159

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

Christian DeGuigue
 Post Office Box 1739
 San Mateo, CA 94401-0920

6. Signature: (Addressee or Agent)

Christian DeGuigue

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 160

US Postal Service

Receipt for Certified Mail

Summit Overseas Exploration
 Irongate 3, Suite 201
 7775 Wadsworth Blvd.
 Lakewood, CO 80226

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Summit Overseas Exploration
 Irongate 3, Suite 201
 7775 Wadsworth Blvd.
 Lakewood, CO 80226

4a. Article Number

Z 559 572 160

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 161

US Postal Service

Receipt for Certified Mail

Jacqueline Dickerson
 3901 Innwood Road
 Fort Worth, TX 76109

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Jacqueline Dickerson
 3901 Innwood Road
 Fort Worth, TX 76109

4a. Article Number

Z 559 572 161

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

12/24/95

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 162

US Postal Service

Receipt for Certified Mail

Vicky Moser
Post Office Box 67
Stephenville, TX 76401

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Vicky Moser
Post Office Box 67
Stephenville, TX 76401

5. Received By: (Print Name)

Charles E Moser
X Charles E Moser

6. Signature: (Addressee or Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 162

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 23 1998

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 163

US Postal Service

Receipt for Certified Mail

Bernard D. Alpern
400 Jericho Tpke #205
Jericho, NY 11753

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Bernard D. Alpern
400 Jericho Tpke #205
Jericho, NY 11753

5. Received By: (Print Name)

X Bernard D. Alpern

6. Signature: (Addressee or Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 163

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 164

US Postal Service

Receipt for Certified Mail

C. Beal Family Trust for
Barry Beal
104 South Pecos
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

C. Beal Family Trust for
Barry Beal
104 South Pecos
Midland, TX 79701

5. Received By: (Print Name)

K. H. Hurrell
X K. H. Hurrell

6. Signature: (Addressee or Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

4a. Article Number

Z 559 572 164

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1995

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 165

US Postal Service

Receipt for Certified Mail

Harvey M. Black Trust
Post Office Box 22900
Rochester, NY 14692

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Harvey M. Black Trust
Post Office Box 22900
Rochester, NY 14692

5. Received By: (Print Name)

DUANE MAULT
X Duane Mault

6. Signature: (Addressee or Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

4a. Article Number

Z 559 572 165

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 28 1995

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 166

Cerri Family Trust
9561 Borba Circle
Huntington Beach, CA 92646

PS Form 3800 April 1995

Post Office, State, & ZIP Code	
Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Z 559 572 167

US Postal Service
Receipt for Certified Mail

Patsy Ann Iverson Page
1155 Maurlands Vista Way
La Jolla, CA 92037-6210

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Patsy Ann Iverson Page
1155 Maurlands Vista Way
La Jolla, CA 92037-6210

4a. Article Number

Z 559 572 167

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

APR 2 1995

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

X Patsy Iverson

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 168

US Postal Service
Receipt for Certified Mail

Flora Whittington
7709 E. Glenroso Ave., Apt. 202
Scottsdale, AZ 85251-4047

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

TO:

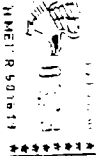
Flora Whittington
7709 E. Glenroso Ave., Apt. 202
Scottsdale, AZ 85251-4047

FIRST CLASS MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

Z 559 572 168

MAIL



ILLEGIBLE

Z 559 572 169

US Postal Service

Receipt for Certified Mail

Colby Revocable Living Trust
901 West 6th Street
Silver City, NM 88061-4505

Postage	\$.79
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 21 1998
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Colby Revocable Living Trust
901 West 6th Street
Silver City, NM 88061-4505

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

4a. Article Number

Z 559 572 169

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address Only if requested and fee is paid

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 170

US Postal Service
Receipt for Certified Mail

Frank Darden
1619 Pennsylvania Ave.
Fort Worth, TX 76104

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Frank Darden
1619 Pennsylvania Ave.
Fort Worth, TX 76104

4a. Article Number
Z 559 572 170

4b. Service type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
2-21-98

5. Received By: (Print Name)

STEVE CENRACK

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

[Signature]

PS Form 3811, December 1994

102595-98-6-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 171

US Postal Service
Receipt for Certified Mail

Carole Gauntt
Post Office Box 7275
Carmel, CA 93921

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Carole Gauntt
Post Office Box 7275
Carmel, CA 93921

4a. Article Number
Z 559 572 171

4b. Service type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
DEC 21 1998

5. Received By: (Print Name)

[Signature]

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

[Signature]

PS Form 3811, December 1994

102595-98-6-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 172

US Postal Service

Receipt for Certified Mail

Peggy Runyan
Post Office Box 869
Kapaa, HI 96746

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Peggy Runyan
Post Office Box 869
Kapaa, HI 96746

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee

4a. Article Number

Z 559 572 172

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229 Domestic Return Receipt

Z 559 572 173

US Postal Service

Receipt for Certified Mail

C. Beal Family Trust for
Carlton Beal, Jr.
104 South Pecos
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

C. Beal Family Trust for
Carlton Beal, Jr.
104 South Pecos
Midland, TX 79701

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee

4a. Article Number

Z 559 572 173

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 174

US Postal Service

Receipt for Certified Mail

C. Beal Family Trust for
Spencer Beal
104 South Pecos
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

C. Beal Family Trust for
Spencer Beal
104 South Pecos
Midland, TX 79701

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 174

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1998

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 175

US Postal Service

Receipt for Certified Mail

C. Beal Family Trust for
Karleen Geuber
104 South Pecos
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

C. Beal Family Trust for
Karleen Geuber
104 South Pecos
Midland, TX 79701

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 175

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1998

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 176

US Postal Service

Receipt for Certified Mail

Carol Brookman Acct: 637602
Post Office Box 840738
Dallas, TX 75284

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Carol Brookman Acct: 637602
Post Office Box 840738
Dallas, TX 75284

5. Received By: (Print Name)

Kenneth Phelps

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 176

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 20 1998

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 177

US Postal Service

Receipt for Certified Mail

D. Flugstad
#1112000 NationsBank
Post Office Box 840738
Dallas, TX 75284

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	02.1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

D. Flugstad
#1112000 NationsBank
Post Office Box 840738
Dallas, TX 75284

5. Received By: (Print Name)

Kenneth Phelps

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 177

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 20 1998

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 178

US Postal Service

Receipt for Certified Mail

M. B. Foreman
Bank NA f/b/o M.B. Foreman
One Lincoln Square
Rochester, NY 14643

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
 - ☐ Restricted Delivery
- Consult postmaster for fee

3. Article Addressed to:

M. B. Foreman
Bank NA f/b/o M.B. Foreman
One Lincoln Square
Rochester, NY 14643

4a. Article Number

Z 559 572 178

4b. Service type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

Scotin 4/16/95

6. Signature: (Addressee or Agent)

X Scotin 4/16/95

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 179

US Postal Service

Receipt for Certified Mail

Robert L. Halverson
Post Office Box 3713
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
 - ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

Robert L. Halverson
Post Office Box 3713
Midland, TX 79702

4a. Article Number

Z 559 572 179

4b. Service type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Robert L. Halverson

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 180

US Postal Service

Receipt for Certified Mail

Thomas F. Lugaric
14 Lerape Trail
Cedar Grove, NJ 70009

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Thomas F. Lugaric
14 Lerape Trail
Cedar Grove, NJ 70009

4a. Article Number

Z 559 572 180

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/28/98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 181

US Postal Service

Receipt for Certified Mail

Stephen McNall
NationsBank #1112001
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 182

US Postal Service

Receipt for Certified Mail

Florence Joyce Miller
109 Caversham Woods
Pottsford, NY 14534

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Florence Joyce Miller
109 Caversham Woods
Pottsford, NY 14534

4a. Article Number

Z 559 572 182

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/23/98 DP

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X 

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 183

US Postal Service

Receipt for Certified Mail

Elizabeth Wolff Murov
Cedar Swamp Road
Old Brookville, NY 11545

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 184

US Postal Service

Receipt for Certified Mail

Zachary Murov
999 Brush Hollow Road
Westbury, NY 11590

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Zachary Murov
999 Brush Hollow Road
Westbury, NY 11590

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 184

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 185

US Postal Service

Receipt for Certified Mail

Ellen Palma Trust
Chase Lincoln First Bank
Post Office Box 1412
Rochester, NY 14643

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 186

US Postal Service
Receipt for Certified Mail

Nadine Parr
1217 Georgina Avenue
Santa Monica, CA 90402

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

TO:

Nadine Parr
1217 Georgina Avenue
Santa Monica, CA 90402

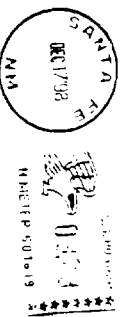
CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

FIRST CLASS MAIL

Handwritten: Please Leave the Address on the Envelope

MAIL

Z 559 572 186



Z 559 572 187

US Postal Service
Receipt for Certified Mail

Morris Radman
999 Brush Hollow Road
Westbury, NY 11590

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Morris Radman
999 Brush Hollow Road
Westbury, NY 11590

4a. Article Number

Z 559 572 187

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

Z 559 572 188

US Postal Service

Receipt for Certified Mail

Patricia Ann Wolff Schaen
11 E. 86th Street, #2-A
New York, NY 10028

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Patricia Ann Wolff Schaen
11 E. 86th Street, #2-A
New York, NY 10028

4a. Article Number

Z 559 572 188

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/21

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

x *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 189

US Postal Service

Receipt for Certified Mail

Melba V. Trobaugh
4305 N. Garfield, Suite 233
Midland, TX 79705

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Melba V. Trobaugh
4305 N. Garfield, Suite 233
Midland, TX 79705

4a. Article Number

Z 559 572 189

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12.21.98 PM

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

x *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Gerald N. Frank Estate
 Morgan Guaranty Trust
 New York, NY 10019

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

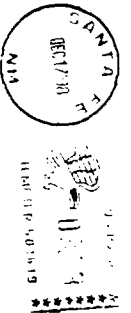
MAIL

2 559 572 190

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

TO:
 Gerald N. Frank Estate
 Morgan Guaranty Trust
 New York, NY 10019

FIRST CLASS MAIL



2 559 572 191

US Postal Service

Receipt for Certified Mail

William Horton
NationsBank #637603
Post Office Box 840738
Dallas, TX 75284

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Z 559 572 192

US Postal Service

Receipt for Certified Mail

Samuel Luks
648 Broadway, Suite 505
New York, NY 10012-2314

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Samuel Luks
648 Broadway, Suite 505
New York, NY 10012-2314

4a. Article Number

Z 559 572 192

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/21/94

5. Received By: (Print Name)

MARC GLICK

6. Signature: Addressee or Agent

X *Samuel Luks*

on 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 193

US Postal Service

Receipt for Certified Mail

William H. McNall
NationsBank #:1112001
Post Office Box 840738
Dallas, TX 75284

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

William H. McNall
NationsBank #:1112001
Post Office Box 840738
Dallas, TX 75284

4a. Article Number

Z 559 572 193

4b. Service type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/21/94

5. Received By: (Print Name)

Kenneth Phelps

6. Signature: Addressee or Agent

X *Kenneth Phelps*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 194

US Postal Service

Receipt for Certified Mail

Erica Murov
999 Brush Hollow Road
Westbury, NY 11590

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Erica Murov
999 Brush Hollow Road
Westbury, NY 11590

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 194

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 195

US Postal Service

Receipt for Certified Mail

Robert W. Page
74874 Via Royale
Palm Desert, CA 92260

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Robert W. Page
74874 Via Royale
Palm Desert, CA 92260

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 195

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 176

US Postal Service
Receipt for Certified Mail

Ellen Palma
 1471 Long Pond Road, Apt. 142
 Rochester, NY 14626

Postage	\$ 78
Certified Fee	1 35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1 00
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3 23
Postmark or Date	

PS Form 3800 April 1995

MAIL

Z 559 572 176

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

TO:
 Ellen Palma
 1471 Long Pond Road, Apt. 142
 Rochester, NY 14626

FIRST CLASS MAIL



Z 559 572 197

US Postal Service

Receipt for Certified Mail

Bernice L. Rosenthal, Trustee
2195 East Avenue
Rochester, NY 14610

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bernice L. Rosenthal, Trustee
2195 East Avenue
Rochester, NY 14610

4a. Article Number

Z 559 572 197

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/23

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Bernice L. Rosenthal, Jr.

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 198

US Postal Service

Receipt for Certified Mail

Morris & Babette Goldman Radman
999 Brush Hollow Road
Westbury, NY 11590

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Morris & Babette Goldman Radman
999 Brush Hollow Road
Westbury, NY 11590

4a. Article Number

Z 559 572 198

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 199

US Postal Service

Receipt for Certified Mail

Judith Franklin Smith
401 El Cielito Road
Santa Barbara, CA 93105

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Judith Franklin Smith
401 El Cielito Road
Santa Barbara, CA 93105

4a. Article Number

Z 559 572 199

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 200

US Postal Service

Receipt for Certified Mail

Harvey H. Wachtel
24 Clover Lane
Roslyn Heights, NY 11577

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	2.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Harvey H. Wachtel
24 Clover Lane
Roslyn Heights, NY 11577

4a. Article Number

Z 559 572 200

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Certified
- ☐ Insured
- ☐ COD

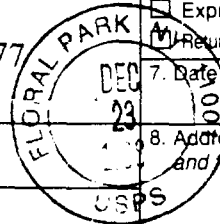
7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

x H. Wachtel



PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 201

US Postal Service
Receipt for Certified Mail

Carole Winter Estate
c/o William Crandall
161 East 72nd St.
New York, NY 10021

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

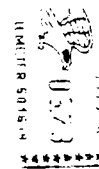
CAMPBELL, CARB, BERGE & SHERIDAN, P.A.
110 NORTH CLADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
Carole Winter Estate
c/o William Crandall
161 East 72nd St.
New York, NY 10021

FIRST CLASS MAIL

MAIL

Z 559 572 201



Z 559 572 202

US Postal Service
Receipt for Certified Mail

Yates Employees 87 Ltd.
105 South 4th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Yates Employees 87 Ltd.
105 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 202

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

Joann Griggs

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 203

US Postal Service
Receipt for Certified Mail

Calvin E. Staples
5121 McKinney Avenue
Dallas, TX 75205-3321

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Calvin E. Staples
5121 McKinney Avenue
Dallas, TX 75205-3321

4a. Article Number

Z 559 572 203

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/22/95

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

x Vicki Osborn

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 204

US Postal Service

Receipt for Certified Mail

John Boyle Trust
 NationsBank #1071005
 Post Office Box 840738
 Dallas, TX 75283

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

John Boyle Trust
 NationsBank #1071005
 Post Office Box 840738
 Dallas, TX 75283

4a. Article Number

Z 559 572 204

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 20 1996

5. Received By: (Print Name)

Chad Miller

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 205

US Postal Service

Receipt for Certified Mail

Dorothy Foster Rev. Trust
 First National Bank of Artesia
 Post Office Box AA
 Artesia, NM 88211-7526

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Dorothy Foster Rev. Trust
 First National Bank of Artesia
 Post Office Box AA
 Artesia, NM 88211-7526

4a. Article Number

Z 559 572 205

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

D. Miller (Agent)

6. Signature: (Addressee or Agent)

X [Signature]

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

NATIONSBANK
PO BOX 830126
DALLAS TX 75283-0126

Z 559 572 206

US Postal Service

Receipt for Certified Mail

Ruth W. Taylor
NationsBank #1071003
Post Office Box 840738
Dallas, TX 75283

Package	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

1996 Apr 13 08:00 PM

SIR/MADAM:

THIS CORRESPONDENCE IS BEING RETURNED DUE TO AN INSUFFICIENT ADDRESS AND/OR IMPROPER INFORMATION FOR US TO PROCESS.

PLEASE CONTACT NATIONSBANK AND ACQUIRE AN ASSOCIATE'S NAME AND INTERNAL MAIL CODE IN THE DEPARTMENT YOU WISH TO MAIL TO AND INCLUDE THE NAME AND MAIL CODE ON YOUR NEXT MAILING ENVELOPE.

THANK YOU.

SENDER: ■ Complete items 1 and/or 2 for additional services ■ Complete items 3, 4a, and 4b ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1 <input type="checkbox"/> Addressee's Address 2 <input type="checkbox"/> Restricted Delivery Consult postmaster for fee	
3. Article Addressed to Ruth W. Taylor NationsBank #1071003 Post Office Box 840738 Dallas, TX 75283		4a. Article Number Z 559 572 206	
4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD		7. Date of Delivery 12/28/98	
5. Received By (Print Name) 6. Signature (Addressee or Agent) x <i>Yelva Wilman</i>		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994 102595-36-8-0229 Domestic Return Receipt

Thank you for using Return Receipt Service

700 225 555 /

211

Z 559 572 207

US Postal Service
Receipt for Certified Mail

Leland Price, Inc.
2701 Clayton
Artesia, NM 88210

Postage	\$.78
Certified Fee	\$.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

INSTRUCTIONS:

Complete items 1 and/or 2 for additional services.
Complete items 3, 4a, and 4b.
Print your name and address on the reverse of this form so that we can return this card to you.
Attach this form to the front of the mailpiece, or on the back if space does not permit.
Write "Return Receipt Requested" on the mailpiece below the article number.
The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery
- Consult postmaster for fee.

Article Addressed to:

Leland Price, Inc.
2701 Clayton
Artesia, NM 88210

Received By: (Print Name)

Signature: (Addressee or Agent)

X Melissa Loya

4a. Article Number

Z 559 572 207

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

12-21-98

8. Addressee's Address (Only if requested and fee is paid)

Z 559 572 208

US Postal Service

Receipt for Certified Mail

Enterloc Resources, Inc.
Post Office Box 1375
Roswell, NM 88202-1375

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Enterloc Resources, Inc.
Post Office Box 1375
Roswell, NM 88202-1375

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 208

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 209

US Postal Service

Receipt for Certified Mail

Jack Halbert
Post Office Box 6990
Tyler, TX 75711

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Jack Halbert
Post Office Box 6990
Tyler, TX 75711

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 209

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 21 1998

8. Addressee's Address (Only if requested and fee is paid)

DEC 21 1998

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 210

US Postal Service

Receipt for Certified Mail

Giebel Petroleum Ltd.
130 Spring Park, Suite 100
Midland, TX 79705

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Giebel Petroleum Ltd.
130 Spring Park, Suite 100
Midland, TX 79705

4a. Article Number

Z 559 572 210

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-22-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 211

US Postal Service

Receipt for Certified Mail

Florence M. Major
279 W. Strickland Drive
Del Rio, TX 78840-5729

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Florence M. Major
279 W. Strickland Drive
Del Rio, TX 78840-5729

4a. Article Number

Z 559 572 211

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Florence Major

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 212

US Postal Service

Receipt for Certified Mail

Nancy Winter
c/o Elsa Riess
15 West 72nd Street, #3N
New York, NY 10023

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Nancy Winter
c/o Elsa Riess
15 West 72nd Street, #3N
New York, NY 10023

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X MARKEN AGBAYARI

PS Form 3811, December 1994

4a. Article Number

Z 559 572 212

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/21/98

8. Addressee's Address (Only if requested and fee is paid)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 213

US Postal Service

Receipt for Certified Mail

Warren Sallee
107 Rocket
Austin, TX 78734-3814

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Warren Sallee
107 Rocket
Austin, TX 78734-3814

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Warren Sallee

PS Form 3811, December 1994

4a. Article Number

Z 559 572 213

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

8. Addressee's Address (Only if requested and fee is paid)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
 2. ☐ Restricted Delivery

Consult postmaster for fee.

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 214

US Postal Service

Receipt for Certified Mail

E. T. Boyle Trust
NationsBank #1071004
Post Office Box 840738
Dallas, TX 75283

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4c
- Print your name and address on the reverse of this form so that we can return this card to you
- Attach this form to the front of the mailpiece or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

E. T. Boyle Trust
NationsBank #1071004
Post Office Box 840738
Dallas, TX 75283

4a. Article Number

Z 559 572 214

4b. Service type

- ☐ Registered ☐ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

CERTIFIED

Z 559 572 215

MAIL



U.S. POSTAGE
0373
HENDERSON 501819

SAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:

James T. Wood
1917 Rosewood Lane
Huntsville, TX

FIRST CLASS MAIL

PS Form 3800, April 1995

Postmark or Date	
TOTAL Postage & Fees	\$ 3.23
Date & Address Shown to Whom	
Return Receipt Showing to Whom & Date Delivered to	1.10
Restricted Delivery Fee	
Special Delivery Fee	
Certified Fee	1.35
Postage	\$.78

James T. Wood
1917 Rosewood Lane
Huntsville, TX 77340-4938

US Postal Service
Receipt for Certified Mail

Z 559 572 215

Z 559 572 216

US Postal Service

Receipt for Certified Mail

W. R. Phillips
1120 Ridgecrest
Gallup, NM 87301

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee)

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

W. R. Phillips
1120 Ridgecrest
Gallup, NM 87301

4a. Article Number

Z 559 572 216

4b. Service Type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-19-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *W. R. Phillips*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 217

US Postal Service

Receipt for Certified Mail

R. L. Taylor, Jr.
NationsBank #1071001
Post Office Box 840738
Dallas, TX 75283

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 218

US Postal Service

Receipt for Certified Mail

Conoco, Inc.
Post Office Box 951063
Dallas, TX 75395

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Conoco, Inc.
Post Office Box 951063
Dallas, TX 75395

4a. Article Number

Z 559 572 218

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 219

US Postal Service

Receipt for Certified Mail

Marathon Oil Company
Post Office Box 890882
Dallas, TX 75389-0882

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Marathon Oil Company
Post Office Box 890882
Dallas, TX 75389-0882

4a. Article Number

Z 559 572 219

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 220

US Postal Service
Receipt for Certified Mail

Louis Dreyfus Natural Gas
Post Office Box 960116
Oklahoma City, OK 73196-0116

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Louis Dreyfus Natural Gas
Post Office Box 960116
Oklahoma City, OK 73196-0116

4a. Article Number

Z 559 572 220

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 221

US Postal Service
Receipt for Certified Mail

Kimberly Kay Combs
Rt. 3, Box 140
Nonona, TX 76255

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Kimberly Kay Combs
Rt. 3, Box 140
Nonona, TX 76255

4a. Article Number

Z 559 572 221

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1996

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 222

US Postal Service

Receipt for Certified Mail

Patricia Cherry Stewart
Post Office Box 578
Nonona, TX 76225-0578

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1 ☐ Addressee's Address
2 ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Patricia Cherry Stewart
Post Office Box 578
Nonona, TX 76225-0578

4a. Article Number

Z 559 572 222

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Patricia Cherry Stewart*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 223

US Postal Service

Receipt for Certified Mail

George A. Chase
1908 Briscoe Ave.
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1 ☐ Addressee's Address
2 ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

George A. Chase
1908 Briscoe Ave.
Artesia, NM 88210

4a. Article Number

Z 559 572 223

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-96

5. Received By: (Print Name)

✓ *George A. Chase*

6. Signature: (Addressee or Agent)

X ✓ *George A. Chase*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 224

US Postal Service

Receipt for Certified Mail

Titan Resources
500 W. Texas Ave.
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Titan Resources
500 W. Texas Ave.
Midland, TX 79701

4a. Article Number

Z 559 572 224

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-58

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

[Signature]
PS Form 3800, December 1995

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 225

US Postal Service

Receipt for Certified Mail

Amoco
200 N. Loraine St.
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Amoco
200 N. Loraine St.
Midland, TX 79701

4a. Article Number

Z 559 572 225

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-28

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

[Signature]
PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 226

US Postal Service

Receipt for Certified Mail

OXY USA
Post Office Box 50250
Midland, TX 79710

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10-94
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

OXY USA
Post Office Box 50250
Midland, TX 79710

4a. Article Number

Z 559 572 226

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-96

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 227

US Postal Service

Receipt for Certified Mail

BTA
104 South Pecos
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10-94
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BTA
104 South Pecos
Midland, TX 79701

4a. Article Number

Z 559 572 227

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 22 1996

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 228

US Postal Service

Receipt for Certified Mail

Paul Slayton
Post Office Box 1936
Roswell, NM 88202

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Paul Slayton
Post Office Box 1936
Roswell, NM 88202

4a. Article Number

Z 559 572 228

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 229

US Postal Service

Receipt for Certified Mail

Ray Westall
Post Office Box 4
Loco Hills, NM 88255-0004

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ray Westall
Post Office Box 4
Loco Hills, NM 88255-0004

4a. Article Number

Z 559 572 229

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

2 559 572 230

US Postal Service
Receipt for Certified Mail

Fred Allison
201 W. Wall Avenue
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Ret. Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1991

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2268
SANTA FE, NEW MEXICO 87504-2208

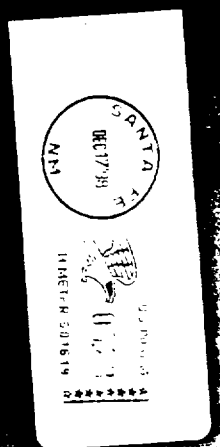
TO:
Fred Allison
201 W. Wall Avenue
Midland, TX 79701

FIRST CLASS MAIL

ATTEMPTED DELIVERY - NOT KNOWN

MAIL

2 559 572 230



Z 559 572 231

US Postal Service
Receipt for Certified Mail

Shell Oil Co.
200 N. Loraine Street
Midland, TX 79701

Postage	\$. 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.16
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Shell Oil Co.
200 N. Loraine Street
Midland, TX 79701

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number
Z 559 572 231

4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
2 2 1994

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 232

US Postal Service

Receipt for Certified Mail

Merit Energy
12222 Merit Drive, Suite 1500
Dallas, TX 75251-3206

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Merit Energy
12222 Merit Drive, Suite 1500
Dallas, TX 75251-3206

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 232

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-22-98

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 233

US Postal Service

Receipt for Certified Mail

Burk Royalty Co.
1000 Petroleum Building
Post Office Box BRC
Wichita Falls, TX 76307-7507

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Burk Royalty Co.
1000 Petroleum Building
Post Office Box BRC
Wichita Falls, TX 76307-7507

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 233

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 234

US Postal Service

Receipt for Certified Mail

J.C. Thompson
325 N. Saint Paul, Suite 4500
Dallas, TX 75201-3828

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you
- Attach this form to the front of the mailpiece, or on the back if space does not permit
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
 - 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

J.C. Thompson
325 N. Saint Paul, Suite 4500
Dallas, TX 75201-3828

4a. Article Number

Z 559 572 234

4b. Service Type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ CCD

7. Date of Delivery

12 22 94

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-96-8-0229

Domestic Return Receipt

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

Z 559 572 235

US Postal Service
Receipt for Certified Mail

Exxon
No. 25 Desta Drive
Midland, TX 79705

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

MAIL

Z 559 572 235

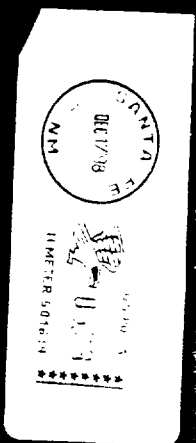
TO:

Exxon
No. 25 Desta Drive
Midland, TX 79705

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

FIRST CLASS MAIL

UNDELIVERED
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



Z 559 572 236

US Postal Service

Receipt for Certified Mail

B & W Oil Company
5944 Luther Ln., Suite 709
Dallas, TX 75225-5919

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Z 559 572 237

US Postal Service

Receipt for Certified Mail

Ryder Scott Management
1100 Louisiana, Suite 3800
Houston, TX 77002

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ryder Scott Management
1100 Louisiana, Suite 3800
Houston, TX 77002

4a. Article Number

Z 559 572 237

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

12-22

5. Received By: (Print Name)

KEVIN DEAN

6. Signature: (Addressee or Agent)

Kevin Dean

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 238

US Postal Service

Receipt for Certified Mail

Windfohr Oil Co.
Post Office Box 188
Loco Hills, NM 88255-0188

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Windfohr Oil Co.
Post Office Box 188
Loco Hills, NM 88255-0188

4a. Article Number

Z 559 572 238

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

BOBBY CLABORN

Bobby Claborn

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 239

US Postal Service

Receipt for Certified Mail

Burnett Oil Co., Inc.
801 Cherry Street, Suite 1500
Interfirst Tower
Fort Worth, TX 76102-6815

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Burnett Oil Co., Inc.
801 Cherry Street, Suite 1500
Interfirst Tower
Fort Worth, TX 76102-6815

4a. Article Number

Z 559 572 239

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

DEC 2 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X [Signature]

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 240

US Postal Service

Receipt for Certified Mail

Armer Oil Co.
159 N. Riverside Dr.
Fort Worth, TX 76111-3911

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Armer Oil Co.
159 N. Riverside Dr.
Fort Worth, TX 76111-3911

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 240

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

JAN 6 1999

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 241

US Postal Service

Receipt for Certified Mail

Lobo Resources
2000 S. Dairy Ashford, Suite 41
Houston, TX 77077-5727

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Lobo Resources
2000 S. Dairy Ashford, Suite 410
Houston, TX 77077-5727

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

Z 559 572 241

4b. Service type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12/23/93

8. Addressee's Address (Only if requested and fee is paid)

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 242

US Postal Service

Receipt for Certified Mail

J & G Enterprises Ltd. Co.
Post Office Box 100
Artesia, NM 88211-0100

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

J & G Enterprises Ltd. Co.
Post Office Box 100
Artesia, NM 88211-0100

4a. Article Number

Z 559 572 242

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10-27-98

5. Received By: (Print Name)

JAMES E. GUY

6. Signature: (Addressee or Agent)

X James E. Guy

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 243

US Postal Service

Receipt for Certified Mail

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 73102-82

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 73102-8260

4a. Article Number

Z 559 572 243

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-18

5. Received By: (Print Name)

X Karen Acker

6. Signature: (Addressee or Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 244

US Postal Service

Receipt for Certified Mail

Cima Capitan Cima Energy
1111 Fannin, Suite 1490
Houston, TX 77002

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Cima Capitan Cima Energy
1111 Fannin, Suite 1490
Houston, TX 77002

4a. Article Number

Z 559 572 244

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

John Codrington

6. Signature: (Addressee or Agent)

X John Codrington

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 245

US Postal Service

Receipt for Certified Mail

Yates Petroleum Corp.
105 South 4th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Yates Petroleum Corp.
105 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 245

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

X Joann Griggs

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

7 181 567 412

US Postal Service

Receipt for Certified Mail

Mack Energy Corporation
Post Office Box 960
Artesia, NM 88211-0960

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mack Energy Corporation
Post Office Box 960
Artesia, NM 88211-0960

4a. Article Number

2181 567 412

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Steve Hensley

6. Signature: (Addressee or Agent)

X *Steve Hensley*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

Z 181 567 413

US Postal Service

Receipt for Certified Mail

Rodney Webb
Post Office Box 1125
Artesia, NM 88211-1125

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Rodney Webb
Post Office Box 1125
Artesia, NM 88211-1125

4a. Article Number

2181 567 413

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-95

5. Received By: (Print Name)

Sue Webb

6. Signature: (Addressee or Agent)

X Sue Webb

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 181 567 414

US Postal Service

Receipt for Certified Mail

Texaco Exploration & Production
Post Office Box 3109
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Texaco Exploration & Production
Post Office Box 3109
Midland, TX 79702

4a. Article Number

2 181 567 414

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

2 1994

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 181 567 419
US Postal Service
Receipt for Certified Mail

C. Beal Family Trust for
Kelly Beal
104 South Pecos
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

C. Beal Family Trust for
Kelly Beal
104 South Pecos
Midland, TX 79701

4a. Article Number

Z 181 567 419

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

DEC 23 1995

5. Received By: (Print Name)

K. Harte

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X L. J. J. J.

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 181 567 420
US Postal Service
Receipt for Certified Mail

Donald B. Anderson
409 E. College Blvd.
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1. and/or 2. for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Donald B. Anderson
409 E. College Blvd.
Roswell, NM 88202

4a. Article Number

Z 181 567 420

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

MARINA ALHATAN

6. Signature: (Addressee or Agent)

X Marina Alhatan

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

PS Form 3800, April 1995

Thank you for using Return Receipt Service

2 181 567 277
US Postal Service
Receipt for Certified Mail

Kennedy Oil Co.

Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$ 74
Certified Fee	1.35
Special Delivery Fee	
Registered Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom (use 1 address & address)	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

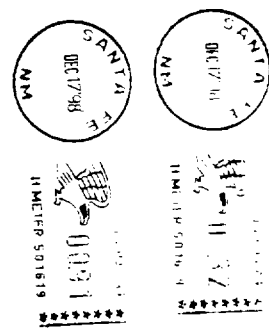
2 181 567 277
MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:

Kennedy Oil Co.
Artesia, NM 88210

FIRST CLASS MAIL



**BEFORE THE
OIL CONSERVATION DIVISION**
Santa Fe, New Mexico

Case Nos. 12112 and 12113 Exhibit No. 8

Submitted by: GP II Energy, Inc.

Hearing Date: February 4, 1999

[illegible]

2900

3000

TOP OF UNITIZED INTERVAL - 3050'

3100

3200

3300

3400

3500

3600

3700

3800

3900

4000

4100

4200

BOTTOM OF UNITIZED INTERVAL - 4206'

Hearing Date: February 4, 1999