

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

**IN THE MATTER OF THE APPLICATION OF SAGA PETROLEUM, L.L.C.  
STATUTORY UNITIZATION, LEA COUNTY, NEW MEXICO.**

**IN THE MATTER OF THE APPLICATION OF SAGA PETROLEUM, L.L.C.  
FOR APPROVAL OF A WATERFLOOD PROJECT FOR ITS  
CROSSROADS SILURO-DEVONIAN UNIT AREA AND QUALIFICATION  
OF SAID PROJECT FOR THE RECOVERED OIL TAX RATE  
PURSUANT TO THE ENHANCED OIL RECOVERY ACT,  
LEA COUNTY, NEW MEXICO.**

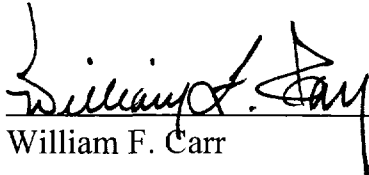
**CASE NOS. 12417 & 12418**

**AFFIDAVIT**

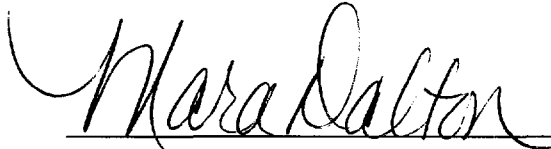
STATE OF NEW MEXICO       )  
  ) ss.  
COUNTY OF SANTA FE       )

William F. Carr, attorney in fact and authorized representative of Saga Petroleum, L.L.C., the applicant herein, being first duly sworn, upon oath, states that notice has been given to all interested parties entitled to receive notice of this application under Oil Conservation Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached hereto.

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Case No. 12417 & 12418       Exhibit No. 7  
Submitted by:  
Saga Petroleum, L.L.C.  
Hearing Date: September 7, 2000

  
William F. Carr

SUBSCRIBED AND SWORN to before this 6<sup>th</sup> day of September, 2000 by William F. Carr.

  
Mara Dalton, Notary Public



## EXHIBIT A

Susie L. Wadley - First Trust  
Ellione M. Sinclair - Trustee  
Northern Trust Bank #23072050  
P.O. Box 226270  
Dallas, TX 75222-6270

Forcenergy, Inc.  
Forcenery Center - Susan Cook  
3838 N. Causeway Blvd., #2300  
Metairie, LA 70002

Floos Inc.  
P.O. Box 5970  
Hobbs, NM 88241-5970

William Marsh Rice University  
447 Allen Center, MS-91  
6100 Main Street  
Houston, TX 77005-1892

Candace G. Jacobson  
Box 2981  
Ruidoso, NM 883458-2981

Thomas J. Good, III  
P.O. Box 130  
Nogal, NM 88341

Price and CIA, Inc.  
Dixie Term Building  
49 E. 4<sup>th</sup> Street, Suite 216  
Cincinnati, OH 45202-3854

Gerald D. Mills  
14 E. Hawthorne Drive  
Asheville, NC 28802

Yuma Exploration & Production  
1177 West Loop South, Suite 1825  
Houston, TX 77027

Myrl Sawyer Good  
2707 North Coronado Road  
Roswell, NM 88201-3464

Beja Embry Poky  
2005 Valley View Drive  
Woodland Park, CO 80863

Perry & Patricia Shaw Trust  
23683 Elmwood Drive  
Porter, TX 77365-5101

Marius Jensen Nygaard, Jr.  
155 W. 68<sup>th</sup> Street  
New York, NY 10023-5808

Sandra Good Ramey Trust  
Myrl Good Trustee  
2707 North Coronado Drive  
Roswell, NM 88201-3464

Prince Minerals, Ltd.  
#301 LB 25  
7001 Preston Road  
Dallas, TX 75205

Allan Capital Corporation  
825 Lenton Avenue  
Baltimore, MD 21212-3238

H. Wayne Hoover  
2122 40<sup>th</sup> Avenue  
Greeley, CO 80634

Mystique Resources Company  
1975 E. Otero Lane  
Littleton, CO 80122-3248

Edward J. Names  
1738 W. Chokecherry Drive  
Louisville, CO 80027

C.L. Nordstrom  
1735 Clark Street  
Aurora, CO 80011

Bruce M. Patterson d/b/a  
Patterson Group  
P.O. Box 620457  
Littleton, CO 70162-0457

Yellow Queen Uranium Company  
1647 Court Place, Suite 326  
Denver, CO 80202

C. Thomas Houseman  
39 Crystal Lane  
Sandia Park, NM 87047

Prince Minerals, LTD  
#301 LB 35  
7001 Preston Road  
Dallas, TX 75205

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

MICHAEL B. CAMPBELL  
WILLIAM F. CARR  
BRADFORD C. BERGE  
MARK F. SHERIDAN  
MICHAEL H. FELDEWERT  
ANTHONY F. MEDEIROS

JACK M. CAMPBELL  
1916-1999

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

June 8, 2000

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

TO ALL AFFECTED INTEREST OWNERS IN THE CROSSROADS SILURO-DEVONIAN UNIT AREA.

***Re: New Mexico Oil Conservation Division Case No. 12417: Application of Saga Petroleum, L.L.C. for statutory unitization, Lea County, New Mexico.***

***New Mexico Oil Conservation Division Case No. 12418: Application of Saga Petroleum, L.L.C. for approval of a waterflood project for its Crossroads Siluro-Devonian Unit Area and qualification of said project for the recovered oil tax rate pursuant to the Enhanced Oil Recovery Act, Lea County, New Mexico.***

Ladies and Gentlemen:

This letter is to advise you that Saga Petroleum, L.L.C. has filed an application with the New Mexico Oil Conservation Division seeking an order statutorily unitizing for the purpose of establishing a secondary recovery project all mineral interests in the Devonian formation, Crossroads Siluro-Devonian Pool underlying 800 acres, more or less, of fee lands located in the N/2, SE/4 of Section Sections 27 and the E/2 of Section 34, Township 9 South, Range 36 East, NMPM, Lea County, New Mexico. Said unit is to be designated the Crossroads Siluro-Devonian Unit. Among the matters to be considered at the hearing will be the necessity of unit operations; the designation of a unit operator; the determination of the horizontal and vertical limits of the unit area; the determination of the fair, reasonable and equitable allocation of production and costs of production, including capital investment, to each of the various tracts in the unit area; the determination of credits and charges to be made among the various owners in the unit area for their investments in wells and equipment; and such other matters as may be necessary and appropriate for carrying on efficient unit operations; including, but not limited to, unit voting procedures, selection, removal or

June 8, 2000

Page 2

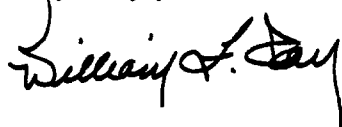
substitution of unit operator, and time of commencement and termination of unit operations. Applicant also requests that any such order issued in this case include a provision for carrying and nonconsenting working interest owners within the unit area upon such terms and conditions to be determined by the Division as just and reasonable.

Saga Petroleum, L.L.C. has also filed an application seeking authority to implement secondary recovery operations in this unit by means of waterflooding, a copy of this application with attached Form C-108 is enclosed for your information.

These applications have been set for hearing before a Division Examiner on June 29, 2000 at the Oil Conservation Division hearing room, located at 2040 South Pacheco Street, Santa Fe, NM 87501. You are not required to attend this hearing but, as the owner of an interest that may be affected by these applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging these matters at a later date.

Parties appearing in cases have been requested by the Division (Memorandum 2-90) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing Statements should be filed no later than 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,

A handwritten signature in black ink, appearing to read "William F. Carr". The signature is fluid and cursive, with a long horizontal stroke at the end.

William F. Carr

Attorney for Saga Petroleum, L.L.C..

WFC/md

Enclosures

cc: Charles Farmer  
Saga Petroleum, L.L.C.

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

Article Sent To:

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

William Marsh Rice University  
447 Allen Center, MS-91  
6100 Main Street  
Houston, TX 77005-1892

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

William Marsh Rice University  
447 Allen Center, MS-91  
6100 Main Street  
Houston, TX 77005-1892

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) D. Greene B. Date of Delivery 6-12-00  
C. Signature X D. Greene ☒ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9261

PS Form 3811, July 1999

Domestic Return Receipt

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U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
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Article Sent To:

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Yellow Queen Uranium Compa  
1647 Court Place, Suite 326  
Denver, CO 80202

**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:

Yellow Queen Uranium Company  
1647 Court Place, Suite 326  
Denver, CO 80202

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery 6-14-00  
C. Signature X [Signature] ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9209

PS Form 3811, July 1999

Domestic Return Receipt

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U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
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Article Sent To:

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Yuma Exploration & Production  
1177 West Loop South, Suite 1825  
Houston, TX 77027

**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:

Yuma Exploration & Production  
1177 West Loop South, Suite 1825  
Houston, TX 77027

A. Received by (Please Print Clearly) B. Date of Delivery 6/12/00  
C. Signature X [Signature] ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9094

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7099 3220 0005 9419 9155

U.S. Postal Service  
CERTIFIED MAIL RECEIPT  
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Article Sent To:

SENDER: C

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.  
FOLD AT DOTTED LINE

ON DELIVERY

Postage

\$ 1.43

Certified Fee

1.40

Return Receipt Fee  
(Endorsement Required)

1.25

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees

\$ 4.08

Sandra Good Ramey Trust  
Myrl Good Trustee  
2707 North Coronado Drive  
Roswell, NM 88201-3464

- 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:

Sandra Good Ramey Trust  
Myrl Good Trustee  
2707 North Coronado Drive  
Roswell, NM 88201-3464

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

C. Signature

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

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3220 0005 9419 9155

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

7099 3220 0005 9419 9278

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

Article Sent To:

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Postage

\$ 1.43

Certified Fee

1.40

Return Receipt Fee  
(Endorsement Required)

1.25

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees

\$ 4.08

Susie L. Wadley - First Trust  
Ellione M. Sinclair - Trustee  
Northern Trust Bank #23072050  
P.O. Box 226270  
Dallas, TX 75222-6270

- 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:

Susie L. Wadley - First Trust  
Ellione M. Sinclair - Trustee  
Northern Trust Bank #23072050  
P.O. Box 226270  
Dallas, TX 75222-6270

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

C. Signature

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

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3220 0005 9419 9278

PS Form 3811, July 1999

Domestic

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.  
FOLD AT DOTTED LINE

7099 3220 0005 9419 9100

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

Article Sent To:

SENDER: COMPLETE THIS SECTION

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.  
FOLD AT DOTTED LINE

ON DELIVERY

Postage

\$ 1.43

Certified Fee

1.40

Return Receipt Fee  
(Endorsement Required)

1.25

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees

\$ 4.08

Thomas J. Good, III  
P.O. Box 130  
Nogal, NM 88341

- 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:

Thomas J. Good, III  
P.O. Box 130  
Nogal, NM 88341

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

C. Signature

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

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3220 0005 9419 9100

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENDER: COMPL

PLACE STICKER AT TOP OF ENVELOPE  
 TO THE RIGHT OF RETURN ADDRESS

DELIVERY

Postage \$ 1.43  
 Certified Fee 1.40  
 Return Receipt Fee (Endorsement Required) 1.25  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ 4.08

Price and CIA, Inc.  
 Dixie Term Building  
 49 E. 4<sup>th</sup> Street, Suite 216  
 Cincinnati, OH 45202-3854

- 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:

Price and CIA, Inc.  
 Dixie Term Building  
 49 E. 4<sup>th</sup> Street, Suite 216  
 Cincinnati, OH 45202-3854

A. Received by (Please Print Clearly)  
 B. Date of Delivery 6/12/00  
 C. Signature  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3220 0005 9419 9254

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENDER: CO

PLACE STICKER AT TOP OF ENVELOPE  
 TO THE RIGHT OF RETURN ADDRESS

ON DELIVERY

Postage \$ 1.43  
 Certified Fee 1.40  
 Return Receipt Fee (Endorsement Required) 1.25  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ 4.08

Prince Minerals, Ltd.  
 #301 LB 25  
 7001 Preston Road  
 Dallas, TX 75205

- 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:

Prince Minerals, Ltd.  
 #301 LB 25  
 7001 Preston Road  
 Dallas, TX 75205

A. Received by (Please Print Clearly)  
 B. Date of Delivery 6-12  
 C. Signature  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3220 0005 9419 9070

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENDER: COMPLETE TH

PLACE STICKER AT TOP OF ENVELOPE  
 TO THE RIGHT OF RETURN ADDRESS

RY

Postage \$ 1.43  
 Certified Fee 1.40  
 Return Receipt Fee (Endorsement Required) 1.25  
 Restricted Delivery Fee (Endorsement Required)  
 Total Postage & Fees \$ 4.08

Prince Minerals, LTD  
 #301 LB 35  
 7001 Preston Road  
 Dallas, TX 75205

- 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:

Prince Minerals, LTD  
 #301 LB 35  
 7001 Preston Road  
 Dallas, TX 75205

A. Received by (Please Print Clearly)  
 B. Date of Delivery 6-12  
 C. Signature  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

7099 3220 0005 9419 8226

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

Postage \$ 1.43  
 Certified Fee 1.40  
 Return Receipt Fee (Endorsement Required) 1.25  
 Restricted Delivery Fee (Endorsement Required) 4.08  
 Total Postage & Fees \$ 4.08  
 Myrl Sawyer Good  
 2707 North Coronado Road  
 Roswell, NM 88201-3464

- 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:

Myrl Sawyer Good  
 2707 North Coronado Road  
 Roswell, NM 88201-3464

A. Received by (Please Print Clearly) Gloria Hosta B. Date of Delivery 6-13-00  
 C. Signature [Signature] ☒ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9247

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

Postage \$ 1.43  
 Certified Fee 1.40  
 Return Receipt Fee (Endorsement Required) 1.25  
 Restricted Delivery Fee (Endorsement Required) 4.08  
 Total Postage & Fees \$ 4.08  
 Mystique Resources Company  
 1975 E. Otero Lane  
 Littleton, CO 80122-3248

- 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:

Mystique Resources Company  
 1975 E. Otero Lane  
 Littleton, CO 80122-3248

A. Received by (Please Print Clearly) [Signature] B. Date of Delivery [Signature]  
 C. Signature [Signature] ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9063

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

**SENDER: C**

**COMPLETE THIS SECTION ON DELIVERY**

Postage \$ 1.43  
 Certified Fee 1.40  
 Return Receipt Fee (Endorsement Required) 1.25  
 Restricted Delivery Fee (Endorsement Required) 4.08  
 Total Postage & Fees \$ 4.08  
 Perry & Patricia Shaw Trust  
 23683 Elmwood Drive  
 Porter, TX 77365-5101

- 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:

Perry & Patricia Shaw Trust  
 23683 Elmwood Drive  
 Porter, TX 77365-5101

A. Received by (Please Print Clearly) Patricia Shaw B. Date of Delivery 6-13  
 C. Signature [Signature] ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9087

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Gerald D. Mills  
14 E. Hawthorne Drive  
Asheville, NC 28802

WFC 334

SENDER: CC

- 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:

Gerald D. Mills  
14 E. Hawthorne Drive  
Asheville, NC 28802

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS.

ON DELIVERY

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

C. Signature

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

7099 3220 0005 9419 9179

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

Article Sent To:

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

H. Wayne Hoover  
2122 40<sup>th</sup> Avenue  
Greeley, CO 80634

WFC 334

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:

H. Wayne Hoover  
2122 40<sup>th</sup> Avenue  
Greeley, CO 80634

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

7099 3220 0005 9419 9148

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

Article Sent To:

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Marius Jensen Nygaard, Jr.  
155 W. 68<sup>th</sup> Street  
New York, NY 10023-5808

WFC 2211

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:

Marius Jensen Nygaard, Jr.  
155 W. 68<sup>th</sup> Street  
New York, NY 10023-5808

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

7099 3220 0005 9419 9230

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

Article Sent To:

SENDER

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.

SECTION ON DELIVERY

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required) \$4.08  
Total Postage & Fees \$4.08  
Edward J. Names  
1738 W. Chokecherry Drive  
Louisville, CO 80027

- 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:

Edward J. Names  
1738 W. Chokecherry Drive  
Louisville, CO 80027

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

C. Signature

Melissa 6/13/12  
☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9216

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENDER: CC

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.

SECTION ON DELIVERY

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required) \$4.08  
Total Postage & Fees \$4.08  
Floos Inc.  
P.O. Box 5970  
Hobbs, NM 88241-5970

- 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:

Floos Inc.  
P.O. Box 5970  
Hobbs, NM 88241-5970

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

C. Signature

James 6.14.06  
☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9117

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENE

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS.

SECTION ON DELIVERY

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required) \$4.08  
Total Postage & Fees \$4.08  
Forcenergy, Inc.  
Forcenergy Center - Susan Cook  
3838 N. Causeway Blvd., #2300  
Metairie, LA 70002

- 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:

Forcenergy, Inc.  
Forcenergy Center - Susan Cook  
3838 N. Causeway Blvd., #2300  
Metairie, LA 70002

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

C. Signature

Verret JUN 15 2008  
☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9193

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To: \_\_\_\_\_

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required) \_\_\_\_\_  
Total Postage & Fees \$ 4.08

C.L. Nordstrom  
1735 Clark Street  
Aurora, CO 80011

SENDER: CO. \_\_\_\_\_

1. Article Addressed to:  
C.L. Nordstrom  
1735 Clark Street  
Aurora, CO 80011

2. Article Number (Copy from service label) 7099 3220 0005 9419 9131

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

ON DELIVERY

A. Received by (Please Print Clearly) Martin Nordstrom B. Date of Delivery 6/12/00  
C. Signature [Signature] ☐ 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

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

Article Sent To: \_\_\_\_\_

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required) \_\_\_\_\_  
Total Postage & Fees \$ 4.08

C. Thomas Houseman  
39 Crystal Lane  
Sandia Park, NM 87047

SENDER: CO. \_\_\_\_\_

1. Article Addressed to:  
C. Thomas Houseman  
39 Crystal Lane  
Sandia Park, NM 87047

2. Article Number (Copy from service label) 7099 3220 0005 9419 9124

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

ON DELIVERY

A. Received by (Please Print Clearly) C.T. Houseman B. Date of Delivery 6/10/00  
C. Signature [Signature] ☐ 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

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

Article Sent To: \_\_\_\_\_

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required) \_\_\_\_\_  
Total Postage & Fees \$ 4.08

Candace G. Jacobson  
Box 2981  
Ruidoso, NM 883458-2981

SENDER: \_\_\_\_\_

1. Article Addressed to:  
Candace G. Jacobson  
Box 2981  
Ruidoso, NM 883458-2981

2. Article Number (Copy from service label) 7099 3220 0005 9419 9186

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

SECTION ON DELIVERY

A. Received by (Please Print Clearly) M. TORMSEN B. Date of Delivery 6/12/00  
C. Signature [Signature] ☐ 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

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

Article Sent To:

SENDER: COMPLETE THIS SECTION  
PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS

OPTION ON DELIVERY

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Allan Capital Corporation  
825 Lenton Avenue  
Baltimore, MD 21212-3238

- 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:

Allan Capital Corporation  
825 Lenton Avenue  
Baltimore, MD 21212-3238

A. Received by (Please Print Clearly) B. Date of Delivery  
6/12

C. Signature  
X J. A. Allen ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9223

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENDER

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS

OPTION ON DELIVERY

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Beja Embry Poky  
2005 Valley View Drive  
Woodland Park, CO 80863

- 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:

Beja Embry Poky  
2005 Valley View Drive  
Woodland Park, CO 80863

A. Received by (Please Print Clearly) B. Date of Delivery  
BEJA E. FOKY 6-12-00

C. Signature  
X Beja E. Foky ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 9162

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

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

Article Sent To:

SENDER: COMPLETE THIS SECTION

PLACE STICKER AT TOP OF ENVELOPE  
TO THE RIGHT OF RETURN ADDRESS

OPTION ON DELIVERY

Postage \$ 1.43  
Certified Fee 1.40  
Return Receipt Fee (Endorsement Required) 1.25  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees \$ 4.08

Bruce M. Patterson d/b/a  
Patterson Group  
P.O. Box 620457  
Littleton, CO 70162-0457

- 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:

Bruce M. Patterson d/b/a  
Patterson Group  
P.O. Box 620457  
Littleton, CO 70162-0457

A. Received by (Please Print Clearly) B. Date of Delivery  
Julie Patterson 6-16-00

C. Signature  
X Julie Patterson ☐ 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

2. Article Number (Copy from service label)

7099 3220 0005 9419 8219

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789