

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OMB No 1004-0137
Expires: March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE – Other instructions on page 2		7. If Unit of CA/Agreement, Name and/or No
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	<div>RECEIVED OCT 19 2009 NMOC-ARTESIA Phone No (include area code) (405)-552-7802</div>	8 Well Name and No. Burton Flat Deep Unit 3
2. Name of Operator Devon Energy Production Co., LP		9 API Well No. 30-015-20799
3a. Address 20 North Broadway OKC, OK 73102		10. Field and Pool or Exploratory Area Burton Flat; Morrow & Strawn (see below)
4. Location of Well (Footage, Sec, T., R., M, or Survey Description) 700' FSL & 1980' FWL Sec 3-T21S-R27E		11. Country or Parish, State Eddy County, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Downhole
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Commingle - REVISED
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection)

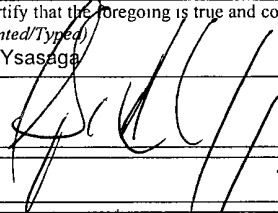
Devon Energy Production Company, L.P. is applying with the New Mexico Oil Conservation Division to downhole commingle the Burton Flat; Morrow (Pro Gas): Pool code # 73280 (11,006' – 11,438') with the Burton Flat; Strawn (Prorated Gas): Pool code #73360 (10,208'-10,250'). The commingling will not reduce the value of the total production. Ownership in the zones is not uniform; notification to all working, royalty and overriding royalty interest owners has been done via certified mail. The proposed allocations are as follows:

Burton Flat; Morrow (Pro Gas): Pool code # 73280 Gas 80% Oil 0%
Burton Flat; Strawn (Prorated Gas): Pool code #73360 Gas 20% Oil 100%

Please see Devon's written response to address BLM concerns.

Current and proposed wellbore schematics are attached along with the allocation methods and supporting data. See also list of notification to all working, royalty and overriding royalty interest owners along with tracking numbers and copy of green certified mail receipts. No parties have objected to the proposed DHC of the Morrow and Strawn zones.

Production for each zone and production charts supplied in initial package. Requested production (performance plots) from each formation for the Unit Plan of Development submitted with the Burton Flat Deep Unit POD.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Stephanie A. Ysasaga	Title Sr. Staff Engineering Technician
Signature 	Date 07/10/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by	Title	Date
Conditions of approval, if any, are attached Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

Title 18 U.S.C Section 1001 and Title 43 U.S.C Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

*Rejected due to
different royalty rates,
see diagram
10/5/09*

JWR

In response to your rejection of Devon Energy Production Company's (Devon) request to down hole commingle production from the subject well, the following is submitted for your consideration.

In order to correctly allocate production between the Morrow and Strawn, Devon plans on monitoring the oil and gas production on a daily basis until the production rates stabilize. If actual production rates differ from expected, a new allocation will be submitted in order to correctly allocate production between the two Participating Areas.

The focus will be on gas production since all the oil is expected to come from the Strawn. This assumption is based on the fact that the Morrow has only made 246 bbls oil since coming on production in 1993 and last made oil in May 2007. Devon recently swabbed the Morrow tubing and only recovered water with no show of oil. The Strawn has produced 3,383 bbls of oil and consistently made oil until gas rate decreased below the level required to lift fluid.

Since gas velocity will be increased by producing both intervals up one string of tubing, a gain in oil production should be expected. This incremental production will be allocated to the Strawn.

If gas rate increases significantly above the combined rate of 65 mcf/d it could be attributed to either interval. If this occurs, a production log will be run to determine the proper allocation to the two Participating Areas. The log will be pulled in the Morrow tubing in order to observe gas coming from the Morrow versus gas from both intervals above the holes in the tubing.

All working interest and royalty owners have approved the proposed downhole commingling along with the State of New Mexico Commissioner of Public Lands and the State of New Mexico Oil Conservation Division.

The production from each formation in the two Participating Areas will be submitted in the 2009 BFDU Plan of Development.

Based on the Devon's proposed monitoring plan and the positive response from all other affected parties, Devon respectfully requests you reconsider your rejection of the proposal.

Sincerely,

Greg McGowen

Devon Energy Production Company, LP
Western Division Operations
Permian District, PB New Mexico
405-228-8965
gregory.mcgowen@devn.com

**Burton Flat Deep Unit 3
30-015-20799
Devon Energy Production Co., LP
June 12, 2009
Requirements**

Current proposal is rejected.

Operator to submit plans for monitoring changes in the allocation for the two zones proposed for downhole commingling.

Operator is required to show the production from each formation on the performance plots for the Unit Plan of Development not a combined plot as there are two Participating Areas involved.

WWI 061209

5/12/09

Swabbed Morrow all water 326618

May 2007 - last oil prod

RECEIVED

JUN 17 2009

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
OMB No. 1004-0127
Expires: March 31, 2007

WESTERN LAND

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Devon Energy Production Co., LP

3a. Address

20 North Broadway
OKC, OK 73102

3b. Phone No. (include area code)

(405)-552-7802

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

700' FSL & 1980' FWL
Sec 3-T21S-R27E

5. Lease Serial No.

NM 0560289

6. If Indian, Allottee or Tribe Name

7. If Unit of CA/Agreement, Name and/or No

8. Well Name and No.

Burton Flat Deep Unit 3

9. API Well No.

30-015-20799

10. Field and Pool or Exploratory Area

Burton Flat; Morrow & Strawn (see below)

11. Country or Parish, State

Eddy County, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Downhole</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Commingle</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Devon Energy Production Company, L.P. is applying with the New Mexico Oil Conservation Division to downhole commingle the Burton Flat; Morrow (Pro Gas): Pool code # 73280 (11,006' - 11,438') with the Burton Flat; Strawn (Prorated Gas): Pool code #73360 (10,208'-10,250'). The commingling will not reduce the value of the total production. Ownership in the zones is not uniform; notification to all working, royalty and overriding royalty interest owners has been done via certified mail. The proposed allocations are as follows:

Burton Flat; Morrow (Pro Gas): Pool code # 73280 Gas 80% Oil 0%
Burton Flat; Strawn (Prorated Gas): Pool code #73360 Gas 20% Oil 100%

Current and proposed wellbore schematics are attached along with the allocation methods and supporting data.

Rejected - see attached.

Wm Ingram 6/12/09

only one attachment

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

Stephanie A. Ysasaga

Title Sr. Staff Engineering Technician

Signature

Date 05/05/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)



New Mexico Energy, Minerals and Natural Resources Department

Bill Richardson
Governor

Joanna Prukop
Cabinet Secretary

Mark Fesmire
Division Director
Oil Conservation Division



Administrative Order DHC-4191

Order Date: 6/18/2009

Application Reference Number: pKAA0912848129

DEVON ENERGY PRODUCTION COMPANY, LP
20 N Broadway,
Oklahoma City, OK 73102

Attention: Stephanie A. Ysasaga

BURTON FLAT DEEP UNIT Well No. 003
API No: 30-015-20799
Unit N, Section 3, Township 21 South, Range 27 East, NMPM
Eddy County, New Mexico

Pool:	BURTON FLAT;MORROW (PRO GAS)	Gas 73280
Names:	BURTON FLAT;STRAWN (PRORATED GAS)	Gas 73360

Reference is made to your recent application for an exception to Rule 12.9A. of the Division Rules and Regulations to permit the above-described well to commingle production from the subject pools in the wellbore.

It appearing that the subject well qualifies for approval for such exception pursuant to the provisions of Rule 12.11A., and that reservoir damage or waste will not result from such downhole commingling, and correlative rights will not be violated thereby, you are hereby authorized to commingle the production as described above and any Division Order which authorized the dual completion or otherwise required separation of the zones is hereby placed in abeyance.

In accordance with Division 12.11A.(6), the production attributed to any commingled pool within the well shall not exceed the allowable applicable to that pool.

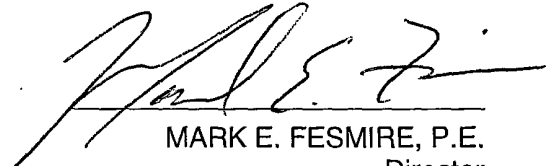
Assignment of allowable and allocation of production from the well shall be as follows:

BURTON FLAT;MORROW (PRO GAS) Pool	Pct Gas: 80	Pct Oil: 0
BURTON FLAT;STRAWN (PRORATED GAS) Pool	Pct Gas: 20	Pct Oil: 100

REMARKS: The operator shall notify the Division's district office upon implementation of commingling operations.



Pursuant to Rule 12.11B., the commingling authority granted herein may be rescinded by the Division Director if conservation is not being best served by such commingling.



MARK E. FESMIRE, P.E.
Director

MEF/wvjj

cc: Oil Conservation Division – Artesia
Bureau of Land Management - Carlsbad



PATRICK H. LYONS
COMMISSIONER

State of New Mexico
Commissioner of Public Lands

310 OLD SANTA FE TRAIL
P.O. BOX 1148
SANTA FE, NEW MEXICO 87504-1148

COMMISSIONER'S OFFICE

Phone (505) 827-5760

Fax (505) 827-5766

www.nmstatelands.org

May 22, 2009

Devon Energy Production Company, L. P.
20 North Broadway
Oklahoma City, Oklahoma 73102-8260

Attn: Ms. Stephanie A. Ysasaga

Re: Downhole Commingling Application
Burton Flat Deep Unit Well No. 3 (API # 30-015-20799)
Section 03-21S-27E
Burton Flat; Strawn (Pro Gas) and Burton Flat; Morrow (Pro Gas) Pools
Eddy County, New Mexico

Dear Ms. Ysasaga:

Thank you for your application to downhole commingle the Burton Flat; Strawn (Pro Gas) and Burton Flat; Morrow (Pro Gas) pools from the referenced well in Eddy County, New Mexico.

Since it appears that all the New Mexico Oil Conservation's (OCD) rules and regulations have been complied with, and there will be no loss of revenue to the State of New Mexico as a result of your proposed operation, your application is approved. Any deviation from the substance of your application will be cause for rescinding our approval, and approval is subject to like approval by the OCD.

Please submit a filing fee in the amount of \$30.00.

If you have any questions or if we may be of further help, please contact Pete Martinez at (505) 827-5791.

Very truly yours,

PATRICK H. LYONS
COMMISSIONER OF PUBLIC LANDS

BY:
JAMI BAILEY, Director
Oil, Gas and Minerals Division
PL/JB/jm
Enclosure
xc: Reader File
OCD-Ed Martin
BLMR-John Simitz

-State Land Office Beneficiaries -

Carrie Tingley Hospital • Charitable Penal & Reform • Common Schools • Eastern NM University • Rio Grande Improvement • Miners' Hospital of NM • NM Boys School • NM Highlands University • NM Institute of Mining & Technology • New Mexico Military Institute • NM School for the Deaf • NM School for the Visually Handicapped • NM State Hospital • New Mexico State University • Northern NM Community College • Penitentiary of New Mexico • Public Buildings at Capital • State Park Commission • University of New Mexico • UNM Saline Lands • Water Reservoirs • Western New Mexico University

District IV
1220 S. St. Francis Dr. Santa Fe, NM 87505

Oil Conservation Division
1220 South St. Francis Dr.

Santa Fe, New Mexico 87505

Form C-107A
Revised June 10, 2003

APPLICATION TYPE
X Single

_____ Establish Pre-Approved Pools
 EXISTING WELLBORE
 X Yes _____ No

APPLICATION FOR DOWNHOLE COMMINGLING

Burton Flat Deep Unit 3		Sec 3-T21S- R27E	Eddy
Lease	Well No.	Unit Letter-Section-Township-Range	County

OGRID No. 6137 Property Code _____ API No. 30-015-20799 Lease Type: X Federal ___ State ___ Fee ___

DATA ELEMENT	UPPER ZONE	INTERMEDIATE ZONE	LOWER ZONE
Pool Name	Burton Flat; Strawn (Prorated Gas)		Burton Flat; Morrow (Pro Gas)
Pool Code	73360		73280
Top and Bottom of Pay Section (Perforated or Open-Hole Interval)	10,208' – 10,250'		11,006' - 11,438'
Method of Production (Flowing or Artificial Lift)	Flowing		Flowing
Bottomhole Pressure (Note: Pressure data will not be required if the bottom perforation in the lower zone is within 150% of the depth of the top perforation in the upper zone)			
Oil Gravity or Gas BTU (Degree API or Gas BTU)	Oil Gravity: 52 Gas BTU: 1178		Gas BTU: 1038
Producing, Shut-In or New Zone	Producing		Producing
Date and Oil/Gas/Water Rates of Last Production. (Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data)	Date: 04/27/2009 Rates: 0 oil/8 mcf/0 wtr	Date: Rates:	Date: 04/27/2009 Rates: 0 oil/56 mcf/0 wtr
Fixed Allocation Percentage (Note: If allocation is based upon something other than current or past production, supporting data or explanation will be required.)	Oil Gas 100% 20%	Oil Gas % %	Oil Gas 0% 80%

ADDITIONAL DATA

Are all working, royalty and overriding royalty interests identical in all commingled zones? Yes _____ No X _____

If not, have all working, royalty and overriding royalty interest owners been notified by certified mail? Yes X _____ No _____

Are all produced fluids from all commingled zones compatible with each other? Yes X No

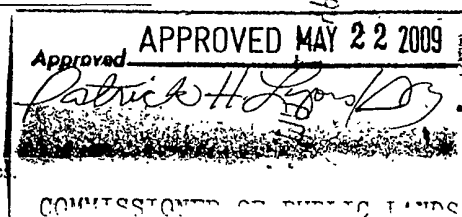
Will commingling decrease the value of production? Yes No X

If this well is on, or communitized with, state or federal lands, has either the Commissioner of Public Lands or the United States Bureau of Land Management been notified in writing of this application? Yes ☐ No ☒

NMOCD Reference Case No. applicable to this well:

Attachments:

C-102 for each zone to be commingled showing its spacing unit and acreage dedication.
Production curve for each zone for at least one year. (If not available, attach explanation.)
For zones with no production history, estimated production rates and supporting data.
Data to support allocation method or formula.
Notification list of working, royalty and overriding royalty interests for uncommon interest cases.
Any additional statements, data or documents required to support commingling.



PRE-APPROVED POOLS

If application is to establish Pre-Approved Pools, the following additional information will be required:

List of other orders approving downhole commingling within the proposed Pre-Approved Pools

List of all operators within the proposed Pre-Approved Pools

Proof that all operators within the proposed Pre-Approved Pools were provided notice of this application

Bottomhole pressure data,

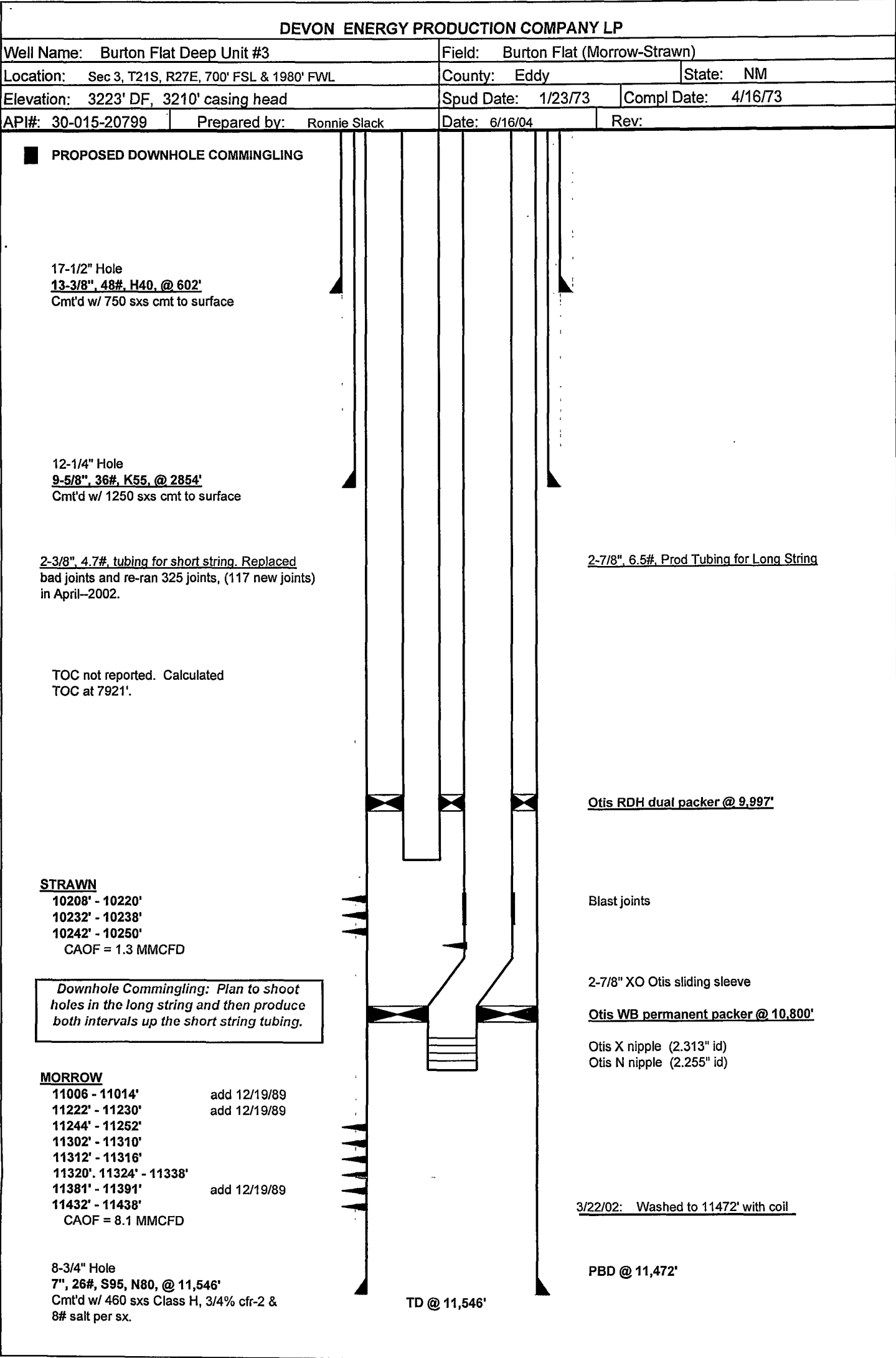
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Sr. Staff Engineering Technician DATE 05/05/2009

TYPE OR PRINT NAME Stephanie A. Ysaga TELEPHONE NO. (405)-552-7802

E-MAIL ADDRESS Stephanie.Ysasaga@dvn.com

DEVON ENERGY PRODUCTION COMPANY LP					
Well Name: Burton Flat Deep Unit #3			Field: Burton Flat (Morrow-Strawn)		
Location: Sec 3, T21S, R27E, 700' FSL & 1980' FWL			County: Eddy		State: NM
Elevation: 3223' DF, 3210' casing head			Spud Date: 1/23/73		Compl Date: 4/16/73
API#: 30-015-20799	Prepared by: Ronnie Slack		Date: 6/16/04	Rev:	
<div style="display: flex;"> <div style="flex: 1;"> <p>CURRENT</p> <p>17-1/2" Hole <u>13-3/8", 48#, H40, @ 602'</u> Cmt'd w/ 750 sxs cmt to surface</p> <p>12-1/4" Hole <u>9-5/8", 36#, K55, @ 2854'</u> Cmt'd w/ 1250 sxs cmt to surface</p> <p><u>2-3/8", 4.7#, tubing for short string. Replaced bad joints and re-ran 325 joints, (117 new joints) in April-2002.</u></p> <p>TOC not reported. Calculated TOC at 7921'.</p> <p>STRAWN 10208' - 10220' 10232' - 10238' 10242' - 10250' CAOF = 1.3 MMCFD</p> <p>MORROW 11006' - 11014' add 12/19/89 11222' - 11230' add 12/19/89 11244' - 11252' 11302' - 11310' 11312' - 11316' 11320' - 11324' - 11338' add 12/19/89 11381' - 11391' 11432' - 11438' CAOF = 8.1 MMCFD</p> <p>8-3/4" Hole <u>7", 26#, S95, N80, @ 11,546'</u> Cmt'd w/ 460 sxs Class H, 3/4% cfr-2 & 8# salt per sx.</p> </div> <div style="flex: 2;"> </div> </div>					
TD @ 11,546'					



**APPLICATION FOR DOWHOLE COMMINGLING
DEVON SUMMARY & INTENTIONS
BURTON FLAT DEEP UNIT 3**

State of New Mexico – Santa Fe
Oil Conservation Division
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

The Burton Flat Deep Unit 3 was spud 01/23/1973. The Morrow and Strawn zones were completed 04/16/1973 with packer set @ 10,800' to isolate the Morrow from the Strawn; producing the Morrow up the 2 7/8" long string production tubing. The Strawn is producing up the 2 3/8" short string tubing with packer @ 9,997'.

Production from the Morrow and Strawn has been restricted under the current configuration. Liquid holdup due to low gas rates has decreased rate from the Morrow to only 60 mcf/d and from the Strawn to only 10 mcf/d. Under the proposed configuration, the gas velocity will increase and possibly eliminate the liquid holdup which should result in an increase in production. Therefore, Devon requests approval to downhole commingle the Morrow and Strawn by shooting holes in the long string and producing both intervals up the short string tubing (see current and proposed schematics).

Current perforations are as follows:

- Burton Flat; Morrow (Pro Gas): 11,006' – 11,438' Pool Code: 73280
- Burton Flat; Strawn; Strawn (Prorated Gas): 10,208' – 10,250' Pool Code: 73360

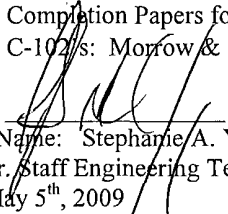
Devon proposes an extrapolated production allocation versus an historical allocation. Our current projected allocation would be the following; we are anticipating this will be acceptable. If there are other recommendations you can offer, please let us know. If changes are made to this allocation, they will be submitted formally in writing to your office.

- Burton Flat; Morrow (Pro Gas): Oil 0% - Gas 80%
- Burton Flat; Strawn (Prorated Gas): Oil 100% - Gas 20%

All working, royalty and overriding royalty interests are not identical in all commingled zones; but have been notified certified mail. All produced fluids from all commingled zones are compatible with each other. Commingling will not decrease the value of production.

Attached for your full review:

- Administrative Application Checklist
- Form C-103: NOI – Downhole Commingle
- Form C-107A: Application for Downhole Commingling
- Oil Gravities & Gas BTU's: Morrow & Strawn Zones
- Spreadsheet detail for certified mailings to parties in Morrow & Strawn zones.
- Current / Proposed Downhole Commingling Morrow & Strawn zones schematic
- Production Graphs for Morrow & Strawn zones
- Daily Production for Morrow & Strawn zones
- Monthly Average Production for Morrow & Strawn zones
- Completion Papers for the Morrow & Strawn zones
- C-102/s: Morrow & Strawn

Signed: 
Printed Name: Stephane A. Ysasaga
Title: Sr. Staff Engineering Technician
Date: May 5th, 2009

Burton Flat Deep Unit 3 DHC Notification List:

Claremont Corporation
P.O. Box 3226
Tulsa, OK 74101-3226
7002-2030-0001-3840-5076
Sent certified mail 05/07/2009
Date delivered 05/12/2009

*** Black Font: Copies of Certified Return Receipts**

**** Red Font: Certified Return Receipts Not Received to Date**

***** Return to Sender - Unclaimed**

Patricia Boyle Young
P.O. Box 1639
Solano Beach, CA 92075
7002-2030-0001-3840-5090
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

GW Holdings, Inc.
Great Western Drilling Ltd dba
Great Western Drilling Company
P.O. Box 1659
Midland, TX 79702
7002-2030-0001-3840-5168
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Davoil, Inc.
P.O. Box 200292
Dallas, TX 75320-0292
7002-2030-0001-3840-5175
Sent certified mail 05/07/2009
Date delivered: 05/13/2009

Edward R. Hudson Trust #4 **
Mary T. Hudson Ard, Trustee
222 W. 4th Street PH 5
Fort Worth, TX 76102
7002-2030-0001-3840-5182
Sent certified mail 05/07/2009

Minerals Management Service
Royalty Management Program
P.O. Box 5810
Denver, CO 80217-5810
7002-2030-0001-3840-5199
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

State of New Mexico
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87505-1148
7002-2030-0001-3840-5205
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Swinehart 1973 Trust
Judy Swinehart & Leslie A Mallett Co-Trustees
10713 S. Logan Canyon Road
S. Jordan, Utah 84095
7002-2030-0001-3840-5212
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Redfern Enterprises, Inc.
P.O. Box 2127
Midland, TX 79702
7002-2030-0001-3840-5229
Date delivered: 05/13/2009

Edith B. Myers
2717 South Lyon
Indianapolis, IN 46241
7002-2030-0001-3840-5236
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

Margaret M. Palm **
311 Grandview Place
San Antonio, TX 78209
7002-2030-0001-3840-5243
Sent certified mail 05/07/2009
Returned by post office 07/08/09

Mary Curtiss Mayfield ***
P.O. 110915
Big Bear Lake, CA 92315
7002-2030-0001-3840-5250
Sent certified mail 05/07/2009
Returned by post office 05/26/09

W.T. Probandt
415 W. Wall, Suit 1608
Midland, TX 79701
7002-2030-0001-3840-5267
Sent certified mail 05/07/2009
Date delivered: 05/15/2009

Betty Sumner Moran **
11100 Los Lagos NE
Albuquerque, NM 87111-7533
7002-2030-0001-3840-5274
Sent certified mail 05/07/2009

Mary Gene Weber Living Trust
P.O. Box 255
Elmer, OK 73539
7002-2030-0001-3840-5281
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Rosina C. Schutz
22 Brilliant Sky Drive
Santa Fe, NM 87508
7002-2030-0001-3840-5298
Sent certified mail 05/07/2009
Date sent: 05/14/2009

Dorothy Sumner Corn
2421 Quinton Avenue #105
Lubbock, TX 79710-1734
7002-2030-0001-3840-5304
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

John Halagan
70 Shadowplay
Irvine, CA 92620-4810
7002-2030-0001-3840-5311
Sent certified mail 05/07/2009
Date delivered: 05/09/2009

Hudson New Mexico Minerals Trust
616 Texas Street
Fort Worth, TX 76102-4612
7002-2030-0001-3840-5328
Sent certified mail 05/07/2009
Date delivered: 05/13/2009

Southeast Royalties, Inc.
P.O. 1658
Carlsbad, NM 88221-1658
7002-2030-0001-3840-5335
Sent certified mail 05/07/2009
Date delivered: 05/14/2009

John W. Gates, LLC
706 West Grand Avenue
Artesia, NM 88210
7002-2030-0001-3840-5342
Sent certified mail 05/07/2009

Oakland Society for Prevention of Cruelty to Animals
8323 Baldwin Street
Oakland, CA 94609
7002-2030-0001-3840-5359
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

Children's Hospital Foundation
2201 Broadway FL6
Oakland, CA 94612-3024
7002-2030-0001-3840-5366
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Marcia S. Mayfield Revocable Trust
Marcia S. Mayfield Trustee
9398 Viscount Building 5B
El Paso, TX 79925
7002-2030-0001-3840-5373
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

Sieb Resources
P.O. Box 1107
Richmond, TX 77406-1107
7002-2030-0001-3840-5380
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

J & L Resources
310 Morton Street, Suite 160
Richmond, TX 77469
7002-2030-0001-3840-5397
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

Gene E. Trowbridge, Jr.
P.O. Box 1169
Saratoga, WY 82331
7002-2030-0001-3840-5403
Sent certified mail 05/07/2009
Date delivered: 05/14/2009

Ann T. Tollefson Revocable Living Trust
Dated June 7, 2006
Ann Tollefson Trustee
231 East 10th Street
Casper, WY 82601
7002-2030-0001-3840-5410
Sent certified mail 05/07/2009
Date delivered: 05/13/2009

Connie Fong Dunn
5511 N. Delno
Fresno, CA 93711
7002-2030-0001-3840-5427
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

Mary Hudson Ard
222 West 4th Street PH5
Fort Worth, TX 76102
7002-2030-0001-3840-5434
Sent certified mail 05/07/2009
Date delivered: 05/18/09

Sol West III
P.O. Box 10120
El Paso, TX 79992
7008-1140-0004-6108-7447
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Nora Helen McCaw, Trustee
Of the McCaw Family Trust
210 Crossbow Road
Artesia, NM 88210
7007-0710-0000-0857-3133
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Thomas G. Laros Estate
Dianne D. Laros, Independent Executrix
5711 Stanford Avenue
Dallas, TX 75209
7007-0710-0000-0857-3140
Sent certified mail 05/07/2009
Date delivered: no date stamp

Joe B. Schutz
P.O. Box 973
Santa Fe, NM 87501
7007-0710-0000-0857-3157
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

Hudson Oil Company of Texas
616 Texas Street
Fort Worth, TX 76102-4612
7007-0710-0000-0857-3126
Sent certified mail 05/07/2009
Date delivered: 05/13/2009

Reva Co, a Partnership **
c/o Colorado State Bank & Trust NA
Successor Managing Partner
P.O. Box 1588
Tulsa, OK 74010-1588
7008-1140-0004-6107-8452
Sent certified mail 05/07/2009

Gwendolyn Taylor Rutledge **
28 Scotts Place
Santa Fe, NM 87507
7008-1140-0004-6107-8469
Sent certified mail 05/07/2009

Agnes Dunigan Independent Executrix
Of the Estate of Joseph L. Dunigan
4024 La Adelita Drive
El Paso, TX 79922-2312
7008-1140-0004-6107-8476
Sent certified mail 05/07/2009
Date delivered: 05/09/2009

Sharon K. Clark
P.O. 1469
Edgewood, NM 87015
7008-1140-0004-6107-8483
Sent certified mail 05/07/2009
Date delivered: 05/11/2009

Suzanne L. Simpson
5127 Nassif Court NW
Albuquerque, NM 87129-2174
7008-1140-0004-6107-8490
Sent certified mail 05/07/2009
Date delivered: 05/12/2009

William M. or Tina M. Sumner
11811 Eagle Rock Avenue NE
Albuquerque, NM 87122
7008-1140-0004-6107-8506
Sent certified mail 05/07/2009
Date delivered: no date stamp

George V. Janzen **
3488 "B" Calle Azul
Laguna Woods, CA 92653
7008-1140-0004-6107-8513
Sent certified mail 05/07/2009

Helen and John Frankot Trust dated June 2, 1997 ***
Helen Frankot Trustee
1940 Verbania Drive
Las Vegas, NV 89134
7008-1140-0004-6107-8520
Sent certified mail 05/07/2009

LLoyd Co, a Partnership **
c/o Colorado State Bank & Trust NA
Successor Managing Partner
P.O. Box 1588
Tulsa, OK 74010-1588
7008-1140-0004-6107-8537
Sent certified mail 05/07/2009

United States Department of the Interior
Bureau of Land Management
Carlsbad Field Office
620 East Greene Street
Carlsbad, NM 88220-6292
7008-1140-0004-6107-8544
Sent certified mail 05/07/2009
Date delivered: 05/10/2009

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:

Claremont Corporation
P.O. Box 3226
Tulsa, OK 74101-3226

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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:

Patricia Boyle Young
P.O. Box 1639
Solano Beach, CA 92075

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5090

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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:

GW Holdings, Inc. - Great Western Drilling Ltd dba
Great Western Drilling Company
P.O. Box 1659
Midland, TX 79702

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5168

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Linda Pook ☐ Address
- B. Received by (Printed Name) C. Date of Delivery
Linda Pook 5/11/09
- 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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ Patricia Young ☐ Address
- B. Received by (Printed Name) C. Date of Delivery
Patricia Young 5/11/09
- 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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
☒ J. Bell ☐ Address
- B. Received by (Printed Name) C. Date of Delivery
J. Bell 5/11
- 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:

Davoil, Inc.
P.O. Box 200292
Dallas, TX 75320-0292

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5175

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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:

Minerals Management Service
Royalty Management Program
P.O. Box 5810
Denver, CO 80217-5810

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5199

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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:

State of New Mexico
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87505-1148

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5205

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Heaketa Collins* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Heaketa Collins ☒ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Heaketa Collins* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Heaketa Collins ☒ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Heaketa Collins* ☒ Agent
☐ Addressee

B. Received by (Printed Name)

Heaketa Collins ☒ Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Swinehart 1973 Trust
Judy Swinehart & Leslie A Mallett Co-Trustees
10713 S. Logan Canyon Road
S. Jordan, Utah 84095

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Leslie Mallett* ☐ Agent ☐ Address

B. Received by (Printed Name)

Leslie Mallett C. Date of Delivery *5/11/06*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5212

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Redfern Enterprises, Inc.
P.O. Box 2127
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Shirley Choate* ☐ Agent ☐ Address

B. Received by (Printed Name)

Shirley Choate C. Date of Delivery *5/13/09*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5229

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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.

Article Addressed to:

Edith B. Myers
2717 South Lyon
Indianapolis, IN 46241

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Edith B. Myers* ☐ Agent ☐ Address

B. Received by (Printed Name)

Edith B. Myers C. Date of Delivery *5-12*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5236

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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:

W.T. Probandt
415 W. Wall, Suit 1608
Midland, TX 79701

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5267

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Mary Gene Weber Living Trust
P.O. Box 255
Elmer, OK 73539

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5281

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Rosina C. Schutz
22 Brilliant Sky Drive
Santa Fe, NM 87508

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5298

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:

Dorothy Sumner Corn
2421 Quinton Avenue #105
Lubbock, TX 79710-1734

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Dorothy Corn* ☐ Agent
☒ Address

B. Received by (Printed Name)

Dorothy Corn C. Date of Delivery *5/12/04*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5304

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

18.

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:

John Halagan
70 Shadowplay
Irvine, CA 92620-4810

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Daniel Ireland* ☐ Agent
☒ Address

B. Received by (Printed Name)

Daniel Ireland C. Date of Delivery *5/19/04*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5311

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

19.

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:

Hudson New Mexico Minerals Trust
616 Texas Street
Fort Worth, TX 76102-4612

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Laura Collins* ☐ Agent
☒ Address

B. Received by (Printed Name)

Laura Collins C. Date of Delivery *5/13/04*

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5328

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

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:

Southeast Royalties, Inc.
P.O. 1658
Carlsbad, NM 88221-1658

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5335

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

21.

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:

John W. Gates, LLC
706 West Grand Avenue
Artesia, NM 88210

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5342

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

22.

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:

Oakland Society for Prevention of Cruelty to Animals
8323 Baldwin Street
Oakland, CA 94609

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5359

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x [Signature]

☒ Agent
☐ Address

B. Received by (Printed Name)

MICHAEL J. [Signature]

C. Date of Delivery

5/14/09

D. Is delivery address different from item 1? ☐ YesIf 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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x [Signature]

☒ Agent
☐ Address

B. Received by (Printed Name)

MARGARET GATES

C. Date of Delivery

5/11/09

D. Is delivery address different from item 1? ☐ YesIf 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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x [Signature]

☒ Agent
☐ Address

B. Received by (Printed Name)

Kendra Adams

C. Date of Delivery

5-12-09

D. Is delivery address different from item 1? ☐ YesIf 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:

Children's Hospital Foundation
2201 Broadway FL6
Oakland, CA 94612-3024

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5366

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

24

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
B. Received by (Printed Name)

- ☐ Agent
☐ Address

C. Date of Delivery

5-11-09

- 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:

Marcia S. Mayfield Revocable Trust
Marcia S. Mayfield Trustee
9398 Viscount Building 5B
El Paso, TX 79925

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5373

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

25

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
B. Received by (Printed Name)

- ☐ Agent
☐ Address

C. Date of Delivery

MAY 12 2009

- 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:

Sieb Resources
P.O. Box 1107
Richmond, TX 77406-1107

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5380

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
B. Received by (Printed Name)

- ☐ Agent
☐ Address

C. Date of Delivery

5/12/09

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

P.O. Box 1107

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:

J & L Resources
310 Morton Street, Suite 160
Richmond, TX 77469

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5397

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

27

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Gene E. Trowbridge, Jr.
P.O. Box 1169
Saratoga, WY 82331

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5403

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

28

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Ann T. Tollefson Revocable Living Trust Dated June 7, 2006
Ann Tollefson Trustee
231 East 10th Street
Casper, WY 82601

2. Article Number

(Transfer from service label)

7002 2030 0001 3840 5410

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
B. Received by (Printed Name)
D. M. M. M.

- ☐ Agent
☐ Address

C. Date of Delivery

5/12/09

- 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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
B. Received by (Printed Name)
SUDIE TROWBRIDGE

- ☐ Agent
☐ Address

C. Date of Delivery

5-14-09

- 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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]
B. Received by (Printed Name)
Ann Tollefson

- ☐ Agent
☒ Address

C. Date of Delivery

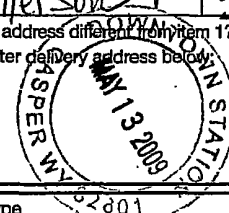
5-13-09

- 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:

Connie Fong Dunn
5511 N. Delno
Fresno, CA 93711

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5427

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

30

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:

Mary Hudson Ard
222 West 4th Street PH5
Fort Worth, TX 76102

2. Article Number
(Transfer from service label)

7002 2030 0001 3840 5434

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

31

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:

Sol West III
P.O. Box 10120
El Paso, TX 79992

2. Article Number
(Transfer from service label)

7008 1140 0004 6108 7447

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Dunn

C. Date of Delivery

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

If YES, enter delivery address below:

CONNIE DUNN

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

5/18/06

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

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

If YES, enter delivery address below:

MAY 11

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:

Nora Helen McCaw, Trustee
Of the McCaw Family Trust
210 Crossbow Road
Artesia, NM 88210

2. Article Number
(Transfer from service label)

7007 0710 0000 0857 3133

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

33

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:

Thomas G. Laros Estate
Dianne D. Laros, Independent Executrix
5711 Stanford Avenue
Dallas, TX 75209

2. Article Number
(Transfer from service label)

7007 0710 0000 0857 3140

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

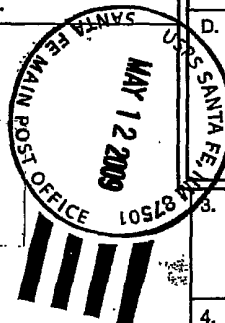
3-

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:

Joe B. Schutz
P.O. Box 973
Santa Fe, NM 87501

2. Article Number
(Transfer from service label)

7007 0710 0000 0857 3157

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Robert McCaw

☐ Agent
☐ Address

B. Received by (Printed Name)

Robert McCaw

C. Date of Delivery

5-11

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Dianne Regan

☐ Agent
☐ Address

B. Received by (Printed Name)

Dianne Regan

C. Date of Delivery

5-11

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Joe B. Schutz

☐ Agent
☐ Address

B. Received by (Printed Name)

Joe B. Schutz

C. Date of Delivery

5-11

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:

Hudson Oil Company of Texas
616 Texas Street
Fort Worth, TX 76102-4612

2. Article Number

(Transfer from service label)

7007 0710 0000 0857 3126

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

38

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Laura Collins*

- ☐ Agent
☐ Address

B. Received by (Printed Name)

Laura Collins

C. Date of Delivery

5/13/09

- 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:

Agnes Dunigan Independent Executrix
Of the Estate of Joseph L. Dunigan
4024 La Adelita Drive
El Paso, TX 79922-2312

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8476

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

39

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Patricia A. Mary*

- ☐ Agent
☐ Address

B. Received by (Printed Name)

Patricia A. Mary

C. Date of Delivery

5/13/09

- 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:

Sharon K. Clark
P.O. 1469
Edgewood, NM 87015

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8483

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sharon Clark*

- ☐ Agent
☐ Address

B. Received by (Printed Name)

Sharon Clark

C. Date of Delivery

5/13/09

- 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:

Suzanne L. Simpson
5127 Nassif Court NW
Albuquerque, NM 87129-2174

2. Article Number
(Transfer from service label)

7008 1140 0004 6107 8490

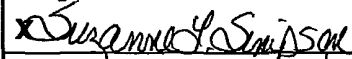
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐
- Agent
-
- ☐
- Address

B. Received by (Printed Name)

C. Date of Delivery

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:

William M. or Tina M. Sumner
11811 Eagle Rock Avenue NE
Albuquerque, NM 87122

2. Article Number
(Transfer from service label)

7008 1140 0004 6107 8506

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐
- Agent
-
- ☐
- Address

B. Received by (Printed Name)

C. Date of Delivery

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:

United States Department of the Interior
Bureau of Land Management Carlsbad Field Office
620 East Greene Street
Carlsbad, NM 88220-6292

2. Article Number
(Transfer from service label)

7008 1140 0004 6107 8544

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

COMPLETE THIS SECTION ON DELIVERY

A. Signature



- ☐
- Agent
-
- ☐
- Address

B. Received by (Printed Name)

C. Date of Delivery

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

Burton Flat Deep Unit 3
30-015-20799
Devon Energy Production Co., LP
October 15, 2009
Comments

The request to downhole commingle the Morrow and Strawn participating areas cannot be approved due to the different royalty rates.

The proposal submitted to monitor production is inadequate for long term production with the different royalty rates. If a method can be developed that will allow more frequent testing of these zones, the proposal to downhole commingle can be resubmitted and will be reconsidered.

WWI 101509