

MARTIN YATES, III  
1912 - 1985  
FRANK W. YATES  
1936 - 1986



105 SOUTH FOURTH STREET  
ARTESIA, NEW MEXICO 88210-2118  
TELEPHONE (505) 748-1471

S. P. YATES  
CHAIRMAN OF THE BOARD  
JOHN A. YATES  
PRESIDENT  
PEYTON YATES  
EXECUTIVE VICE PRESIDENT  
RANDY G. PATTERSON  
SECRETARY  
DENNIS G. KINSEY  
TREASURER

December 27, 2000

Working Interest Owners  
Addressee List Attached

**Via Certified Mail**

**Re: AFE  
Daisy AFS St #2  
Township 16 South, Range 35 East  
Section 3: 660' FNL & 660' FEL  
Lea County, New Mexico**

Ladies and Gentlemen:

Please find enclosed our AFE proposing the drilling of the captioned well to test the Morrow/Mississippian formation at approximately 13,100'.

The proposed proration unit located in irregular Section 3 is Lots 1 through 8 which forms a non-standard 355.80 acre spacing unit.

We will forward our Joint Operating Agreement for your review as soon as you have indicated your desire to participate in this proposed test.

Please call me at (505) 748-4351 if you have any questions regarding this proposal.

Thank you.

Very truly yours,

**YATES PETROLEUM CORPORATION**

Robert Bullock  
Landman

RB:bn

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Case Nos. 12535/12567/12569 Cons. Exhibit 3

Submitted by:  
Yates Petroleum Corp./Ocean Energy Resources, Inc.  
Hearing Date: January 11, 2001

DAISY AFS ST #2  
ADDRESSEE LIST

Tom R. Cone  
PO Box 778  
Jay, OK 74346

Kenneth G. Cone  
PO Box 11310  
Midland, TX 79702

Kenneth G. Cone, Trustee  
Kenneth G. Cone Children's Trust  
PO Box 11310  
Midland TX 79702

Marilyn Cone, Trustee  
of the D.C. Trust  
PO Drawer 1629  
Lovington, NM 88260

Clifford Cone  
PO Drawer 1629  
Lovington, NM 88260

Clifford Cone, Trustee of the  
Clifford Cone Family Trust U/W/O  
Kathleen Cone  
PO Drawer 1629  
Lovington, NM 88260

Keith Pratt Daniels  
PO Box 190766  
Dallas, TX 75219

Lynda Pratt Rast  
1202 Marlee Lane  
Arlington, TX 76014

Phillip L. White  
The Blanco Company  
PO Box 2168  
Santa FE, NM 87504-2168

The Long Trusts  
PO Box 3096  
Kilgore, TX 75663

LWJ Partnership  
PO Box 64244  
Lubbock, TX 79424

Ocean Energy Resources, Inc.  
1001 Fannin, Suite 1600  
Houston, TX 77002-6794

David H. Arrington Oil & Gas, Inc.  
214 West Texas, Suite 400  
Midland, TX 79701

Yates Petroleum Corporation  
Yates Drilling Company  
Abo Petroleum Corporation  
Myco Industries, Inc.  
105 South Fourth Street  
Artesia, NM 88210

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Phillip L. White  
The Blanco Company  
PO Box 2168  
Santa FE, NM 87504-2168

2. Article Number (Copy from service label)

7000 1670 0007 6696 2986

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

*Phil White*  
☒ Agent  
☒ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes  
☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David H. Arrington Oil & Gas, Inc.  
214 West Texas, Suite 400  
Midland, TX 79701

2. Article Number (Copy from service label)

7000 1670 0007 6696 2979

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

*Trace Courney*  
☐ Agent  
☒ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes  
☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LWJ Partnership  
PO Box 64244  
Lubbock, TX 79424

2. Article Number (Copy from service label)

7000 1670 0007 6696 2924

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

*Tamara Young*  
☒ Agent  
☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes  
☒ No

3. Service Type

☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

88210+2122



UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

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

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To **Phillip L. White**  
**The Blanco Company**  
Street, Apt. No. **PO Box 2168**  
City, State, ZIP+4 **Santa FE, NM 87504-2168**

PS Form 3800, May 2000

See Reverse for Instructions

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

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To **David H. Arrington Oil & Gas, Inc.**  
**214 West Texas, Suite 400**  
Street, Apt. No. **PO Box 4**  
City, State, ZIP+4 **Midland, TX 79701**

PS Form 3800, May 2000

See Reverse for Instructions

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

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To **LWJ Partnership**  
**PO Box 64244**  
Street, Apt. No. **PO Box 64244**  
City, State, ZIP+4 **Lubbock, TX 79424**

PS Form 3800, May 2000

See Reverse for Instructions

67

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kenneth G. Cone  
PO Box 11310  
Midland, TX 79702

2. Article Number (Copy from service label)

7000 1670 0007 6696 2894

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

SHAPIRA

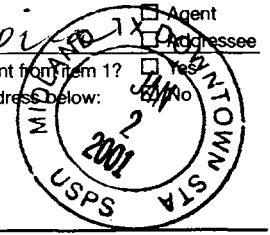
C. Signature

X K Shapira

☐ Agent  
☒ Addressee

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:



3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kenneth G. Cone, Trustee  
Kenneth G. Cone Children's Trust  
PO Box 11310  
Midland TX 79702

2. Article Number (Copy from service label)

7000 1670 0007 6696 2887

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

SHAPIRA

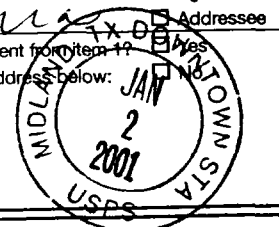
C. Signature

X K Shapira

☐ Agent  
☒ Addressee

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:



3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

The Long Trusts  
PO Box 3096  
Kilgore, TX 75663

2. Article Number (Copy from service label)

7000 1670 0007 6696 2962

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

ELISABETH STOUT 1/3/01

C. Signature

X Elisabeth Stout

☐ Agent  
☒ Addressee

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

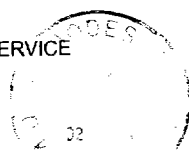
3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE



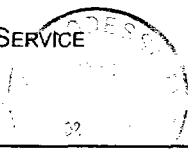
First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK  
YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210



UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK  
YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210



UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK  
YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

88210=2124



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

7000 1670 0007 6696 2894

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
<b>Total Postage &amp; Fees</b>	\$	
<b>Sent To</b> Kenneth G. Cone PO Box 11310 Street, Apt. No., or PO Box No. Midland, TX 79702 City, State, ZIP+4 PS Form 3800, May 2000 See Reverse for Instructions		

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

7000 1670 0007 6696 2887

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
<b>Total Postage &amp; Fees</b>	\$	
<b>Sent To</b> Kenneth G. Cone, Trustee Kenneth G. Cone Children's Trust PO Box 11310 Street, Apt. No., or PO Box No. Midland TX 79702 City, State, ZIP+4 PS Form 3800, May 2000 See Reverse for Instructions		

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

7000 1670 0007 6696 2962

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
<b>Total Postage &amp; Fees</b>	\$	
<b>Sent To</b> The Long Trusts PO Box 3096 Street, Apt. No., or PO Box No. Kilgore, TX 75663 City, State, ZIP+4 PS Form 3800, May 2000 See Reverse for Instructions		



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clifford Cone  
PO Drawer 1629  
Lovington, NM 88260

2. Article Number (Copy from service label)

7000 1670 0007 6696 2900

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-C

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X *Clifford Cone*☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marilyn Cone, Trustee  
of the D.C. Trust  
PO Drawer 1629  
Lovington, NM 88260

2. Article Number (Copy from service label)

7000 1670 0007 6696 2948

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X *Clifford Cone*☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Clifford Cone, Trustee of the  
Clifford Cone Family Trust U/W/O  
Kathleen Cone  
PO Drawer 1629  
Lovington, NM 88260

2. Article Number (Copy from service label)

7000 1670 0007 6696 2870

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X *Clifford Cone*☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

UNITED STATES POSTAL SERVICE



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

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

7000 1670 0007 6696 2900

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	\$

Postmark  
Here

Sent To **Clifford Cone**  
Street, Apt. No., or PO Box No. **P.O. Drawer 1629**  
City, State, ZIP+4 **Lovington, NM 88260**

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

7000 1670 0007 6696 2948

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	\$

Postmark  
Here

Sent To **Marilyn Cone, Trustee**  
Street, Apt. No., or PO Box No. **P.O. Drawer 1629**  
City, State, ZIP+4 **Lovington, NM 88260**

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

7000 1670 0007 6696 2870

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	\$

Postmark  
Here

Sent To **Clifford Cone, Trustee of the**  
**Clifford Cone Family Trust U/W/O**  
Street, Apt. No., or PO Box No. **Kathleen Cone**  
**PO Drawer 1629**  
City, State, ZIP+4 **Lovington, NM 88260**

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tom R. Cone  
PO Box 778  
Jay, OK 74346

2. Article Number (Copy from service label)

7000 1670 0007 6696 2931

PS Form 3811, July 1999

## COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

Tom Cone

B. Date of Delivery

C. Signature

X Tom Cone

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

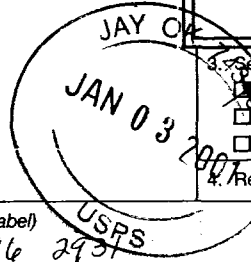
If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

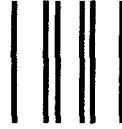
☐ Yes

Waiting AFS #2

Domestic Return Receipt

102595-00-M-0952

UNITED STATES POSTAL SERVICE



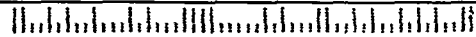
First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

ROB BULLOCK

YATES PETROLEUM CORP.  
105 SOUTH 4th STREET  
ARTESIA, NEW MEXICO 88210

88210+2122



115

7000 1670 0007 6696 2931

U.S. Postal Service CERTIFIED MAIL RECEIPT <i>(Domestic Mail Only; No Insurance Coverage Provided)</i>								
Postage	\$	Postmark Here						
Certified Fee								
Return Receipt Fee (Endorsement Required)								
Restricted Delivery Fee (Endorsement Required)								
Total Postage & Fees	\$							
<table border="1"><tr><td>Sent To</td><td>Tom R. Cone</td></tr><tr><td>Street, Apt. No., or P.O. Box No.</td><td>P.O. Box 778</td></tr><tr><td>City, State, ZIP+4</td><td>Jay, OK 74346</td></tr></table>			Sent To	Tom R. Cone	Street, Apt. No., or P.O. Box No.	P.O. Box 778	City, State, ZIP+4	Jay, OK 74346
Sent To	Tom R. Cone							
Street, Apt. No., or P.O. Box No.	P.O. Box 778							
City, State, ZIP+4	Jay, OK 74346							
PS Form 3800, May 2000 <span style="float: right;">See Reverse for Instructions</span>								

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

7000 1670 0007 6696 2863

Postage	\$	DAISY AFS ST #2 ADDRESSEE LIST Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To Ocean Energy Resources, Inc.  
1001 Fannin, Suite 1600  
Houston, TX 77002-6794  
 Street, Apt. No., or PO Box No.  
City, State, ZIP+4

PS Form 3800, May 2000 See Reverse for Instructions

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

7000 1670 0007 6696 2955

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To Keith Pratt Daniels  
PO Box 190766  
Dallas, TX 75219  
 Street, Apt. No., or PO Box No.  
City, State, ZIP+4

PS Form 3800, May 2000 See Reverse for Instructions

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

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Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To Lynda Pratt Rast  
1202 Marlee Lane  
Arlington, TX 76014  
 Street, Apt. No., or PO Box No.  
City, State, ZIP+4

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