

PS Form 3811, December 1994
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. ☐ Consult postmaster for fee

4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Registered Mail
4f. Return Receipt for Merchandise
4g. COD
4h. Date of Delivery

5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

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RETURN ADDRESS completed on the reverse side?
1. Article Addressed to: WATERS S DAVIS III, CHASE BANK OF TX, N.A., TRUST MINERALS SEC #1049308, P.O. BOX 200336, HOUSTON TX 77216-0336
2. Article Number: 7186726306
3. Article Addressed to: JEREMY S DAVIS, 7538 BROMPTON BLVD, HOUSTON TX 77025
4. Article Number: 7186726303
5. Received By: (Print Name) X Helen B Davis
6. Signature: (Address or Agent)
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid)

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card to you. Please turn in the front of the mailpiece, or on the back (if space does not permit), a "Return to Addressee" label, with the return address below the article number.

When the article is received, the label will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

CLAUDIA MARCIA LUNDELL
GILMER
30 GOLDEN PLACE
THE WOODLANDS TX 77381

4a. Article Number
7186 724 337

4b. Service Type

☒ Confirmed
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
2/25/79

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

Thank you for using Return Receipt

PS Form 3811, December 1964

SENDER: - Complete items 1, 2 and 3 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 to you. - Print your name and address on the back of the package, or on the back if space does not allow. - Attach this form to the front of the mailpiece, or on the back if space does not allow. - Sign and "Postnet" or "Postnet Plus" barcode on the back of the mailpiece. - Return Receipt: Requester of 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 ☐ 3. Consult postmaster for fee.
3. Article Addressed to: BARBARA W FRISON 41 MARTIN LANE ENGLEWOOD CO 80110	4a. Article Number: 4186726836 4b. Service Type: ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Certified ☒ Insured ☐ COD
5. Received By: (Print Name) <i>[Signature]</i>	7. Date of Delivery: 2-24-99 8. Addressee's Address (Only if requested and fee is paid)
6. Signature (Addressee or Agent) <i>[Signature]</i>	9. Domestic Return Receipt

SENDER: 1. Print your name and full address on the reverse of this form so that we can return this to you. Complete items 1, 2, 3, 4, 5, and 6b. 2. Print your name and full address on the reverse of this form so that we can return this to you. Complete items 1, 2, 3, 4, 5, and 6b. 3. Attach this form to the front of the mailpiece, or on the back if space does not permit. 4. Write "Return Requestor's Address" on the mailpiece below the article number. 5. The "Return Receipt" will show to whom the article was delivered and the date delivered.	1. Also wish to receive the following services (for an extra fee): 2. ☐ Addressee's Address 3. ☐ Restricted Delivery 4. ☐ Consult postmaster for fee.	3. Article Addressed to: 4a. Article Number <u>7-186-716 335</u>	4b. Service type ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise 5. Date of Delivery	6. Certified ☒ 7. Insured ☐ 8. COD ☐	9. Addressee's Address (only if requested and fee paid) 10. Signature of Addressee or Agent	11. Received By: (Print Name) 12. Signature of Addressee or Agent	13. Date of Receipt 14. Time of Receipt
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is your RETURN ADDRESS completed on the reverse as PS Form 3811, December 1994	
3. Article Addressed to: KEVIN GIGER 748 MAPLE COLLINSVILLE IL 62234	
4a. Agent Number 71867216334	4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise 7. Date of Delivery 3-6-97
5. Received By: (Print Name) Kevin Giger 6. Signature (Addressee or Agent) <i>X Kevin Giger</i>	8. Addressee's Address (Only if requested and fee is paid)
9. Domestic Return Receipt	

PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186 726 348
4b. Service Type: Registered ☒ Certified ☐
5. Registered By: (Print Name) SHIRLEY M GAULDIN
6. Signature: (Address or Agent) 5207 MCCORMICK MTN DR
7. Date of Delivery: 11-17-94
8. Addressee's Address (Only if requested and fee is paid): AUSTIN TX 78734

PS Form 3811, December 1994

1. ☐ Addressee's Address
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3. Article Addressed to:
4a. Article Number: 7186 726 345
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) SHIRLEY M GAULDIN
6. Signature: (Address or Agent) 5207 MCCORMICK MTN DR
7. Date of Delivery: 11-17-94
8. Addressee's Address (Only if requested and fee is paid): AUSTIN TX 78734

PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186 726 347
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) BARBARA EVANS
6. Signature: (Address or Agent) P O BOX 582
7. Date of Delivery: 3-4-99
8. Addressee's Address (Only if requested and fee is paid): PALACIOS TX 77465-0582

PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186 726 344
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) BARBARA EVANS
6. Signature: (Address or Agent) P O BOX 582
7. Date of Delivery: 3-4-99
8. Addressee's Address (Only if requested and fee is paid): PALACIOS TX 77465-0582

PS Form 3811, December 1994

1. ☐ Addressee's Address
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3. Article Addressed to:
4a. Article Number: 7186 726 346
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) JOSE E & CLARA E GOMEZ, LIVING
6. Signature: (Address or Agent) TRUST DTD
7. Date of Delivery: 4-16-96
8. Addressee's Address (Only if requested and fee is paid): JOSE E & CLARA G GOMEZ

PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186 726 343
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) JOSE E & CLARA G GOMEZ
6. Signature: (Address or Agent) TRUST DTD
7. Date of Delivery: 4-16-96
8. Addressee's Address (Only if requested and fee is paid): JOSE E & CLARA G GOMEZ

PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186 726 298
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) BEN J GARDNER, JR
6. Signature: (Address or Agent) BOX 3108, UNIVERSITY PARK
7. Date of Delivery: LAS CRUCES NM 88003

PS Form 3811, December 1994

1. ☐ Addressee's Address
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4a. Article Number: 7186 726 342
4b. Service Type: Registered ☐ Certified ☒
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6. Signature: (Address or Agent) BOX 3108, UNIVERSITY PARK
7. Date of Delivery: LAS CRUCES NM 88003

Thank you for using Return Receipt Service.

1. Addressee's Address
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3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
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4a. Article Number
4b. Service Type
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4a. Article Number
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PS Form 3811, December 1994

Send to you

1. ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit. ☐ Return Receipt Requested on the mailpiece below the article number.

2. ☐ Restricted Delivery

3. Article Addressed to:

4a. Article Number: 7-186 726 275

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) JAMES A. & JUDITH A. BROWN

6. Signature: (Address or Agent) P O BOX 928 ELK CITY OK 73648

7. Date of Delivery: FEB 2 1999

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

PS Form 3811, December 1994

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2. ☐ Restricted Delivery

3. Article Addressed to:

4a. Article Number: 7-186 726 267

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) GUY R CAMPBELL

6. Signature: (Address or Agent) 8336 BASUTO DRIVE NEW PORT RICHEY FL 34655

7. Date of Delivery: FEB 2 1999

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

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3. Article Addressed to:

4a. Article Number: 7-186 726 266

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) WILLIAM C BRIGGS

6. Signature: (Address or Agent) C/O NATIONS BANK OIL & GAS ACCOUNTING P O BOX 840738 DALLAS TX 75284-0738

7. Date of Delivery: FEB 2 1999

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

PS Form 3811, December 1994

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3. Article Addressed to:

4a. Article Number: 7-186 726 265

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) MARY JONE CHAPPELL

6. Signature: (Address or Agent) P O BOX 11970 ALBUQUERQUE NM 87192

7. Date of Delivery: FEB 2 1999

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

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2. ☐ Restricted Delivery

3. Article Addressed to:

4a. Article Number: 7-186 726 264

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) JEFF H. CALLOW

6. Signature: (Address or Agent) 628 CRAIG STREET WALLA WALLA WA 99362

7. Date of Delivery: 2-25

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

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2. ☐ Restricted Delivery

3. Article Addressed to:

4a. Article Number: 7-186 726 250

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) HERBERT R BRIGGS

6. Signature: (Address or Agent) C/O NATIONS BANK OIL & GAS ACCOUNTING P O BOX 840738 DALLAS TX 75284-0738

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3. Article Addressed to:

4a. Article Number: 7-186 726 249

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) ANITA BRIGGS

6. Signature: (Address or Agent) 115 FISH & GAME ROAD CHERRY VALLEY NY 13320

7. Date of Delivery: 2/25/99

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3. Article Addressed to:

4a. Article Number: 7-186 726 457

4b. Service Type: ☐ Registered ☐ Certified ☐ Insured ☐ COD

5. Received By: (Print Name) NEIL D SCHWED FAMILY TRUST OF 1983

6. Signature: (Address or Agent) 32 TREEHAVEN DRIVE SAN RAFAEL CA 94901

7. Date of Delivery: 2/24/99 RA

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

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10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

GENEVEE CANDELARIA
P.O. BOX 348
BLANCO NM 87412

4a. Article Number
F-180720270
4b. Service Type
Registered
Express Mail
Return Receipt for Merchandise
COD
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

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10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

607297209817
4a. Article Number
F-180720270
4b. Service Type
Registered
Express Mail
Return Receipt for Merchandise
COD
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
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10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

607297209817
4a. Article Number
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10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

GENOVEVA JUANITA GOMEZ
CANDELARIA
P.O. BOX 348
BLANCO NM 87412

4a. Article Number
F-180720270
4b. Service Type
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5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

E. GLEASON BROWN
7002 W ORANGE DRIVE
GLENDALE AZ 85303

4a. Article Number
F-180720270
4b. Service Type
Registered
Express Mail
Return Receipt for Merchandise
COD
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

CHASE OIL CORPORATION
P.O. BOX 1767
ARTESIA NM 88211-1767

4a. Article Number
F-180720270
4b. Service Type
Registered
Express Mail
Return Receipt for Merchandise
COD
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

BEN J CASE & MARY VAL CASE
TR. OF THE - BEN J CASE & MARY VAL CASE
REV TRUST
1718 HATCHER ROAD WEST
SUN CITY AZ 85351

4a. Article Number
F-180720270
4b. Service Type
Registered
Express Mail
Return Receipt for Merchandise
COD
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

10255-96-9-0225 Domestic Return Receipt
PS Form 3811, December 1984

DELFINITA G. CHAVEZ
603 WHITE AVENUE
AZTEC NM 87410

4a. Article Number
F-180720270
4b. Service Type
Registered
Express Mail
Return Receipt for Merchandise
COD
5. Received By: (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 281
4b. Service Type: Registered ☒ Certified ☐
5. Registered By: (Print Name) PAMELA BRUNS
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): 1130 FISKE, PACIFIC PALISADE CA 90272

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 277
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) MARIA DELFINITA GOMES CHAVEZ
6. Signature: (Addressee or Agent) X FLAVIO CHAVEZ
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): 603 WHITE AVENUE, AZTEC NM 87410

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 282
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) THOMAS B CATRON, III & JUNE
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): ELLIS CATRON REVOCABLE TRUST, P O BOX 788, SANTA FE NM 87504-0788

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 278
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) MICHAEL D. BROWN
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): 5723 YUKON STREET, ARVADA CO 80002

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 283
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) KAY DIANE BOWLES TRUSTEE
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): -OF THE KATHERINE F CLAMMER TRUST, 5308 FALMOUTH ROAD, BETHESDA MD 20816

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 279
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) JOHN S CATRON
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): P O BOX 788, SANTA FE NM 87504

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 234
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) THE BOARD OF TRUSTEES OF
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): C/O TEXAS COMMERCE BANK, P O BOX 660197, DALLAS TX 75266-0197

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7180 726 280
4b. Service Type: Registered ☐ Certified ☒
5. Registered By: (Print Name) CINCO GENERAL PARTNERSHIP
6. Signature: (Addressee or Agent) X [Signature]
7. Date of Delivery: 3-29
8. Addressee's Address (Only if requested and fee is paid): ATTN: FRANK D GORHAM, III, P O BOX 451, ALBUQUERQUE NM 87103-0451

PS Form 3811, December 1994

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720230. 2. Service Type: Registered. 3. Article Addressed to: PAMELA GRAY BALDWIN, CHASE BANK OF TEXAS, N.A., AGENT & ATTORNEY-IN-FACT, TR MINERALS SECTION #1049313, HOUSTON TX 77216-0336. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) FEB 26 1999. 6. Signature: (Address or Agent) X.

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720231. 2. Service Type: Registered. 3. Article Addressed to: THEODORE BLECHER, 138 LA CANADA WAY, SANTA CRUZ CA 95060. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) T BLECHER. 6. Signature: (Address or Agent) X T BLECHER.

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720232. 2. Service Type: Registered. 3. Article Addressed to: AMOCO PRODUCTION COMPANY, 1670 BROADWAY, P O BOX 800, DENVER CO 80201. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) X. 6. Signature: (Address or Agent) X.

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720233. 2. Service Type: Registered. 3. Article Addressed to: RICHARD K BARR, 5716 HILLCREST PLACE, MIDLAND TX 79707. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) FEB 26 1999. 6. Signature: (Address or Agent) X.

Is your RETURN ADDRESS completed on the reverse side? PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720234. 2. Service Type: Registered. 3. Article Addressed to: GEORGIA F. ANDERSON LIVING, TRUST, 322 SOUTH MAIN, AZTEC NM 87410. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) LUBA ANDERSON. 6. Signature: (Address or Agent) X LUBA ANDERSON.

Is your RETURN ADDRESS completed on the reverse side? PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720235. 2. Service Type: Registered. 3. Article Addressed to: SUSAN HESS BAUMANN, 2410 BRIARBROOK, HOUSTON TX 77042. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) X Susan Baumann. 6. Signature: (Address or Agent) X Susan Baumann.

Is your RETURN ADDRESS completed on the reverse side? PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720236. 2. Service Type: Registered. 3. Article Addressed to: BURLINGTON RESOURCES OIL & GAS COMPANY, P O BOX 4289, FARMINGTON NM 87499-4289. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) X Judith Dee. 6. Signature: (Address or Agent) X Judith Dee.

Is your RETURN ADDRESS completed on the reverse side? PS Form 3811, December 1994. Domestic Return Receipt. 12535-96-8-0229. 1. Article Number: 71810720237. 2. Service Type: Registered. 3. Article Addressed to: AMERICAN WEST GAS-1993 LLC, A-UTAH LIMITED LIABILITY CO, C/O PETROX RESOURCES, INC., 38668 HIGHWAY 13, MEEKER CO 81641. 4. Addressee's Address: 1. Addressee's Address: 2. Restricted Delivery. 5. Received By: (Print Name) X. 6. Signature: (Address or Agent) X.

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. JERRY J ANDREW, 408 LONGWOODS LANE, HOUSTON TX 77024. 4a. Article Number: 71810 726 241. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) X [Signature]. 6. Signature: (Addressee or Agent) X [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. ROBERT E. BEAMON, 2603 AUGUSTA SUITE 1050, HOUSTON TX 77057. 4a. Article Number: 71810 726 242. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) X [Signature]. 6. Signature: (Addressee or Agent) X [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. ANNA BELLE BORDER and DAVID MATHIESON, JOINT TENANTS, P O BOX 27512, ALBUQUERQUE NM 87125. 4a. Article Number: 71810 726 243. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) Anna Belle Border. 6. Signature: (Addressee or Agent) X [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. SHERRILL A. BOARDMAN, TRUSTEE OF JOSE E. ARMUJO & JANE S. ARMUJO, REVOCABLE TRUST, P O BOX 4549, CHESTERFIELD MO 63008-4549. 4a. Article Number: 71810 726 244. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) X [Signature]. 6. Signature: (Addressee or Agent) X [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. BOLACK MINERALS COMPANY, 3901 BLOOMFIELD COMPANY, FARMINGTON NM 87401. 4a. Article Number: 71810 726 237. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) [Signature]. 6. Signature: (Addressee or Agent) [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. REECE B. ANDERSON, 2400 AUGUSTA, SUITE 365, HOUSTON TX 77057. 4a. Article Number: 71810 726 238. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) [Signature]. 6. Signature: (Addressee or Agent) [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. BB ROYALTY PARTNERSHIP, P O BOX 220, CASPER WY 82602. 4a. Article Number: 71810 726 239. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) [Signature]. 6. Signature: (Addressee or Agent) [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

Thank you for using Return Receipt Service. PS Form 3811, December 1994. Domestic Return Receipt. 102595-98-9-0229. BOLD RICH PARTNERS, A TEXAS GENERAL PARTNERSHIP DBA STATEWIDE MINERALS COMPANY, P O BOX 10648, MIDLAND TX 79702. 4a. Article Number: 71810 726 240. 4b. Service Type: Registered. 4c. Certified: [X]. 4d. Insured: [X]. 4e. Express Mail: [X]. 4f. Return Receipt for Merchandise: [X]. 4g. COD: [X]. 5. Received By: (Print Name) [Signature]. 6. Signature: (Addressee or Agent) [Signature]. 7. Date of Delivery: 12-25-99. 8. Addressee's Address (Only if requested and fee is paid):

SENDER: 1. Complete items 1 and 2 for additional services. 2. Print your name and address on the reverse of this form so that we can return the extra fee(s). 3. Print your name and address on the reverse of this form so that we can return the extra fee(s). 4. Attach this form to the top of the mailpiece, or on the back if space does not permit. 5. Return Receipt Requester on the mailpiece below the article number. 6. 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 3. ☐ Consult postmaster for fee.
3. Article Addressed to:	4a. Article Number: 7-186-726-248
4b. Service Type ☐ Registered ☐ Express Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD	☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) Chad Miller	7. Date of Delivery FEB 24 1999 8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
4c. Registered
4d. Express Mail
4e. Return Receipt for Merchandise
5. Date of Delivery
6. Addressee's Address (Only if requested and fee is paid)
7. Signature (Address or Agent)

PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 811
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) BUREAU OF LAND MANAGEMENT
6. Signature: (Addresser or Agent) 1235 LA PLATA HIGHWAY
7. Date of Delivery: 2/23/99 FARMINGTON NM 87401
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 812
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) CASE FAMILY REVOCABLE TRUST
6. Signature: (Addresser or Agent) -VANIS WALTER CASE AND
7. Date of Delivery: 2-25-99 GERTRUDE L CASE, CO.
8. Addressee's Address (Only if requested and fee is paid) TRUSTEES
TUCSON AZ 85710
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 813
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) JOHN EDMUND CHOUTEAU &
6. Signature: (Addresser or Agent) SHIRLEY ANN CHOUTEAU
7. Date of Delivery: -CO-TRS OF SHIRLEY ANN
8. Addressee's Address (Only if requested and fee is paid) CHOUTEAU TR DTD 6-10-92
2505 GLYNWOOD DRIVE
BARTLESVILLE OK 74006
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 672
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) C A HANSON IND & AS NATURAL
6. Signature: (Addresser or Agent) -GUARDIAN FOR USA K
7. Date of Delivery: P O BOX 1054
8. Addressee's Address (Only if requested and fee is paid) EDWARDS CO 81632
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 805
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) TOTAL MINATOME CORPORATION
6. Signature: (Addresser or Agent) P O BOX 401769
7. Date of Delivery: FEB 26 1999 HOUSTON TX 77216-1769
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 808
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) GELEANOR TRUJILLO
6. Signature: (Addresser or Agent) 2114 S MT DANIELS DRIVE
7. Date of Delivery: 2-25-99 ELLENBERG WA 98926
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 809
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) LAGENE E VERHINES
6. Signature: (Addresser or Agent) 511 S FIR
7. Date of Delivery: ROSWELL NM 88201
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

1. ☐ Addresser's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211 318 810
4b. Service Type: Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ COD ☐
5. Received By: (Print Name) LILLIE M YATES ESTATE
6. Signature: (Addresser or Agent) SP YATES, FRANK YATES, JR & BW
7. Date of Delivery: HARPER
8. Addressee's Address (Only if requested and fee is paid) CO-PERSONAL REPRESENTATIVES
ARTESIA NM 88211-0840
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)
9. Signature: (Addressee or Agent)
10. Date of Delivery

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)
9. Signature: (Addressee or Agent)
10. Date of Delivery

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)
9. Signature: (Addressee or Agent)
10. Date of Delivery

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)
9. Signature: (Addressee or Agent)
10. Date of Delivery

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)
9. Signature: (Addressee or Agent)
10. Date of Delivery

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
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1. Addressee's Address
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4a. Article Number
4b. Service Type
5. Received By: (Print Name)
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9. Signature: (Addressee or Agent)
10. Date of Delivery

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)
9. Signature: (Addressee or Agent)
10. Date of Delivery

☐ Complete items 3, 4a, and 4b;
☐ Print your name and address on the reverse of this form so that we can return this;
☐ Attach "Return Receipt Requested" on the malpiece, or on the back if space does not
☐ Write "Return Receipt Requested" on the malpiece below the article number
☐ The Return Receipt will show to whom the article was delivered and the date

3. Article Addressed to: T H MCLVAIN OIL & GAS LTD PARTNERSHIP P O BOX 2148 SANTA FE NM 87504-2148	4a. Article Number: Z 241 318 790	4b. Service Type: ☐ Registered ☐ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Malpiece ☐ COD 7. Date of Return: <i>NOV 1999</i>
5. Received By: (Print Name)		8. Addressee Address (Only if requested and fee is paid)
6. Signature: (Address or Agent) <i>X Lloyd Packer</i>		Domestic Return Receipt 1025-95-RH-B-0226

SENDER: Complete 1 and/or 2 for general use. 2 Complete items 3, 4a, and 4b. 3 Complete items 3, 4a, and 4b, and return this form so that we can return this card to you. 4 Match this form to the front of the package if space does not allow. * Attach this form to the front of the package. * Mark "Return Receipt Requested" below the article number. * Mark "Return Receipt with Description Requested" below the article number and desired description.	3. Article Addressed to: 4a. Article Number 4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery	I also wish to receive the following services for an extra fee): 1. ☐ Addressee's Address 2. ☐ Restricted Delivery Consult postmaster for fee.
5. Received By: (Print Name) 6. Signature: (Addressee or Agent)	8. Addressee's Address (Only if requested and fee is paid)	Domestic Return Receipt
PS Form 3817, December, 1994	1-800-545-565 ext. 0-2751	PS Form 3817, December, 1994

SENDER: <u>UNITED STATES AIR MAIL</u> Complete items 3, 4a, and 4b to insure delivery and address on the reverse of this form so that we can return the card to you. Attach this form to the front of the mailpiece, or on the back if space does not allow. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will grow to whom the article was delivered and the date of delivery for the sender.	3. Article Addressed to: RUTHLEN STARK 3708 E JUAREZ TUCSON AZ 85713	4a. Article Number <u>2 311 318 792</u> 4b. Service Type ☐ Certified ☒ Registered ☐ Insured ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD	5. Received By: (Print Name) <u>MARKER STARK</u> 6. Signature (Addressee or Agent) <u>X Offman</u>	7. Date of Delivery <u>12-19-64</u>	8. Addressee's Address (Only if requested and fee is paid)	I allow service for the following services (for an extra fee): 1. Addressee's Address ☐ Restricted Delivery ☐ Consult postmaster for fee.	Domestic Return Receipt PS Form 3811, December 1954 02-295-98, 3-6329
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SENDER: Complete items 1, 2 and 3 for additional services: 1. Print your name 2. Print your address 3. Print your phone number	I also wish to receive following services (for extra fee): 1. ☐ Addressee's A 2. ☐ Restricted Del Consult postmaster for	4a. Article Number 2-211 318 7	4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Return Receipt for Merchandise ☐ Return Receipt for Merchandise	7. Date of Delivery
Send to this form to the post office and address on the reverse of this form so that we can return this permit to you. 1. ☐ Return Receipt Requested on the mailpiece before the article number is delivered 2. ☐ Return Receipt will allow to whom the article was delivered and the date	3. Article Addressed to:	TCOUNT-94 C/O CHASE BANK OF TEXAS P O BOX 810984 DALLAS TX 75381-0884		

[illegible]

SENDER: 1. Complete Section 1 and/or 2 for additional services. 2. Complete Section 3, 4a, and 4b. 3. Print your name and address on the reverse of this form so that we can return this form to you. 4. Attach this form to the front of the mailpiece, or on the back if space does not permit. 5. Return Receipt (Postmaster's use only) on the mailpiece below the article number.	I also wish to receive the following services for an extra fee: 1. ☐ Addressee's Address 2. ☐ Restricted Delivery Consent postmaster for fee	3. Article Addressed <i>1</i>
4a. Article Number <i>2</i> 4b. Service Type ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD	5. Received By: (Print Name) <i>Stanico Energy Corporation</i>	6. Signature: (Addressee or Agent) <i>Stanico Energy Corporation</i>
7. Restricted Delivery	8. Addressee's Address (Only if requested)	9. PS Form 3811, December 1994

SENDER: ☐ Complete items 1 and/or 2 for additional services ☐ Complete items 3, 4a, 4b, and 4c ☐ Complete item 5 and address on the reverse of this form so that we can return this form to you.	I also wish to receive the following services for (an extra fee): ☐ Addressee's Address ☐ Restricted Delivery Consult postmaster for fee.	1. Article Number 2-211 318 788
3. Article Addressed to: GEORGE W UMBACH 2620 S MARYLAND PARKWAY, #496 LAS VEGAS NV 89109	4a. Article Number 4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise 5. Recieved By: (Print Name)	6. Signature (Addressee or Agent) x <i>[Signature]</i>
7. Date of Delivery 7-24-94	8. Addressee's Address (Only if requested and fee is paid)	9. Signature (Addressee or Agent)
10. Return Receipt	11. Return Receipt	12. Return Receipt

SENDER: 1. Complete 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831,
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SEND: Complete items 1 and/or 2 for additional services. 1. Complete items 3, 4, 5, and 6b. 2. Complete items 7 and 8. 3. Complete items 9 and 10. 4. Complete items 11 and 12. 5. Complete items 13 and 14. 6. Complete items 15 and 16. 7. Complete items 17 and 18. 8. Complete items 19 and 20. 9. Complete items 21 and 22. 10. Complete items 23 and 24. 11. Complete items 25 and 26. 12. Complete items 27 and 28. 13. Complete items 29 and 30. 14. Complete items 31 and 32. 15. Complete items 33 and 34. 16. Complete items 35 and 36. 17. Complete items 37 and 38. 18. Complete items 39 and 40. 19. Complete items 41 and 42. 20. Complete items 43 and 44. 21. Complete items 45 and 46. 22. Complete items 47 and 48. 23. Complete items 49 and 50. 24. Complete items 51 and 52. 25. Complete items 53 and 54. 26. Complete items 55 and 56. 27. Complete items 57 and 58. 28. Complete items 59 and 60. 29. Complete items 61 and 62. 30. Complete items 63 and 64. 31. Complete items 65 and 66. 32. Complete items 67 and 68. 33. Complete items 69 and 70. 34. Complete items 71 and 72. 35. Complete items 73 and 74. 36. Complete items 75 and 76. 37. Complete items 77 and 78. 38. Complete items 79 and 80. 39. Complete items 81 and 82. 40. Complete items 83 and 84. 41. Complete items 85 and 86. 42. Complete items 87 and 88. 43. Complete items 89 and 90. 44. Complete items 91 and 92. 45. Complete items 93 and 94. 46. Complete items 95 and 96. 47. Complete items 97 and 98. 48. Complete items 99 and 100.		I also wish to receive the following services (for an extra fee): 1. ☐ Addressee's Address 2. ☐ Restricted Delivery 3. ☐ Restricted Delivery 4. ☐ Restricted Delivery 5. ☐ Restricted Delivery 6. ☐ Restricted Delivery 7. ☐ Restricted Delivery 8. ☐ Restricted Delivery 9. ☐ Restricted Delivery 10. ☐ Restricted Delivery 11. ☐ Restricted Delivery 12. ☐ Restricted Delivery 13. ☐ Restricted Delivery 14. ☐ Restricted Delivery 15. ☐ Restricted Delivery 16. ☐ Restricted Delivery 17. ☐ Restricted Delivery 18. ☐ Restricted Delivery 19. ☐ Restricted Delivery 20. ☐ Restricted Delivery 21. ☐ Restricted Delivery 22. ☐ Restricted Delivery 23. ☐ Restricted Delivery 24. ☐ Restricted Delivery 25. ☐ Restricted Delivery 26. ☐ Restricted Delivery 27. ☐ Restricted Delivery 28. ☐ Restricted Delivery 29. ☐ Restricted Delivery 30. ☐ Restricted Delivery 31. ☐ Restricted Delivery 32. ☐ Restricted Delivery 33. ☐ Restricted Delivery 34. ☐ Restricted Delivery 35. ☐ Restricted Delivery 36. ☐ Restricted Delivery 37. ☐ Restricted Delivery 38. ☐ Restricted Delivery 39. ☐ Restricted Delivery 40. ☐ Restricted Delivery 41. ☐ Restricted Delivery 42. ☐ Restricted Delivery 43. ☐ Restricted Delivery 44. ☐ Restricted Delivery 45. ☐ Restricted Delivery 46. ☐ Restricted Delivery 47. ☐ Restricted Delivery 48. ☐ Restricted Delivery 49. ☐ Restricted Delivery 50. ☐ Restricted Delivery 51. ☐ Restricted Delivery 52. ☐ Restricted Delivery 53. ☐ Restricted Delivery 54. ☐ Restricted Delivery 55. ☐ Restricted Delivery 56. ☐ Restricted Delivery 57. ☐ Restricted Delivery 58. ☐ Restricted Delivery 59. ☐ Restricted Delivery 60. ☐ Restricted Delivery 61. ☐ Restricted Delivery 62. ☐ Restricted Delivery 63. ☐ Restricted Delivery 64. ☐ Restricted Delivery 65. ☐ Restricted Delivery 66. ☐ Restricted Delivery 67. ☐ Restricted Delivery 68. ☐ Restricted Delivery 69. ☐ Restricted Delivery 70. ☐ Restricted Delivery 71. ☐ Restricted Delivery 72. ☐ Restricted Delivery 73. ☐ Restricted Delivery 74. ☐ Restricted Delivery 75. ☐ Restricted Delivery 76. ☐ Restricted Delivery 77. ☐ Restricted Delivery 78. ☐ Restricted Delivery 79. ☐ Restricted Delivery 80. ☐ Restricted Delivery 81. ☐ Restricted Delivery 82. ☐ Restricted Delivery 83. ☐ Restricted Delivery 84. ☐ Restricted Delivery 85. ☐ Restricted Delivery 86. ☐ Restricted Delivery 87. ☐ Restricted Delivery 88. ☐ Restricted Delivery 89. ☐ Restricted Delivery 90. ☐ Restricted Delivery 91. ☐ Restricted Delivery 92. ☐ Restricted Delivery 93. ☐ Restricted Delivery 94. ☐ Restricted Delivery 95. ☐ Restricted Delivery 96. ☐ Restricted Delivery 97. ☐ Restricted Delivery 98. ☐ Restricted Delivery 99. ☐ Restricted Delivery 100. ☐ Restricted Delivery		3. Article Addressed to: 4a. Article Number 4b. Service Type 5. Registered ☐ 6. Express Mail ☐ 7. Return Receipt for Merchandise ☐ 8. Addressee's Address (Only if requested and fee is paid) 9. Signature (Signature of agent) 10. Signature (Signature of agent) 11. Signature (Signature of agent) 12. Signature (Signature of agent) 13. Signature (Signature of agent) 14. Signature (Signature of agent) 15. Signature (Signature of agent) 16. Signature (Signature of agent) 17. Signature (Signature of agent) 18. Signature (Signature of agent) 19. Signature (Signature of agent) 20. Signature (Signature of agent) 21. Signature (Signature of agent) 22. Signature (Signature of agent) 23. Signature (Signature of agent) 24. Signature (Signature of agent) 25. Signature (Signature of agent) 26. Signature (Signature of agent) 27. Signature (Signature of agent) 28. Signature (Signature of agent) 29. Signature (Signature of agent) 30. Signature (Signature of agent) 31. Signature (Signature of agent) 32. 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Is your **RETURN ADDRESS** completed on the reverse?

1. **Return Address** (If you are the addressee, please print your name, address, city, state, and zip code on the reverse of this form. If you are the sender, please print your name, address, city, state, and zip code on the reverse of this form.)

2. **Registered Delivery** (If you want to insure your package, please check this box. A receipt will be provided to you when the package is delivered.)

3. **Article Addressed to:**

4a. **Article Number** 2-311 318 744

4b. **Service Type**

☐ Registered

☐ Express Mail

☐ Return Receipt for Merchandise

☐ COD

5. **Received By:** (Print Name) _____

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

7. **Date of Delivery** 2-25-94

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

PS Form 3811, December 1994

10295-98-8 0229 Domestic Return Receipt

SENDER: Complete items 1, 2 and 3 for additional services. 1. Complete items 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827	
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SENDER: 1. Complete and attach 2 for additional services. 2. Complete items 3, 4, and 4b. 3. Print your name and address on the reverse of this form so that we can return this to you. 4. Attach this form to the front of the mailbox or on the back if space does not permit. 5. Return Receipt (R/R) attached on the envelope below the article number. 6. 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	5. Received By: (Print Name) 5. Received By: (Print Name)
3. Article Addressed to: JOE P TRUJILLO P O BOX 351 FARMINGTON NM 87401	4a. Article Number 2-211 318 782 4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise 6. Certified ☒ Insured ☐ COD ☐	7. Date of Delivery 2-23-99
8. Addressee's Address (Only if requested and fee is paid)	9. Recipient's Address (Only if requested and fee is paid)	10. Return Receipt (R/R) attached on the envelope below the article number.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Date of Delivery
6. Signature (Addressee or Agent)
7. Received By (Print Name)
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 771**
4b. Service Type: ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD
7. Date of Delivery: **2-25-99**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 772**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 773**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 774**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 775**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 776**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 777**
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
102595-98-9-0229
Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: **Z-211 318 779**
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
102595-98-9-0229
Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318731
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) MARK A SCHAUER
6. Signature: (Address or Agent) X Mary A Schauer

7. Date of Delivery: FEB 24 1999
8. Addressee's Address (Only if requested and fee is paid)
LITTLETON CO 80162
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318732
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) CAROLYN NIELSON SEDBERRY
6. Signature: (Address or Agent) X Carol Miller
7. Date of Delivery: FEB 24 1999
8. Addressee's Address (Only if requested and fee is paid)
DALLAS TX 75284-0738
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318735
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) SHARRO OIL LTD COMPANY
6. Signature: (Address or Agent) X Toni Hamilton
7. Date of Delivery: 2-24-99
8. Addressee's Address (Only if requested and fee is paid)
ARTESIA NM 88211-0840
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318731
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) SAN JUAN BASIN PARTNERSHIP
6. Signature: (Address or Agent) X A. Grady
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid)
SAN ANTONIO TX 78292-0500
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318734
4b. Service Type: Registered ☐ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) SANDERSON LIVING TRUST,
6. Signature: (Address or Agent) X Larry Joe & Clay Jean
7. Date of Delivery: 2-24-99
8. Addressee's Address (Only if requested and fee is paid)
MONUMENT CO 80132
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318730
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) NINA M ROACH
6. Signature: (Address or Agent) X Nina M Roach
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid)
MONTROSE CO 81401
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318733
4b. Service Type: Registered ☐ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) RONALD ROGERS
6. Signature: (Address or Agent) X Ronald Rogers
7. Date of Delivery: 2-24-99
8. Addressee's Address (Only if requested and fee is paid)
MONUMENT CO 80132
PS Form 3811, December 1994

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

3. Article Addressed to:
4a. Article Number: 2211318729
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) PETROX RESOURCES INC
6. Signature: (Address or Agent) X Petrox Resources Inc
7. Date of Delivery: 2-25-99
8. Addressee's Address (Only if requested and fee is paid)
MEEKER CO 81641
PS Form 3811, December 1994

Print your name and address on the reverse of this form so that we can return this card to you.
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318748
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) NEIL D SCHWED & JANE M SCHWED, JOINT TENANTS 32 TREEHAVEN DRIVE SAN RAFAEL CA 94903
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318742
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) ROMERO FAMILY LTD PARTNERSHIP P O BOX 5155 SANTA FE NM 87502
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318747
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) DEVIN WALLACE SMITH 5204 N BILLEN OKLAHOMA CITY OK 73112
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318741
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) WILLIAM A SMITH, EXECUTOR OF THE ESTATE OF ADELE A SMITH C/O WILLIAMS MAYBEE, ESQ 222 S WESTNEDGE KALAMAZOO MI 49007
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318745
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) JOHN C & LINDA K RUBOW JOINT TENANTS P O BOX 563 CHANUTE KS 66720
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318740
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) MORRIS E SCHERTZ P O BOX DRAWER 2588 ROSWELL NM 86201
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318743
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) IDA CHOSER P O BOX 3272 EAGLE CO 81631
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 221318739
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD
5. Received By: (Print Name) HERMAN B ROGOVY C/O MEGA OIL & GAS, INC. 150 N MILLER ROAD SUITE B AKRON OH 44313
6. Signature: (Addressee or Agent) [Signature]
PS Form 3811, December 1994

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.
1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By:
6. Signature:
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt
PS Form 3811, December 1994
10259-98-9-0229
44 Article Number 7211318712
4b Service Type Registered
4c Return Receipt for Merchandise
4d Date of Delivery 05/12/94
5. Received By (Print Name) GGP SAN JUAN LTD PARTNERSHIP
6. Signature (Address or Agent)
7. Date of Delivery 05/12/94
8. Addressee's Address (Only if requested and fee is paid)
9. Addressee's Address (Only if requested and fee is paid)

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318723
4b. Service Type: Registered ☒ Certified ☐
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318719
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318713
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318719
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318714
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318720
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318716
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318721
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318693
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) JULIE J MARTIN
6. Signature: (Address or Agent) JULIE J MARTIN
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
NATIONS BANK TRUSTEE UAO
JULIE J MARTIN
OIL & GAS ACCOUNTING
P O BOX 840738
DALLAS TX 75284-0738

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318699
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) CYNTHIA GRAY MILANI
6. Signature: (Address or Agent) CHASE BANK OF TEXAS NA
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
AGENT & ATTORNEY-IN-FACT
TR MINERALS SEC 1049313
HOUSTON TX 77216-0336

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318692
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) LOUIS G MEHR
6. Signature: (Address or Agent) 1907 TARPLEY CT
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
KATY TX 77493

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318698
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) JEANETTE MICHELS
6. Signature: (Address or Agent) RT 1 BOX 146
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
JAMESTOWN KS 66948

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318691
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) CIPRIANA M MCCOY
6. Signature: (Address or Agent) BOX 703
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
IGNACIO CO 81137

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318697
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) DOROTHY T MCDUGAL
6. Signature: (Address or Agent) 6508 PENNY LANE
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
BARTLESVILLE OK 74006

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318690
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) HELEN I MARTIN LIFE ESTATE
6. Signature: (Address or Agent) C/O SKEETER PAYSON
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
545 6TH STREET
PENROSE CO 81240

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7211318696
4b. Service Type: Registered ☐ Certified ☒
5. Received By: (Print Name) R M MARTIN
6. Signature: (Address or Agent) P O BOX 490
7. Date of Delivery: FEB 26 1999
8. Addressee's Address (Only if requested and fee is paid):
AZTEC NM 87410

PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

MP SAN JUAN LP
C/O MCELVAIN OIL & GAS
PROPERTIES INC MANAGER
P.O. BOX 2148
SANTA FE NM 87502-2148

7-211318709

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

CHARLES L PARCELL
140 CONVENT CT
SAN RAFAEL CA 94901

7-211318706

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

HERBERT J NEWCOMB
5380 S OLATHE CIRCLE
AURORA CO 80014

7-211318707

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

WILLIS R MOULTON
ONE CRESTHILL DRIVE
BOONTON NJ 07005

7-211318706

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

MYRA PALMER
1147 RUNNING SPRINGS, #3
WALNUT CREEK CA 94595

7-211318705

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

GAIL F MOULTON JR
140 MOUNTAIN DRIVE
TRONA CA 95562

7-211318703

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

JULIA PAGE
P.O. BOX 610
LAWRENCE KS 66044-0610

7-211318702

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By
6. Signature
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

COMMISSIONER OF PUBLIC LANDS
P.O. BOX 1148
SANTA FE NM 87501

7-211318700

12525-98-9-0229 Domestic Return Receipt
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318606
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) JRP SAN JUAN LP
JAMES M RAYMOND, MANAGER
P O BOX 1445
KERRVILLE TX 78029-1445
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery: 3/1/95
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318689
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) HOLMES P MCLISH
633 SEVENTEENTH STREET
SUITE 1910
DENVER CO 80202-3618
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery:
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318605
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) MARVIN L LUNDBLADE
13184 SE 124TH
CLACKAMAS OR 97015
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery: 2-16
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318688
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) KATHRYN MCCORMICK
2905 SAN PABLO NE
ALBUQUERQUE NM 87110
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery: 2-24-94
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318642
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) GARY ROBERT JOHNSON
P O BOX 7507
THE WOODLANDS TX 77387-7507
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery:
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318686
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) DOUGLAS CAMERON MCLEOD
518-17TH ST - SUITE 1455
DENVER CO 80202
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery: 2/24/94
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318679
4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD ☐
5. Received By: (Print Name) LORA B MCALPIN
100 MONSTER DR APT 701
COLLEGE STATION TX 77845-4785
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery:
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Thank you for using Return Receipt Service.

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

3. Article Addressed to:
4a. Article Number: 7211318686
4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐
5. Received By: (Print Name) MCCORMICK & COMPANY INC
C/O CHASE BANK OF TX
P O BOX 610864
DALLAS TX 75381-0864
6. Signature: (Address or Agent) [Signature]
7. Date of Delivery:
8. Addressee's Address (Only if requested and fee is paid)
PS Form 3811, December 1994

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
MAP 1992-A PARTNERS, LP
C/O TEXAS COMMERCE BANK
P O BOX 660197
DALLAS TX 75266-0197

4a. Article Number
221318678

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
FEB 24 1999

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

5. Received By: (Print Name)
X *[Signature]*

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
CARL R MCELVAIN ESTATE JAMES
P O BOX 801888
ADDISON TX 75380

4a. Article Number
221318677

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
3-2-99

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

5. Received By: (Print Name)
X *[Signature]*

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
ESTATE OF G T MCALPIN
ANGELA MCALPIN
INDEPENDENT EXECUTRIX
P O BOX 49
CUERO TX 77954

4a. Article Number
221318676

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
3-1-99

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

5. Received By: (Print Name)
X *[Signature]*

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
ROBERT B MCDOUGAL
6608 PENNY LANE
BARTLESVILLE OK 74008

4a. Article Number
221318674

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
3-1-99

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

5. Received By: (Print Name)

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
LAURA LEE MATLOCK
4307 FARHILLS DRIVE
AUSTIN TX 78731

4a. Article Number
221318673

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
FEB 26 1999

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

5. Received By: (Print Name)
X *[Signature]*

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
JANE G MCDOUGAL
7928 ROOKSLEY COURT
RALEIGH NC 27615

4a. Article Number
221318671

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
2-27-98

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

5. Received By: (Print Name)
X *[Signature]*

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
JAMES M RAYMOND TRUSTEE OF
MAYDELL
-MILLER MAST TRUST
P O BOX 1445
KERRVILLE TX 78029-1445

4a. Article Number
221318670

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
3/1/95

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

5. Received By: (Print Name)
X *[Signature]*

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

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

3. Article Addressed to:
C FRED LUTHY JR
OIL & GAS ACCOUNTING
P O BOX 840738
DALLAS TX 75284-0738

4a. Article Number
221318669

4b. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery
FEB 24 1999

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

5. Received By: (Print Name)

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

3. Article Addressed to:
4a. Article Number: 2211318660
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318664
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318658
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318663
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318657
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318662
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318656
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

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

3. Article Addressed to:
4a. Article Number: 2211318661
4b. Service Type: Registered ☒ Certified ☐
☐ Registered ☐ Insured ☐
☐ Express Mail ☐ COD
7. Date of Delivery: 12/26/99
8. Addressee's Address (Only if requested and fee is paid):
5. Received By: (Print Name) J.B. PREWITT
6. Signature: (Addressee or Agent) J.B. PREWITT
PS Form 3811, December 1994

102595-98-8-0229 Domestic Return Receipt

TURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: PRODUCTION ANALYSIS & MANAGEMENT COMPANY AS AST FOR EDUAMANT JOHNSTON TRUST 9319 LBJ FRY, SUITE 204 DALLAS TX 75243

4a. Article Number: 72113181648

4b. Service Type: Registered ☒ Certified ☐ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) K. Hernandez

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: CHARLES E KELLY 4585 JORDAN SPUR ROAD BOZEMAN MT 59715

4a. Article Number: 72113181649

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Charles E Kelly

Signature: (Address of Agent) X Charles E Kelly

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: CONSTANCE A LOWE 29 HOLT GHOST CANYON TENERRO NM 87573

4a. Article Number: 72113181650

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Constance A Lowe

Signature: (Address of Agent) X Constance A Lowe

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: SUSANNA P ALTHAUS 1411 O BOX P BAR K RANCH SEPARATE PROPERTY ESTATES HER SV ALTHAUS CAMERON MT 59720-0120

4a. Article Number: 72113181651

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Susan P Althaus

Signature: (Address of Agent) X Susan P Althaus

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: ELVA KALB DUMAS TRUSTEE UNDER THE WILL OF E F KALB, DCSO 1203 THE ST JAMES 5555 DEL MONTE DRIVE HOUSTON TX 77066, 4114

4a. Article Number: 72113181643

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Elva Kalb

Signature: (Address of Agent) X Elva Kalb

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: ESTATE OF ERIN LOCKHART EVELYN GIESENSCHLAG, EXECUTRIX P O BOX 518 SOMERVILLE, TX 77879

4a. Article Number: 72113181644

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Erin Lockhart

Signature: (Address of Agent) X Erin Lockhart

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: PAULINE P JOHNSON 10610 SEVENS PARK DRIVE HOUSTON TX 77024

4a. Article Number: 72113181645

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Pauline P Johnson

Signature: (Address of Agent) X Pauline P Johnson

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 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 Requester" 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: LOME PARTNERS LP 10610 SEVENS PARK DRIVE HOUSTON TX 77024-4887

4a. Article Number: 72113181647

4b. Service Type: Registered ☐ Certified ☒ Insured ☐ COD ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 12/14/94

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

Received By: (Print Name) X Jose L. Puente

Signature: (Address of Agent) X Jose L. Puente

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

delivered

3. Article Addressed to: ANDREW B KELLY JR
2375 SUNSET DRIVE
ATLANTA GA 30345

4. Article Number: 72113181046

4a. Service Type: Registered

5. Date of Delivery: FEB 24 1994

6. Signature of Addressee or Agent: X [Signature]

7. Signature of Shipper: [Signature]

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

9. Return Receipt: Domestic Return Receipt

PS Form 3811, December, 1994

SENDER: ☐ Complete items 1 and/or 2 for additional services. ☒ Complete items 3, 4a, and 4b. ☐ Add to our 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 allow.	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 4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise 7. Date of Delivery:	8. Addressee's Address (Only if requested and fee is paid)
3. Article Addressed to: C & W G & S PARTNERS, LP C/O CHASE BANK OF TEXAS P O BOX 910864 DALLAS TX 75391-0864	5. Received By: (Print Name) X 	4c. Article Number 4d. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise 7. Date of Delivery:	8. Addressee's Address (Only if requested and fee is paid)

[illegible]

SENDER: ☐ Complete name and address of the addressee. ☒ Complete name, city, state, and zip ☒ Return your name and address on the reverse of this form so that we can return this article 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 received.	I also wish to receive the following services (for an extra fee): ☐ Addressee's Address ☐ Restricted Delivery Consult postmaster for fee
	4a. Article Number 2-211318639
	4b. Service Type ☒ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD
	7. Date of Delivery 2-26-99
	8. Addressee's Address (Only if requested and fee is paid)
5. Received By (Print Name) S. Gendron (Addressee or Agent)	

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181010
4b. Service Type: Registered ☒ Certified ☐
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2-27-99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181010
4b. Service Type: Registered ☒ Certified ☐
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 3/1/99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181014
4b. Service Type: Registered ☐ Certified ☒
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2/27/99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181014
4b. Service Type: Registered ☐ Certified ☒
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2/27/99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181011
4b. Service Type: Registered ☐ Certified ☒
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2-27-99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181013
4b. Service Type: Registered ☐ Certified ☒
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2/26/99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181010
4b. Service Type: Registered ☐ Certified ☒
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2-27-99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 72113181010
4b. Service Type: Registered ☐ Certified ☒
Express Mail ☐ Insured ☐
Return Receipt for Merchandise ☐ COD ☐
7. Date of Delivery: 2-27-99
8. Addressee's Address (Only if requested and fee is paid):
9. Signature (Addressee or Agent):
10. Signature (Addressee or Agent):
PS Form 3811, December 1994

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
CAROLYN M HARRIS
39 BIRCHWOOD LANE
ROAD #4
TWP NJ 07005

4a. Article Number: 7-2113181002
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X Carol M Harris

6. Signature: (Addresssee or Agent)

7. Date of Delivery: 3-1-99

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

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

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
CATHERINE C HESS, A LIFE
ESTATE
625 S RIPLEY CREEK DRIVE
HOUSTON TX 77057

4a. Article Number: 7-2113181033
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X Catherine C Hess

6. Signature: (Addresssee or Agent)

7. Date of Delivery: 2/26/99

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

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

Thank you for using Return Receipt Service.

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
JOHN C HARRINGTON JR
P O BOX 54831
OKLAHOMA CITY OK 73154

4a. Article Number: 7-2113181059
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X John C Harrington Jr

6. Signature: (Addresssee or Agent)

7. Date of Delivery: FEB 2 5 1999

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

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

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
CYRENE L INMAN, NATIONS BANK,
AGENT
OIL & GAS ACCOUNTING
P O BOX 840738
DALLAS TX 75284-0738

4a. Article Number: 7-2113181034
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X Cyrene L Inman

6. Signature: (Addresssee or Agent)

7. Date of Delivery: FEB 2 5 1999

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

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

Thank you for using Return Receipt Service.

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
HANNETT STEELE GROUP
OIL & GAS ACCOUNTING
P O BOX 840738
DALLAS TX 75284-0738

4a. Article Number: 7-2113181058
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X Hannett Steele Group

6. Signature: (Addresssee or Agent)

7. Date of Delivery: FEB 2 5 1999

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

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

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
MARIA RUBEN GOMEZ JAQUEZ
#10 ROAD 2980
AZTEC NM 87410

4a. Article Number: 7-2113181177
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X Maria Ruben Gomez Jaquez

6. Signature: (Addresssee or Agent)

7. Date of Delivery: FEB 2 5 1999

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

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

Thank you for using Return Receipt Service.

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
R A JENNINGS, AGENT
-SAN JUAN ROYALTY JV-90
P O BOX 3759
MIDLAND TX 79702

4a. Article Number: 7-2113181032
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X R A Jennings

6. Signature: (Addresssee or Agent)

7. Date of Delivery: FEB 2 5 1999

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

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

Domestic Return Receipt
PS Form 3811, December 1994
102595-98-9-0229

Is your RETURN ADDRESS completed on the reverse side?

3. Article Addressed to:
AZTEC TRUSTEES UTI/M DATED 3-21-85
338 ROAD 3000
JAQUEZ
AZTEC NM 87410

4a. Article Number: 7-2113181172
4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5. Received By: (Print Name)
X Aztec Trustees

6. Signature: (Addresssee or Agent)

7. Date of Delivery: FEB 2 5 1999

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

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

Thank you for using Return Receipt Service.

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318620
4b. Service Type: Registered
5. Received By: (Print Name) CHAD A. RUSSELL
6. Signature: (Addressee or Agent) X Chad A. Russell
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318594
4b. Service Type: Registered
5. Received By: (Print Name)
6. Signature: (Addressee or Agent) X
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318625
4b. Service Type: Registered
5. Received By: (Print Name) WMO HUGGINS, III
6. Signature: (Addressee or Agent) X Wm Higgins
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318595
4b. Service Type: Registered
5. Received By: (Print Name)
6. Signature: (Addressee or Agent) X Robin Hampton
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318592
4b. Service Type: Registered
5. Received By: (Print Name) ROSEMARY WARNER HALL
6. Signature: (Addressee or Agent) X Rosemary Warner
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318596
4b. Service Type: Registered
5. Received By: (Print Name) JAMES V HARRINGTON
6. Signature: (Addressee or Agent) X James Harrington
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318593
4b. Service Type: Registered
5. Received By: (Print Name) FIRST INTERSTATE BANK OF DES MOINES
6. Signature: (Addressee or Agent) X
PS Form 3811, December 1994

1. Print your name and address on the reverse of this form so that we can return this card to you.
2. Complete items 1 and 2 for additional services.
3. Article Addressed to:
4a. Article Number: 7211318597
4b. Service Type: Registered
5. Received By: (Print Name) A R GROVER SAN JUAN ROYALTY
6. Signature: (Addressee or Agent) X
PS Form 3811, December 1994

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318588

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318588

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

9. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

10. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318591

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318591

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 GRAY REVOCABLE LIVING TRUST
 JEAN SUE GRAY AND HENRY N
 CO-TRUSTEES
 P O BOX 4328
 VANCOUVER WA 98662

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 GRAY REVOCABLE LIVING TRUST
 JEAN SUE GRAY AND HENRY N
 CO-TRUSTEES
 P O BOX 4328
 VANCOUVER WA 98662

9. Addressee's Address (Only if requested and fee is paid)
 GRAY REVOCABLE LIVING TRUST
 JEAN SUE GRAY AND HENRY N
 CO-TRUSTEES
 P O BOX 4328
 VANCOUVER WA 98662

10. Addressee's Address (Only if requested and fee is paid)
 GRAY REVOCABLE LIVING TRUST
 JEAN SUE GRAY AND HENRY N
 CO-TRUSTEES
 P O BOX 4328
 VANCOUVER WA 98662

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318590

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318590

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 LANDA M AND DON HARRELL
 P O BOX 443
 FLETCHER OK 73541

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 LANDA M AND DON HARRELL
 P O BOX 443
 FLETCHER OK 73541

9. Addressee's Address (Only if requested and fee is paid)
 LANDA M AND DON HARRELL
 P O BOX 443
 FLETCHER OK 73541

10. Addressee's Address (Only if requested and fee is paid)
 LANDA M AND DON HARRELL
 P O BOX 443
 FLETCHER OK 73541

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318589

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318589

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 ORA R HALL TRUST
 P O BOX 797
 PERRY OK 73077

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 ORA R HALL TRUST
 P O BOX 797
 PERRY OK 73077

9. Addressee's Address (Only if requested and fee is paid)
 ORA R HALL TRUST
 P O BOX 797
 PERRY OK 73077

10. Addressee's Address (Only if requested and fee is paid)
 ORA R HALL TRUST
 P O BOX 797
 PERRY OK 73077

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318588

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318588

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

9. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

10. Addressee's Address (Only if requested and fee is paid)
 JOHN L. GRAY
 TEXAS COMMERCIAL BANK, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049310
 HOUSTON TX 77216-0336

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318586

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318586

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 HAGOOD-NEW MEXICO TRUST
 L STEPHEN HAGOOD TRUSTEE
 P O BOX 1732
 DENVER CO 80202

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 HAGOOD-NEW MEXICO TRUST
 L STEPHEN HAGOOD TRUSTEE
 P O BOX 1732
 DENVER CO 80202

9. Addressee's Address (Only if requested and fee is paid)
 HAGOOD-NEW MEXICO TRUST
 L STEPHEN HAGOOD TRUSTEE
 P O BOX 1732
 DENVER CO 80202

10. Addressee's Address (Only if requested and fee is paid)
 HAGOOD-NEW MEXICO TRUST
 L STEPHEN HAGOOD TRUSTEE
 P O BOX 1732
 DENVER CO 80202

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318585

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318585

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 DAVID H. GRAY
 CHASE BANK OF TEXAS, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049309
 P O BOX 200336
 HOUSTON TX 77216-0336

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 DAVID H. GRAY
 CHASE BANK OF TEXAS, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049309
 P O BOX 200336
 HOUSTON TX 77216-0336

9. Addressee's Address (Only if requested and fee is paid)
 DAVID H. GRAY
 CHASE BANK OF TEXAS, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049309
 P O BOX 200336
 HOUSTON TX 77216-0336

10. Addressee's Address (Only if requested and fee is paid)
 DAVID H. GRAY
 CHASE BANK OF TEXAS, N.A.
 AGENT & ATTORNEY-IN-FACT
 TRUST MINERALS SEC-1049309
 P O BOX 200336
 HOUSTON TX 77216-0336

TURN ADDRESS completed on the reverse side?

1. Signature (Address or Agent)
 PS Form 3811, December 1994

2. Article Number
 721318584

3. Service Type
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

4. Article Number
 721318584

5. Date of Delivery
 FEB 26 1999

6. Addressee's Address (Only if requested and fee is paid)
 HARGO LIMITED PARTNERSHIP
 P O BOX 216
 ROSWELL NM 88202

7. Date of Delivery
 FEB 26 1999

8. Addressee's Address (Only if requested and fee is paid)
 HARGO LIMITED PARTNERSHIP
 P O BOX 216
 ROSWELL NM 88202

9. Addressee's Address (Only if requested and fee is paid)
 HARGO LIMITED PARTNERSHIP
 P O BOX 216
 ROSWELL NM 88202

10. Addressee's Address (Only if requested and fee is paid)
 HARGO LIMITED PARTNERSHIP
 P O BOX 216
 ROSWELL NM 88202

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726293
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): JIMMIE LEE COLLIER, EXECUTRIX - ESTATE OF JAMES A. COLLIER, JR. DECEASED, 1113 SHADY OAK CIRCLE, MCKINNEY TX 75070-0000
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726492
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): MARGUERITE H WILEY, P O BOX 103, PAGOSA SPRINGS CO 81147
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726296
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): MARSHA HENDERSON COLLINS, C/O CLOTILDA POPE, 5480 WISCONSIN AVENUE, SUITE 814, CHEVY CHASE, MD 20815
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726292
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): ELIZABETH W. COLBURN, 1713 F NORTHFIELD SQUARE, NORTHFIELD IL 60063
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726296
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): MARSHA HENDERSON COLLINS, C/O CLOTILDA POPE, 5480 WISCONSIN AVENUE, SUITE 814, CHEVY CHASE, MD 20815
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726295
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): JESSIE A DENNIS, 231 MIDDLEBURY, SAN ANTONIO TX 78217
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726291
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): CBP SAN JUAN LTD PARTNERSHIP, P O BOX 451, ALBUQUERQUE NM 87103-0451
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726295
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): JESSIE A DENNIS, 231 MIDDLEBURY, SAN ANTONIO TX 78217
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726294
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): WYNELLE E CROW, 5043 W BERENDO, ROSWELL NM 86201
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726288
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): DR JAMES B CAYLOR OR - EDITH MARIE CAYLOR, P O BOX 446, HOBBS NM 88240
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726294
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): WYNELLE E CROW, 5043 W BERENDO, ROSWELL NM 86201
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7186726294
4b. Service Type: Registered ☒ Certified ☐ Insured ☐
5. Date of Delivery: 11/13/94
6. Signature: (Addresssee or Agent)
7. Date of Delivery: 11/13/94
8. Addressee's Address (Only if requested and fee is paid): WYNELLE E CROW, 5043 W BERENDO, ROSWELL NM 86201
9. Received By: (Print Name) [Signature]
10. Signature: (Addresssee or Agent) [Signature]
11. PS Form 3811, December 1994
12. Domestic Return Receipt

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7-211318578
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 2-25-99
6. Addressee's Address (Only if requested and fee is paid):
JANE C GORDEN
11330 GREEN BAY DRIVE
HOUSTON TX 77024
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7-211318659
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 2-26-99
6. Addressee's Address (Only if requested and fee is paid):
ARTHUR D LUNDBLADE
C/O JANET ISTAS EXEC
CONCORDIA KS 66901
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7-211318724
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 2-26-99
6. Addressee's Address (Only if requested and fee is paid):
NATHAN D MYER
1006 W RUSSELL AVENUE
CARROLLTON TX 75006-3710
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 7-186726297
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 2-25-99
6. Addressee's Address (Only if requested and fee is paid):
1ST INTERSTATE BANK OF DENVER
-FOR T.D. CUNNINGHAM COMPANY
ATTN: TRUST MINERALS -023
ACCT #115035206
DENVER CO 80217
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-186726493
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 3-1-99
6. Addressee's Address (Only if requested and fee is paid):
MARGARET HWYGOCKI
721 ROBINS ROAD
LANSING MI 48917
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-186726494
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 3-1-99
6. Addressee's Address (Only if requested and fee is paid):
LARRY SIMMONS
2815 MAIN
DURANGO CO 81301
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211318787
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 2-26-99
6. Addressee's Address (Only if requested and fee is paid):
MARION L SWEARINGEN
2828 SE DOWNING ROAD
TOPEKA KS 66605-1930
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
3. Article Addressed to:
4a. Article Number: 2-211318631
4b. Service Type: ☒ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
5. Date of Delivery: 2-25-99
6. Addressee's Address (Only if requested and fee is paid):
MARY DOLL INGRAM
777 N POST OAK ROAD
APT 106
HOUSTON TX 77024-3806
7. Received By (Print Name):
8. Signature (Addressee or Agent):
PS Form 3811, December 1994

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

WINTERGREEN ENERGY CORP
C/O PLAZA SUITE 125
5735 PINELAND DRIVE
DALLAS TX 75231

2180726478

2/24/99

PS Form 3811, December 1994

TURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

REIDER WATSON
7000 WATFORD TRUST
5455 LA SIERRA DRIVE APT #2
DALLAS TX 75231

2180726491

3-1-99

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

WHAM, A PARTNERSHIP
7318 SOUTH YALE, SUITE B
TULSA OK 74136-7000

2180726477

3-1-99

PS Form 3811, December 1994

TURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

WILCO PROPERTIES INC
4809 COLE AVENUE SUITE 107
DALLAS TX 75205

2180726489

2-24-99

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

REBECCA ANN REESE WARD
C/O COASTER PARKWAY
RICHARDSON TX 75080

2180726476

2-17-99

PS Form 3811, December 1994

TURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

WVR ENTERPRISES, INC
NATIONSBANK AGENT
OIL & GAS ACCOUNTING
P.O. BOX 840738
DALLAS TX 75284-0738

2180726490

FEB 24 1999

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

SCOTT E WILSON
4512 BENT TREE TRAIL
MIDLAND TX 79707-1449

2180726475

2/24/99

PS Form 3811, December 1994

TURN ADDRESS completed on the reverse side?

1. Addressee's Address
2. Restricted Delivery
3. Article Addressed to:
4a. Article Number
4b. Service Type
5. Received By (Print Name)
6. Signature (Addressee or Agent)
7. Date of Delivery
8. Addressee's Address (Only if requested and fee is paid)

GLADYS WATFORD TRUST
5455 LA SIERRA DRIVE APT #2
DALLAS TX 75231

2180726491

2-24-99

PS Form 3811, December 1994

Thank you for using Return Receipt Service.

[illegible]

SENDER: 1. Complete items 1 and/or 2 for additional services. 2. Complete items 3, 4a, and 4b. 3. Please address on the reverse of this form as we can return this card to you. 4. Attach the form to the manifest, or on the back if space does not allow.	5. Received By: (Print Name) <i>Chauncey B Watson</i> 6. Signature: (Address or Agency) <i>Chauncey B Watson</i>	also wish to receive the following services (for an extra fee): 1. ☐ Addressee's Address 2. ☐ Restricted Delivery 3. ☐ Insured Mail 4. ☐ Registered Mail 5. ☐ Registered Mail for Merchandise 6. ☐ COD 7. Date of Delivery 8. Addressee's Address (Only if requested and fee is paid)	3a. Article Number: <i>7180720482</i> 4a. Service Type: ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery 8. Addressee's Address (Only if requested and fee is paid)
3. Article Addressed to:	CHAUNCEY B WATSON JR 15363 SOUTH 1 st STREET ROAD DEKALB IL 60115	Thank you for using Return Receipt Service	

SENDER: 1. Print your name and address on the reverse of this form so that we can return this to you. 2. Complete items 3, and/or 2 for additional services. 3. Complete items 3, 4a, and 4b. 4. Attach this form to the front of the mailpiece, or on the back if space does not permit. 5. Write "Return Receipt Requester" on the mailpiece below the single number. 6. 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 3. ☐ Insured Mail 4. ☐ Registered Mail 5. ☐ Return Receipt for Merchandise 6. ☐ COD 7. Date of Delivery	
3. Article Addressed to: THE WISER OIL COMPANY 8115 PRESTON ROAD SUITE 400 DALLAS TX 75225		4a. Service Type 4b. Certified ☒ Insured 4c. Registered ☐ Express Mail 4d. Return Receipt for Merchandise ☐ COD	
5. Received By: (Print Name) [Signature]		6. Signature (Addressee only) [Signature]	
7. Date of Delivery 2-24-93		8. Addressee's Address (Only if requested and fee is paid) 2-24-93	

SENDER: 1. Print your name and address on the reverse of this form so that we can return this to you. 2. Complete items 3, 4a, and 4b. 3. Print your name and address on the reverse of this form so that we can return this to you. 4. Print the name and address on the label below the article number. 5. The Return Receipt will show to whom the article was delivered and the date delivered.	3. Article Addressed to TRUST CORPORATION MONTANA TRUSTEE -FOR BESSIE L WHELAN TRUST P O BOX 2308 GREAT FALLS, MT 59403-2308	4a. Service Number 2186726480	I agree to receive the following services (for an extra fee):
1. ☐ Addressee's Address 2. ☐ Restricted Delivery	4b. Service Type ☒ Registered ☐ Insured ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD	Consult postmaster for fee	
		7. Date of Delivery SEP 10 1980	
		8. Addressee's Address (Print Name and last name) J. M. Bessie	9. Received By: (Print Name) J. M. Bessie

TURN ADDRESS completed on the reverse side?

SENDER:

1. Complete items 1 and 2 for additional services

2. Complete items 3, 4a, and 4b.

3. Complete item 5 and address on the reverse of this form so that we can return this card to you.

4. Attach the form to the front of the mailpiece, or on the back if space does not permit.

5. Attach the Return Receipt Requester on the mailpiece below the article number.

6. Attach the Return Receipt to show to whom the article was delivered and the date.

7. Date of Delivery

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

9. Received By (Print Name)

10. Article Number

11. Service Type

12. Registered

13. Insured

14. Return Receipt for Merchandise

15. Certified

16. Registered

17. Insured

18. Return Receipt for Merchandise

19. Certified

20. Registered

21. Insured

22. Return Receipt for Merchandise

23. Certified

24. Registered

25. Insured

26. Return Receipt for Merchandise

27. Certified

28. Registered

29. Insured

30. Return Receipt for Merchandise

31. Certified

32. Registered

33. Insured

34. Return Receipt for Merchandise

35. Certified

36. Registered

37. Insured

38. Return Receipt for Merchandise

39. Certified

40. Registered

41. Insured

42. Return Receipt for Merchandise

43. Certified

44. Registered

45. Insured

46. Return Receipt for Merchandise

47. Certified

48. Registered

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56. Registered

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202. Return Receipt for Merchandise

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204. Registered

205. Insured

206. Return Receipt for Merchandise

207. Certified

208. Registered

209. Insured

210. Return Receipt for Merchandise

211. Certified

212. Registered

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217. Insured

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358. Return Receipt for Merchandise

359. Certified

360. Registered

361. Insured

362. Return Receipt for Merchandise

363. Certified

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SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. Please print name and address on the reverse of this form so that we can return this card to you. Name _____ Address _____ City _____ State _____ Zip _____ We will "Return Receipt" requested on the mailbox below the article number. Please print item number to which the article was delivered and the date received.	I also wish to receive the following services (for an extra fee). □ Addressee's Address □ Restricted Delivery Consult postmaster for fee 4a. Article Number <u>7-180726488</u> 4b. Service Type ☐ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery <u>2-28-79</u>	8. Addressee's Address (Only if requested and fee is paid) <i>Priscilla H. Watson</i> Signature (Addressee or agent) X
3. Article addressed to:	PRISCILLA H WATSON 6200 BRIAR ROSE HOUSTON TX 77057	PS Form 3811, December 1968 12-695-98-4-1029 Domestic Return Receipt

SENDER: 1. ☐ Complete forms 1, 2 and 3 for additional services 2. ☐ Print your name and address on the reverse of this form so that we can return this to you 3. ☐ Attach this form to the front of the package, or on the back if space does not permit 4. ☐ Write "Return Receipt Requestor" on the outside below the article number 5. ☐ The Return Receipt will show to whom the article was delivered and the date delivered	3. Article Addressed to CAROLYN CLARK WIGGIN 5013 RIDGE ROAD EDINA MN 55436-1013	4a. Article Number 7180726486 4b. Service Type ☐ Registered ☐ Registered Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD	I also wish to receive the following services (for an extra fee): 1. ☐ Addressee's Address 2. ☐ Restricted Delivery Consul postmaster for fee.	7. Date of Delivery 1 1 9 2
5. Received By: (Print Name) 6. Signature (Addressee or Agent) <i>[Signature]</i>	8. Addressee's Address (Only if requested and fee is paid)	9. Domestic Return Receipt 10. PS Form 3811, December 1994	Thank you for using Return Receipt Service.	10/25/95-96-B-0629

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete item 3 and attach to the back of this form so that we can return this card to you. ■ Write 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 multiple, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the envelope below the article number. ■ Write "Return Receipt with Proof of Mailing" on the article work enveloped and the date received.	1. ☐ Addressee's Address 2. ☐ Restricted Delivery 3. ☐ Consol postmaster for fee.	4a. Article Number 726485	4b. Service Type ☒ Registered ☐ Certified ☐ Express Mail ☐ COD	7. Return of Delivery ☐ Return Receipt for Merchandise ☐ COD	Thank you for using Return Receipt Service.
5. Sender's Name and Address (Only if requested)	3. Article Addressed to	JACK WATSON 5TH STREET ROAD 15320 SOUTH 1ST DEKALB IL 60115	DEKALB, IL 60115 FEB 28 1980	5. Recipient's Name (Print Name)	5. Addressee's Address (Only if requested)

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: SAM G WALL, III
6604 OLIVEWOOD DRIVE
ARLINGTON TX 76001-7818

4a. Article Number: 2186726474

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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

5. Received By (Print Name): SAM G WALL, III

6. Signature (Addressee or Agent):

PS Form 3811, December 1994 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: ELIZABETH WATSON WILLIAMS
912 FAIRGROUNDS ROAD SPACE 1
FARMINGTON NM 87401

4a. Article Number: 2186726470

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: L DORIS WILLIAMS TRUST WILLIAM P TRAYLOR
- & JOHN G HEAR, TRUSTEES
BANK OF HOUSTON
P O BOX 6306
HOUSTON TX 77288-6306

4a. Article Number: 2186726473

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: CHARLOTTE E WELLS & KAILANI
BUMPUS, AS JOINT TENANTS
DE RIDDER LA 70634

4a. Article Number: 2186726472

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: MENOT & ASSOCIATES
601 16TH STREET C136
GOLDEN CO 80401

4a. Article Number: 2186726472

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: GREGORY WALL
635 23 1/4 ROAD
GRAND JUNCTION CO 81504

4a. Article Number: 2186726471

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: JOHN A WALL
P O BOX 915
SOCORRO NM 87801

4a. Article Number: 2186726471

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER: Complete items 1 and 2 for additional services. 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: WILLIAMS PRODUCTION COMPANY
ONE WILLIAMS CENTER
P O BOX 3102
TULSA OK 74101

4a. Article Number: 2186726474

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

7. Date of Delivery: 2/26/91

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 10295-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 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 before the postmark.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

GREGORY E. MYER
2520 BELLECREST DRIVE
LAWRENCE KS 66046

4a. Article Number: 7211316718

4b. Service Type: Registered ☒ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

5. Received By: (Print Name) *Dore G. Myer*

6. Signature: (Addressee or Agent) *X Dore G. Myer*

7. Date of Delivery: 3-8-99

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

PS Form 3811, December 1994 10255-98-9-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 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 before the postmark.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

DAVID H. GRAY
TRUST MINERALS SEC. 1049309
P.O. BOX 20036
HOUSTON TX 772160336

4a. Article Number: 7186726468

4b. Service Type: Registered ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

5. Received By: (Print Name)

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

7. Date of Delivery: MAR - 8 1999

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

PS Form 3811, December 1994 10255-98-9-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 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 before the postmark.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

JO ANN DENITO
2036 MUSTANG
LEVELLAND TX 79336

4a. Article Number: 7186726315

4b. Service Type: Registered ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

5. Received By: (Print Name)

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

7. Date of Delivery: MAR 4 1999

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

PS Form 3811, December 1994 10255-98-9-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 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 before the postmark.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

JO ANN DENITO
2036 MUSTANG
LEVELLAND TX 79336

4a. Article Number: 7186726315

4b. Service Type: Registered ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐

5. Received By: (Print Name)

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

7. Date of Delivery: MAR 4 1999

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

PS Form 3811, December 1994 10255-98-9-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

3. Article Addressed to: ERICSON RESOURCES CORP 2198 BLOOMFIELD HIGHWAY FARMINGTON NM 87404		4a. Article Number 7-156672638	
4b. Service Type ☐ Registered ☐ Express Mail ☐ Return Receipt for Merchandise ☐ COD ☐ Insured ☒ Certified		7. Date of Delivery 12/15/94	
5. Received By: (Print Name) J. McAndrew		6. Signature: (Addressee or Agent) J. McAndrew	
8. Addressee's Address (Only if requested and fee is paid) Domestic Return Receipt		1075-95-0229 PS Form 3811, December 1994	

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I also wish to receive the following services (for an extra fee):
☐ Restricted Delivery
☐ Insured
☐ Signature Required
☐ Registered Mail
☐ Return Receipt for Merchandise
☐ COD
☐ Insured
☒ Certified

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Z 186 726 484

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Wayne Smith
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

PS Form 3800, April 1995

Z 211 318 613

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Foris Clark Hight
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

Z 211 318 694

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Charles McDougall
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

Z 186 726 487

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to David Wayne Woodley Th
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

Z 186 726 733

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Valerie Brown
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

Z 186 726 733

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Wayne Smith
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

Z 186 726 733

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Wayne Smith
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

Z 186 726 733

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Wayne Smith
Street & Number
Post Office, State, & ZIP Code
Postage \$
Certified Fee
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 \$
Postmark or Date

PS Form 3800, April 1995

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Virginia New
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

569 9TE TTE Z

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Virginia New
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Carroll Meyer, II
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Peters-Gibbard Trust
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to David Wilken Smith
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to William Schwartz
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to Sperry, C. Inc.
 Street & Number _____
 Post Office, State, & ZIP Code _____

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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to H. S. Stuart
 Street & Number _____
 Post Office, State, & ZIP Code _____

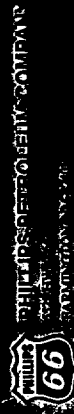
Postage \$ _____
 Certified Fee \$ _____
 Special Delivery Fee \$ _____
 Restricted Delivery Fee \$ _____
 Return Receipt Showing to Whom & Date Delivered \$ _____
 Return Receipt Showing to Whom & Date Delivered \$ _____
 Date & Addressee's Address _____
 TOTAL Postage & Fees \$ _____
 Postmark or Date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

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 Do not use for International Mail (See reverse)

Sent to H. S. Stuart
 Street & Number _____
 Post Office, State, & ZIP Code _____

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



Z 211 318 715

MAIL

CARROLL D MYER, II
485 FLORIDA RD #C12
DURANGO CO 81301

RETURN ADDRESS completed on the reverse side?

SENDER:
■ Complete items 1 and/or 2 for additional services
■ Complete items 3, 4a, and 4b
■ 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 allow to whom the article was delivered and the date delivered

3 Article Addressed to:

4a Article Number: 72138715

4b Service Type:
☐ Registered
☒ Certified
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

5 Received By: (Print Name)

6 Signature: (Addressee or Agent)

7 Date of Delivery

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

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

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

Thank you for using Return Receipt Service.



UNITED STATES POSTAL SERVICE

CERTIFIED

Z 211 318 675

MAIL

JOHN CHARLES MAJOR
2407 CROCKETT STREET
AMARILLO TX 79109

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 CHARLES MAJOR
2407 CROCKETT STREET
AMARILLO TX 79109

4a. Article Number

7211318675

4b. Service Type

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

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?
PS Form 3811, December 1994

102595-98 B-0229 Domestic Return Receipt

Notification
was made
to Trust
OK per Scott



PHILIPS PETROLEUM COMPANY
SHELL
LUBRICANTS

CERTIFIED

Z 186 726 484

MAIL

B WYNNE WOOLLEY JR & DAVID
MARTIN WOOLLEY - CO-TRS OF
THE B WYNNE WOOLLEY JR TRST
UW/O LOTTIE PLUMMER WOOLLEY
DALLAS TX 75225

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:

B WYNNE WOOLLEY JR & DAVID
MARTIN WOOLLEY - CO-TRS OF
THE B WYNNE WOOLLEY JR TRST
UW/O LOTTIE PLUMMER WOOLLEY
DALLAS TX 75225

4a. Article Number

Z 186 726 484

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)

Thank you for using Return Receipt Service.