

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

RECEIVED

JAN 07 2010

NMOCD ARTESIA

1 Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		7 If Unit of CA/Agreement, Name and/or No
2 Name of Operator Devon Energy Production Co., LP		8 Well Name and No Hackberry 6 Federal 1 / Strawberry 7 Federal 1
3a Address 20 North Broadway OKC, OK 73102	3b Phone No (include area code) (405)-552-7802	9 API Well No 30-015-31020 & 30-015-31876
4 Location of Well (Footage, Sec, T, R, M, or Survey Description) See below		10 Field and Pool or Exploratory Area Hackberry, Bone Springs, North (97056)
		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 Lease Commingle
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Off-Lease Gas
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	Sales & Measurement

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.)

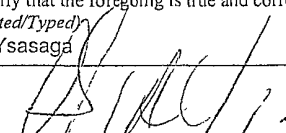
Devon Energy Production Co., LLP respectfully requests approval for lease commingle and off lease storage and measurement of gas hydrocarbon production from the following wells:

- \* Hackberry 6 Federal 1. API # 30-015-31020 Sec 6-T19S-R31E Lease NM-66437 Hackberry, Bone Spring, North (97056)
- \* Strawberry 7 Federal Com 1. API # 30-015-318376 Sec 7-T19S-R31E Lease NM-100561 Hackberry; Bone Spring, North (97056)

Each location has its' own tank battery. The Subtraction Method will be used to allocate production back to the wells after commingling, instead of metering both locations, to save on costs. Gas allocation meter located at Strawberry 7 Federal 1. A common gas sales meter associated with a Frontier central delivery point (CDP) is located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal Com 1. After subtracting Strawberry 7 Federal 1 gas volumes from the Frontier gas sales meter, gas volumes are given to the Hackberry 6 Federal 1. A chart recorded will be used on the Hackberry 18 Federal 1 to measure and verify the gate rate on the Hackberry 6 Federal 1. Waste is not induced and no correlative rights are impaired.

Working, royalty, and overriding interest owners have been notified via certified mail (see attached).

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) Stephanie A. Ysasaga		Title Sr. Staff Engineering Technician
Signature 		Date 11/20/2009

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by Is/ JD Whitlock Jr	Title LPE7	Date 1/5/2010
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 CFO	

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)

MR

## APPLICATION FOR LEASE COMMINGLING & OFF-LEASE MEASUREMENT AND OFF LEASE SALES APPROVAL

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

### Lease commingling proposal for Hackberry & Strawberry leases:

Devon Energy Production Company, LP is requesting approval for surface commingle, off-lease storage and off-lease measurement of hydrocarbon gas production from the Hackberry, Bone Springs, NW Pool (97056) from the following wells:

#### Federal Lease NM-66437

Well Name	Location	API #	Pool 97056	MCF	BTU
Hackberry 6 Federal 1	NWSE Sec 6-T19S-R31E	30-015-31020	Hackberry, Bone Spring, North	242	1375

#### Federal Lease NM-100561

Well Name	Location	API #	Pool 97056	MCF	BTU
Strawberry 7 Federal Com 1	NENW Sec 7-T19S-R31E	30-015-31876	Hackberry, Bone Spring, North	1257	1356

A map (Exhibit A) is enclosed showing the Federal leases and well locations in Section 6 and 7 of T19S R31E. The ownership in the Hackberry and Ranger leases are not identical; all affected working interest, royalty and overriding royalty owners have been notified of this proposal (Exhibit B).

### Gas metering:

The gas hydrocarbon production from the Hackberry 6 Federal 1 and Strawberry 7 Federal Com 1 will be the only hydrocarbon being commingled, measured and sold off-lease. Each location has its own facility located in the NWSE and NENW of Section 6 and 7 (respectively) in T19S, R31E on Federal Leases NM-66437 and NM-100561 in Eddy County, New Mexico (Exhibit C). A common gas sales meter associated with a Frontier central delivery point (CDP) is located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal 1.

The "Subtraction Method" will be used to allocate production back to the wells after commingling. A gas allocation meter is located at the Strawberry 7 Federal 1 location. After subtracting the Strawberry 7 Federal 1 gas volumes from the Frontier gas sales meter, gas volumes are given to the Hackberry 6 Federal 1. To save on costs, Devon proposes to use a chart recorder to measure and verify the gas rate on the Hackberry 6 Federal 1.

The BLM's interest in both wells are the same and the BTU's are equivalent. Waste is not induced and no correlative rights are impaired. These meters will be calibrated on a regular basis per API, NMOCD and BLM specifications. The BLM and OCD will be notified of any future changes in the facilities.

### Process and Flow Descriptions:

Please see attached diagrams for the proposed Hackberry 6 Federal 1 and Strawberry 7 Federal Com 1 batteries. The flow of produced fluids is shown in detail on Exhibit D along with a description of each vessel.

The commingling of production is in the interest of conservation and waste and will result in the most effective, economic means of producing the reserves in place from the affected wells and will not result in reduced royalty or improper measurement of production. The proposed commingling will reduce operating expenses as well as reduce the surface facility footprint and overall emissions.

Devon Energy Production Company, LP understands the requested approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. Additionally, Devon Energy Production Co., LP will submit within 30 days, an application for right-of-way approval to the BLM and NMOCD section in your office, if we have not already done so.

DATE IN	SUSPENSE	ENGINEER	LOGGED IN	TYPE	APP NO
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ABOVE THIS LINE FOR DIVISION USE ONLY

## NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -

1220 South St. Francis Drive, Santa Fe, NM 87505



### ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

#### Application Acronyms:

[NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]  
 [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]  
 [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]  
 [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]  
 [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]  
 [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]  
 [A] Location - Spacing Unit - Simultaneous Dedication  
☐ NSL ☐ NSP ☐ SD
- Check One Only for [B] or [C]  
 [B] Commingling - Storage - Measurement  
☐ DHC ☒ CTB ☐ PLC ☐ PC ☐ OLS ☒ OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery  
☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR
- [D] Other: Specify \_\_\_\_\_
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or ☐ Does Not Apply  
 [A] ☒ Working, Royalty or Overriding Royalty Interest Owners  
 [B] ☐ Offset Operators, Leaseholders or Surface Owner  
 [C] ☐ Application is One Which Requires Published Legal Notice  
 [D] ☒ Notification and/or Concurrent Approval by BLM or SLO  
U S Bureau of Land Management - Commissioner of Public Lands, State Land Office  
 [E] ☐ For all of the above, Proof of Notification or Publication is Attached, and/or,  
 [F] ☐ Waivers are Attached

- [3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

- [4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

Note: Statement must be completed by an individual with managerial and/or supervisory capacity.

Stephanie A. Ysasaga  
 Print or Type Name

[Signature]  
 Signature

Sr. Staff Engineering Technician  
 Title

11/20/2009  
 Date

Stephanie.Ysasaga@dvn.com  
 e-mail Address

District I  
625 N French Dr, Hobbs, NM 88240  
District II  
1301 W Grand Ave, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd, Aztec, NM 87410  
District IV  
1220 S St Francis Dr, Santa Fe, NM  
87505

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO 30-015-31020 & 30-015-31876
5 Indicate Type of Lease FED <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6 State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name  See Below
8 Well Number
9. OGRID Number 6137
10 Pool name or Wildcat See Below

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)

1 Type of Well: Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator  
Devon Energy Production Company, LP

3. Address of Operator  
20 North Broadway Oklahoma City, Oklahoma 73102-8260 (405) 552-7802

4. Well Location (See Below)  
Unit Letter \_\_\_\_\_ feet from the \_\_\_\_\_ line and \_\_\_\_\_ feet from the \_\_\_\_\_ line  
Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ NMPM Eddy County New Mexico

11. Elevation (Show whether DR, RKB, RT, GR, etc)  
n/a

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
OTHER LEASE COMMINGLE, OFF-LEASE GAS  
SALES & MEASUREMENT ☒

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Devon Energy Production Co., LLP respectfully requests approval for lease commingle and off lease storage and measurement of gas hydrocarbon production from the following wells:

- \* Hackberry 6 Federal 1: API # 30-015-31020 Sec 6-T19S-R31E Lease NM-66437 Hackberry; Bone Spring, North (97056)
- \* Strawberry 7 Federal Com 1. API # 30-015-318376 Sec 7-T19S-R31E Lease NM-100561 Hackberry, Bone Spring, North (97056)

Each location has its' own tank battery The Subtraction Method will be used to allocate production back to the wells after commingling, instead of metering both locations, to save on costs Gas allocation meter located at Strawberry 7 Federal 1 A common gas sales meter associated with a Frontier central delivery point (CDP) is located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal Com 1 After subtracting Strawberry 7 Federal 1 gas volumes from the Frontier gas sales meter, gas volumes are given to the Hackberry 6 Federal 1. A chart recorded will be used on the Hackberry 18 Federal 1 to measure and verify the gate rate on the Hackberry 6 Federal 1. Waste is not induced and no correlative rights are impaired.

Working, royalty, and overriding interest owners have been notified via certified mail (see attached)

I hereby certify that the information above is true and complete to the best of my knowledge and belief I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE \_\_\_\_\_ TITLE Sr. Staff Engineering Technician DATE 11/20/2009

Type or print name Stephanie A. Ysasaga E-mail address Stephanie.Ysasaga@dmn.com Telephone No. (405) 552-7802  
For State Use Only

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any).

District I  
1625 N French Drive, Hobbs, NM 88240  
District II  
1301 W Grand Ave, Artesia, NM 88210  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S St Francis Dr, Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-107-B  
Revised June 10, 2003

**OIL CONSERVATION DIVISION**

1220 S St Francis Drive  
Santa Fe, New Mexico 87505

Submit the original  
application to the Santa Fe  
office with one copy to the  
appropriate District Office

**APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)**

OPERATOR NAME Devon Energy Production Co, LP

OPERATOR ADDRESS: 20 North Broadway OKC, OK 73102

APPLICATION TYPE:

☐ Pool Commingling ☒ Lease Commingling ☐ Pool and Lease Commingling ☒ Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE. ☐ Fee ☐ State ☒ Federal

Is this an Amendment to existing Order? ☐ Yes ☒ No If "Yes", please include the appropriate Order No \_\_\_\_\_  
Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling  
☒ Yes ☐ No

**(A) POOL COMMINGLING**

Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes

(2) Are any wells producing at top allowables? ☐ Yes ☐ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☐ Yes ☐ No

(4) Measurement type ☐ Metering ☐ Other (Specify)

(5) Will commingling decrease the value of production? ☐ Yes ☐ No If "yes", describe why commingling should be approved

**(B) LEASE COMMINGLING**

Please attach sheets with the following information

(1) Pool Name and Code Hackberry, Bone Spring, North (97056)

(2) Is all production from same source of supply? ☒ Yes ☐ No

(3) Has all interest owners been notified by certified mail of the proposed commingling? ☒ Yes ☐ No

(4) Measurement type ☒ Metering ☒ Other (Specify) - Each location has its' own tank battery One gas allocation meter on Strawberry location and use of Subtraction Method to allocate sales back to the Hackberry location after commingling at a Frontier central delivery point (CDP) located in Sec 18-T19S-R31E approximately 1 mile south of the Strawberry 7 Federal 1 A chart recorder will be used on the Hackberry to measure and verify gas rate

**(C) POOL and LEASE COMMINGLING**

Please attach sheets with the following information

(1) Complete Sections A and E

**(D) OFF-LEASE STORAGE and MEASUREMENT**

Please attached sheets with the following information

(1) Is all production from same source of supply? ☒ Yes ☐ No

(2) Include proof of notice to all interest owners

**(E) ADDITIONAL INFORMATION (for all application types)**

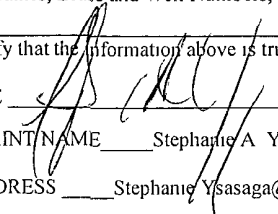
Please attach sheets with the following information

(1) A schematic diagram of facility, including legal location

(2) A plat with lease boundaries showing all well and facility locations Include lease numbers if Federal or State lands are involved

(3) Lease Names, Lease and Well Numbers, and API Numbers

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

SIGNATURE  TITLE Sr Staff Engineering Technician DATE 11/20/2009

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

E-MAIL ADDRESS Stephanie.Ysasaga@dvn.com

# Hackberry & Strawberry Wells

## Off Lease Measurement, Storage & Surface Commingle (Gas)

### 19S-31E Lea County, NM

USA NMNM 66437

HACKBERRY 6 FEDERAL 1

19S-30E













19S-31E

EDDY

STRAWBERRY 7 FEDERAL COM 1

USA NMNM 100561

#### Legend

- |   |                    |   |                    |
|---|--------------------|---|--------------------|
|  | Gas Well           |  | Well Surface       |
|   | Gas Injection Well |  | Abandoned Location |
|   | Injection Well     |  | Drilling           |
|   | Oil Well           |  | Permit             |
|   | Oil Injection Well |  | BoreStick          |
|   |                    |  | Devon Leases       |
|   |                    |  | Devon Minerals     |



devon

Blaine Hess  
P O Box 326  
Roswell, NM 88202-0326  
7008-1830-0003-1986-2680

Yates Petroleum Corporation  
Kathy H Porter AIF  
105 South 4<sup>th</sup> Street Artesia, NM 88210  
7008-1830-0002-7421-8690

Chi Energy Inc  
P O Box 1799  
Midland, TX 79702  
7008-1830-0003-1986-2703

Featherstone Development Corp  
P O Box 429  
Roswell, NM 88202  
7008-1830-0003-1986-2710

Minerals Management Service Royalty Mgmt Prgrm  
P O Box 5810  
Denver, CO 80217-5810  
7008-1830-0003-1986-2727

Western Oil Producers Inc  
P O Box 2800  
Midland, TX 79702-2800  
7008-1830-0003-1986-2734

Harle Inc  
22230 SW Taylors Dr  
Tualatin, OR 97062  
7008-1830-0003-1986-2741

J T Jackson & Associates  
2302 Sierra Vista  
Artesia, NM 88210-9409  
7008-1830-0003-1986-2758

James E Guy & Peggy Guy Trustee of the P I Guy  
Trustees of the Family Trust  
604 S 17th Street Artesia, NM 88210  
7008-1830-0003-1986-2765

Dillard Fisher & Dillard Pshp  
415 West Wall STE 703  
Midland, TX 79701  
7008-1830-0003-1986-2772

Gary W Darmon & Lynne Darmon  
P O Box 10  
Capitan, NM 88316  
7008-1830-0003-1986-2789

Richard J Forrest Jr  
208 Dickson Lane  
Carlsbad, NM 88220  
7008-1830-0003-1986-2796

J Brad & Debbi L Jeffers  
P O Box 2188  
Roswell, NM 88202  
7008-1830-0003-1986-2802

Steve W & Stacy D Lewis  
1807 Don Lewis Road  
Artesia, NM 88210-9340  
7008-1830-0003-1986-2819

Rance C Miles  
P O Box 713  
Artesia, NM 88211-0713  
7008-1830-0003-1986-2826

Thomas D Ramage  
RT 1, 2904 Ave De Amigos  
Roswell, NM 88201  
7008-1830-0003-1986-2833

S&S Enterprises LLC  
P O Box 5422  
Hobbs, NM 88241  
7008-1830-0003-1986-2840

J E Cieszinski  
22 Riverside Drive  
Roswell, NM 88201  
7008-1830-0003-1986-2857

Gerald E & Emma Harrington Tr  
P O Box 3716  
Roswell, NM 88202  
7008-1830-0003-1986-2864

W J Ball & Carrol Ball Trust  
3106 N Montana Ave  
Roswell, NM 88201  
7008-1830-0003-1986-2871

James K & Martha Lusk Trust  
1310 E 131 St Drive  
Thornton, CO 80241  
7008-1830-0003-1986-2888

Donald W Gardener  
3620 W Turkey Lane  
Tucson, AZ 85741  
7008-1830-0003-1986-2895

Larry Arnold  
P O Box 2253  
Hobbs, NM 88241-2253  
7008-1830-0003-1986-2901

Maurice Mordka  
1800 North Grady  
Tucson, AZ 85715  
7008-1830-0003-1986-2918

Neeco Inc  
P O Box 10847  
Midland, TX 79702  
7008-1830-0003-1986-2925

Lantana Oil Company  
P O Box 1837  
Roswell, NM 88202-1837  
7008-1830-0003-1986-2932

Parrot Head Properties LLC  
Angela L Naranjo Registered  
P O Box 429 Roswell, NM 88202  
7008-1830-0003-1986-2949

Norman L Stevens Jr Rev Trust  
P O Box 3087  
Roswell, NM 88202-3087  
7008-1830-0003-1986-2956

Free Ride LLC  
P O Box 429  
Roswell, NM 88202  
7008-1830-0003-1986-2963

Lobos Energy Partners LLC  
3817 NW Expressway STE 950  
OKC, OK 73112  
7008-1830-0003-1896-2970

McCombs Energy Ltd  
5599 San Felipe, Ste 1200  
Houston, TX 77056  
7008-1830-0003-1986-2987

Big Three Energy Group LLC  
P O Box 429  
Roswell, NM 88202  
7008-1830-0003-1986-2994

Termac Oil & Gas LLC  
P O Box 2212  
Roswell, NM 88202  
7008-1830-0003-1986-3007

David R Gannaway  
P O Box 2791  
Roswell, NM 88202  
7008-1830-0003-1986-3014

Tom P Stephens Trust BOK NA Trustee  
P O Box 840738  
Dallas, TX 75284-0738  
7008-1830-0003-1986-3021

Sun Valley Energy Corporation  
P O Box 1000  
Roswell, NM 88202-1000  
7008-1830-0003-1986-3038

Centennial  
Post Office Box 1837  
Roswell, NM 88202-1837  
7008-1830-0003-1986-3045

Cannon Exploration Company  
3608 S County Road 1184  
Midland, TX 79706-6468  
7008-1830-0003-1986-3052

Permian Hunter Corporation  
275 East South Temple STE 250  
Salt Lake City, UT 84111  
7008-1830-0003-1986-3069

Roger T & Holly L Elliott Family Lmted Ptshp LP  
4105 Baybrook Drive  
Midland, TX 79707  
7008-1830-0003-1986-3076

Barbe Development LLC  
P O Box 2107  
Roswell, NM 88202-2107  
7008-1830-0003-1986-3083

Ioan M Voigt  
7 Sherborne Wood  
San Antonio, TX 78218  
7008-1830-0003-1986-3090

Marbob Energy Corporation  
P O Box 227  
Artesia, NM 88211  
7008-1830-0003-1986-3106

Todd M Wilson  
3608 S County Rd 1184  
Midland, TX 79706-6468  
7008-1830-0003-1986-3113

Stanford University c/o Bank of America  
P O Box 840738  
Dallas, TX 75284-0738  
7008-1830-0003-1986-3120

Pitch Energy Corporation  
P O Box 227  
Artesia, NM 88211-0227  
7008-1830-0003-1986-3137

PBR Properties Joint Venture  
P O Box 2802  
Midland, TX 79702  
7008-1830-0003-1986-3144

Wallfam Limited Partnership  
1811 Heritage Blvd, Ste 200  
Midland, TX 79707  
7008-1830-0003-1986-3151

Hanson Operating Co Inc  
P O Box 1515  
Roswell, NM 88202  
7008-1830-0003-1986-3168

Constance B Cartwright Trustee  
2444 Wilshire Blvd, Ste 508  
Santa Monica, CA 90403-5808  
7008-1830-0003-1986-3175

Willis R Hartsock c/o Bank of America  
P O Box 620020  
Dallas, TX 75262  
7008-1830-0003-1986-3182

Ward C Hartsock c/o Bank of America  
P O Box 620020  
Dallas, TX 75262  
7008-1830-0003-1986-3199

Jeanne (Jean) Edna Hunt  
P O Box 251406  
Plano, TX 75025-1406  
7008-1830-0003-1986-3205

Franklin Thompson Family Agcy Trust #4012  
P O Box 840738  
Dallas, TX 75284-0738  
7008-1830-0003-1986-3212

Jane Landreth Russell Agency  
Lock Box 3480  
Omaha, NE 68103-0480  
7008-1830-0003-1986-3229

Lynda L Shrop Trust #1  
P O Box 3480  
Roswell, NM 88202-1837  
7008-1830-0003-1986-3236

Robert H Tennant  
9563 Doliver  
Houston, TX 77063  
7008-1830-0003-1986-3243

Robert H Tennant Jr Testament Trustee  
Robert H Tennant Trustee  
9563 Doliver Houston, TX 77063  
7008-1830-0003-1986-3250

Borden Hamilton Tennant Trust  
Robert H Tennant Trustee  
9563 Doliver Houston, TX 77063  
7008-1830-0003-1986-3267

Mary Elizabeth Tennant Trust  
Robert H Tennant Trustee  
9563 Doliver Houston, TX 77063  
7008-1830-0003-1986-3274

Joseph A Tennant  
P O Box 382  
Marathon, TX 78942  
7008-1830-0003-1986-3281

Carol J Christensen  
19026 N 2<sup>nd</sup> Avenue  
Phoenix, AZ 85027  
7008-1830-0003-1986-3298

David Donnelly Trust  
P O Box 1150  
Lebanon, MO 65536  
7008-1830-0003-1986-3304

David F Stout  
1645 W Baseline Rd Unit 2146  
Mesa, AZ 85202  
7008-1140-0004-6108-8772

William T Henderson & Dorothy Hend Fam Trust  
1906 E Battlefield Rd  
Springfield, MO 65804  
7008-1140-0004-6108-8789

Dillard Fisher & Dillard Pshp  
415 West Wall, Ste 703  
Midland, TX 79701  
7008-1140-0004-6108-8796

Sue Hanson McBride  
P O Box 1515  
Roswell, NM 88202-1515  
7008-1140-0004-6108-8802

Julie Scott McBride  
P O Box 1515  
Roswell, NM 88202-1515  
7008-1140-0004-6108-8819

David G & Jean A Willis 1998 Trust  
98 Reservoir Road  
Atherton, CA 94027  
7008-1140-0004-6108-8826

The THW & ADW Living Trust  
1763 Royal Oaks Dr N, #E305  
Bradbury, CA 91040-1999  
7008-1140-0004-6108-8833

Anne W Briggs Rancho Del OSO  
3610 Pacific Coast Highway  
Davenport, CA 95017  
7008-1140-0004-6108-8840

Thomas F McKenna Sr Credit  
281 Genenvieve Dr  
Tijeras, NM 87059  
7008-1140-0004-6108-8857

W A Landreth Jr  
3207 W 4<sup>th</sup> Street  
Ft Worth, TX 76102  
7008-1140-0004-6108-8864

Mary Lindsey Kesterson Agency  
Lock Box 3480  
Omaha, NE 68103-0480  
7008-1140-0004-6108-8871

Mary Adele Landreth Smith c/o Edward Smith  
1675 Highway 591  
Dublin, TX 76446  
7008-1140-0004-6108-8888

Wright NM Partners LP  
P O Box 752  
Stanton, TX 79782  
7008-1140-0004-6108-8895

William Locke Allison III  
2641 Fines Creek Drive  
Statesville, NC 28625  
7008-1140-0004-6108-8918

W B Kindelsparger Estate  
P O Box 1148  
Odessa, TX 79760-1148  
7008-1140-0004-6108-8925

John T Landreth  
P O Box 180  
Engle, CO 81631-0180  
7008-1140-0004-6108-8932

Mary Adele Landreth Trust  
504 Fort Worth Club Bldg  
306 West 7<sup>th</sup> Street Fort Worth, TX 76102-4905  
7008-1140-0004-6108-8949

R D Mellard Estate  
P O Box 1506  
Hope, NM 88250  
7008-1140-0004-6108-8956

Thomas Ausley Allison  
1122 Dogwood Rd  
Statesville, NC 28677-3463  
7008-1140-0004-6108-8963

Trust UWO Bettie, William, William Ir Rand & Allison Guess  
Trustee  
P O Box 4325 Rocky Mount, NC 27803  
7008-1140-0004-6108-8970

Clarence G Neal Jr  
3451 School Street  
Fortuna, CA 95540-3623  
7008-1140-0004-6108-8987

Phylliss M Wolfe  
P O Box 14432  
Phoenix, AZ 85063-4432  
7008-1140-0004-6108-8994

Hazel N Collins Family Trust - Texas Bank Attn Ed Fritz  
2525 Ridgemar Blvd, Ste 100  
Fort Worth, TX 76116  
7008-1140-0004-6108-9007

John Michael Esses  
10 Via Slano  
Rancho Santa Monica, CA 92688-1330  
7008-1140-0004-6108-9014

Ella Joan Neal Living Trust  
6235 E Sea Breeze Drive  
Long Beach, CA 90803  
7008-1140-0004-6108-9021

Florence B Clark Hall c/o Minerals Service Agent  
P O Box 244  
St Jacob, IL 62281-0244  
7008-1140-0004-6108-9038

Barbara C Larimore c/o Minerals Service Agent  
P O Box 244  
St Jacob, IL 62281-0244  
7008-1140-0004-6108-9045

Harold G Hartsock Living Trust – Harold G, Mary  
Louise Hartsock Trustees  
P O Box 1449 Sanford, FL 32772-1449  
7008-1140-0004-6108-9052

Helen Joy Smith c/o Adam B Smith, CPA  
5410 26<sup>th</sup> Street West  
Bradenton, FL 34207  
7008-1140-0004-6108-9069

Billie J David, Life Tenant  
P O Box 7706  
Midland, TX 79708  
7008-1140-0004-6108-9076

Edith A Shelton Marital Trust – Bill Shelton Trustee  
218 W Glen Eagles Road  
Statesville, NC 28625 Mesa, AZ 85202  
7008-1140-0004-6108-9083

Nedina S Clark Dupont c/o Horseshoe Investments  
P O Box 190811-6811  
St Louis, MO 63119  
7008-1140-0004-6108-9090

Babe Development LLC  
P O Box 758  
Roswell, NM 88202-0758  
7008-1830-0003-1986-3342

Riall S Moore  
124 Kelton Ave  
San Carlos, CA 94070  
7008-1830-0003-1986-3359

Shannon Moore  
124 Meirydale #136  
San Rafael, CA 94901  
7008-1830-0003-1986-3366

McBride Oil & Gas Corporation  
P O Box 1515  
Roswell, NM 88202-1515  
7008-1830-0003-1986-3373

Lobos Energy Partners LLC  
3817 NW Expressway, Ste 950  
OKC, OK 73112  
7008-1830-0003-1986-3380

Stephanie P Troth  
5714 E Acoma Drive  
Scottsdale, AZ 85254  
7008-1140-6108-8604

Robin Fredrick Hill  
1836 Shaded Wood  
Walnut, CA 971789  
7008-1830-0003-1986-2543

McCombs Energy Ltd  
5599 San Felipe, Ste 1200  
Houston, TX 77056  
7008-1140-6108-8901

Steven P Thompson  
P O Box 14596  
Odessa, TX 79768  
7008-1830-0003-1986-2536

Martha Watson Linnell  
3950 Copperfield Ridge CT  
Winston-Salem, NC 27106  
7008-1830-0003-1986-2529

Fred A Watson Jr  
5404 Crown Ridge Rd NW  
Albuquerque, NM 87114-5790  
7008-1830-0003-1986-2512

Patti Watson Leake  
7824 Osuna NE  
Albuquerque, NM 87109-3042  
7008-1140-0004-6107-8988

John N Eddy Trust – Jean C Eddy &  
Thomas B Catron III Trustees  
645 Camino Rancheros Santa Fe, NM 87505  
7008-1140-0004-6107-9138

Anne H Deal  
7044 50<sup>th</sup> Ave NE  
Seattle, WA 98115  
7008-1140-0004-6107-9145

Mary Virginia H Baer  
1101 Arlington Ridge Rd – Unit 402  
Arlington, VA 22202  
7008-1140-0004-6107-9152

Richard K Barr  
P O Box 847  
Boerne, TX 78006  
7008-1140-0004-6107-9169

Scott E Wilson  
4601 Mirador Drive  
Austin, TX 78735-1554  
7008-1140-0004-6107-9176

Cannon Exploration Company  
3608 S County Road 1184  
Midland, TX 79706-6468  
7008-1140-0004-6107-9244

Kathleen Irwin Schuster Separate Property  
3213 Pepperwood Ln  
Fort Collins, CO 80525-2944  
7008-1830-0003-1986-3335

Dan W Irwin Separate Property  
118 N Grant Street  
Hinsdale, IL 60521  
7008-1830-0003-1986-3328

Melinda Ann Benagh His Separate Property  
2007 Big Horn Drive  
Austin, TX 79734  
7008-1830-0003-1986-3311

John Eric Thickstun His Separate Property  
6672 Michael John Drive  
La Jolla, CA 92037  
7008-1140-0004-6108-8673

Mary Susan Thickston Her Separate Property  
5690 Arbor Grove CT  
San Diego, CA 92121  
7008-1140-0004-6108-8666

Thomas Lusk Thickston His Separate Property  
312 Foxglove  
Kyle, TX 78640  
7008-1140-0004-6108-8659

Patricia Benaugh White Her Separate Property  
806 Lari Dawn  
San Antonio, TX 78258  
7008-1140-0004-6108-8642

Jennifer Thickstun Fessler  
2557 Roscomare Road  
Los Angeles, CA 90077  
7008-1140-0004-6108-8635

Kathryn Ann Thickstun Leff  
3131 Xenophone Street  
San Diego, CA 92106-1537  
7008-1140-0004-6108-8628

Edward Landreth Smith  
1675 Hwy 591  
Dublin, TX 76446  
7008-1140-0004-6108-8611

Roger T & Holly L Elliot Family Lmted Prtnshp LP  
4105 Baybrook Drive  
Midland, TX 79707  
7008-1140-0004-6108-8567

Occidental Permian LP  
P O Box 4294  
Houston, TX 77210-4294  
7008-1140-0004-6108-8574

Joyco Investments LLC - Hanson Operation Co Inc  
P O Box 2104  
Roswell, NM 88202-2104  
7008-1140-0004-6108-8581

Estate of Lonye Marie Williams Deceased  
William T McGee Personal Rep  
1701 River Run Rd, Ste 501 Ft Worth, TX 76107-6548  
7008-1140-0004-6108-8598

## 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:

Norman L Stevens Jr Rev Trust  
P.O. Box 3087  
Roswell, NM 88202-3087

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2956

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Bobby Carroll

☒ Agent☐ Addressee

B. Received by (Printed Name)

Bobby Carroll

C. Date of Delivery

11-24-09

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:

Clarence G Neal Jr  
3451 School Street  
Fortuna, CA 95546

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8987

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Lillian Neal

☐ Agent☐ Addressee

B. Received by (Printed Name)

Lillian Neal

C. Date of Delivery

11-23-09

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:

Parrot Head Properties LLC  
Angela L Naranjo Registered  
P.O. Box 429 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2949

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Angela Naranjo

☐ Agent☐ Addressee

B. Received by (Printed Name)

ANGELA NARANJO

C. Date of Delivery

11-24-09

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:

J Brad & Debbi L Jeffers  
P.O. Box 2188  
Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2802

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

J. Brad Jeffers

C. Date of Delivery

11-24-09

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:

Gerald E & Emma Harrington Tr  
P.O. Box 3716  
Roswell, NM 88202

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2864

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

J. Brad Jeffers

C. Date of Delivery

11-24-09

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:

SSS Enterprises LLC  
P.O. Box 5422  
Hobbs, NM 88241

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2840

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Samuel S. Spencer

C. Date of Delivery

11-24-09

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:

Joseph A Tennant  
P.O. Box 382  
Marathon, TX 78942

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3281

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Thomas P. Lehr* ☒ Agent  
☐ Addressee

B. Received by (Printed Name)

Thomas P. Lehr

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:

Constance B Cartwright Trustee  
2444 Wilshire Blvd, Ste 508  
Santa Monica, CA 90403-5808

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3175

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Constance B Cartwright* ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Constance B Cartwright

C. Date of Delivery

11-23-09

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:

Richard J Forrest Jr  
208 Dickson Lane  
Carlsbad, NM 88220

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2796

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Richard J Forrest Jr* ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Richard J Forrest Jr

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:

Featherstone Development Corp  
P.O. Box 429  
Roswell, NM 88202

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

GINA YEAGER

C. Date of Delivery

11-24-09

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

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2710

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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:

Free Ride LLC  
P.O. Box 429  
Roswell, NM 88202

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

GINA YEAGER

C. Date of Delivery

11-24-09

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

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2963

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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:

Dillard Fisher & Dillard Pship  
415 West Wall STE 703  
Midland, TX 79701

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

Dillard Fisher

C. Date of Delivery

11-24

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

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2772

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## 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 Virginia H Baer  
1101 Arlington Ridge Rd -- Unit 402  
Arlington, VA 22202

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 9152

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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:

William Locke Allison III  
2641 Fines Creek Drive  
Statesville, NC 28625

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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:

Thomas Ausley Allison  
1122 Dogwood Rd  
Statesville, NC 28677-3463

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8963

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

7008-1140-0004-6108-8963

**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:

R D Mellard Estate  
P.O. Box 1506  
Hope, NM 88250

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ *Baylone Smith*☐ Agent☐ Addressee

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

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8956

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

David R Gannaway  
P.O. Box 2791  
Roswell, NM 88202

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ *Melissa Menally*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Melissa Menally*

C. Date of Delivery

*11-24-09*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)

7008 1830 0003 1986 3014

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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:

Larry Arnold  
P.O. Box 2253  
Hobbs, NM 88241-2253

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ *Larry Arnold*☐ Agent☐ Addressee

B. Received by (Printed Name)

*LARRY ARNOLD*

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

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2901

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

David G & Jean A Willis 1998 Trust  
98 Reservoir Road  
Atherton, CA 94027

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8826

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *David Willis* ☐ Agent  
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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:

Harle Inc.  
22230 SW Taylors Dr  
Tualatin, OR 97062

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2741

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Galeen Harle* ☐ Agent  
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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:

Harold G Hartsock Living Trust - Harold G. Mary  
Louise Hartsock Trustees  
P.O. Box 1449 Sanford, FL 32772-1449

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9052

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *David Willis* ☐ Agent  
☒ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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:

Barbe Development LLC  
P.O. Box 2107  
Roswell, NM 88202-2107

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3083

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Debra J. Jeffers

C. Date of Delivery

11/24/07

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:

Patti Watson Leake  
7824 Osuna NE  
Albuquerque, NM 87109-3042

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 8988

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☒ Addressee

B. Received by (Printed Name)

Patrick Leake

C. Date of Delivery

11-21-09

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:

Marbob Energy Corporation  
P.O. Box 227  
Artesia, NM 88211

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3106

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Marissa Villa

C. Date of Delivery

11-23-09

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 " or on the front if space permits.

1. Article Addressed to:

Joyco Investments LLC - Hanson Operation Co Inc  
P.O. Box 2104  
Roswell, NM 88202-2104

2. Article Number

(Transfer from service label)

7008 3140 0004 6108 8581

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Jan Starnes*☐ Agent☐ Addressee

B. Received by (Printed Name)

Jan Starnes

C. Date of Delivery

11-24-09

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:

Stanford University c/o Bank of America  
P.O. Box 840738  
Dallas, TX 75284-0738

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3120

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Stanford*☐ Agent☐ Addressee

B. Received by (Printed Name)

Stanford

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:

Fred A Watson Jr.  
5404 Crown Ridge Rd NW  
Albuquerque, NM 87114-5790

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2512

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Fred Watson Jr.*☐ Agent☐ Addressee

B. Received by (Printed Name)

Fred Watson Jr.

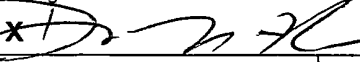
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

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 THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  </p> <p style="text-align: right;"> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee         </p>
<p>1. Article Addressed to:</p>	<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery  <b>11-23-09</b> </p>
<p>2. Article Number  <i>(Transfer from service label)</i> </p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No       </p>
<p>Lantana Oil Company          P.O. Box 1837          Roswell, NM 88202-1837</p>	<p>3. Service Type</p> <p> <input type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.         </p>
<p>4. Restricted Delivery? <input type="checkbox"/> Yes</p>	<p>5. Tracking Number  <b>7008 1986 2932</b> </p>

<p><b>SENDER: COMPLETE THIS SECTION</b></p> <p><input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0; text-align: center;">             David Donnelly Trust              P.O. Box 1150              Lebanon, MO 65536         </div> <p>2. Article Number _____              (Transfer from service label) <span style="float: right; font-family: monospace; font-size: 1.2em;">7008 1830 0003 1986 3304</span></p>	<p><b>COMPLETE THIS SECTION ON DELIVERY</b></p> <p>A. Signature _____  <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <span style="float: right;">1/23/09</span></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes              If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Certified Mail</td> <td><input type="checkbox"/> Express Mail</td> </tr> <tr> <td><input type="checkbox"/> Registered</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td><input type="checkbox"/> C.O.D.</td> </tr> </table> <p>4. Restricted Delivery? (Extra Fee) <span style="float: right;"><input type="checkbox"/> Yes</span></p>	<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail	<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail						
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise						
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.						

<p><b>SENDER: COMPLETE THIS SECTION</b></p> <ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> <hr/> <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin-top: 10px; min-height: 100px;"> <p>Permian Hunter Corporation          275 East South Temple STE 250          Salt Lake City, UT 84111</p> </div>	<p><b>COMPLETE THIS SECTION ON DELIVERY</b></p> <p>A. Signature _____  <b>X</b> </p> <p>B. Received by (Printed Name) <u>L. MATHIAS</u> C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number _____          (Transfer from service label)</p>	
<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Certified Mail</span> <span><input type="checkbox"/> Express Mail</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Registered</span> <span><input type="checkbox"/> Return Receipt for Merchandise</span> </div> <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Insured Mail</span> <span><input type="checkbox"/> C.O.D.</span> </div>	
<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

## 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:

McCombs Energy Ltd.  
5599 San Felipe, Ste 1200  
Houston, TX 77056

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8901

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

S McDonald

☐ Agent☒ Addressee

B. Received by (Printed Name)

S McDonald

C. Date of Delivery

11-23-09

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:

McCombs Energy Ltd  
5599 San Felipe, Ste 1200  
Houston, TX 77056

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2987

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

S McDonald

☐ Agent☒ Addressee

B. Received by (Printed Name)

S McDonald

C. Date of Delivery

11-23-09

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:

Gary W Darmon & Lynne Darmon  
P.O. Box 10  
Capitan, NM 88316

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2789

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

Lynne Darmon

☐ Agent☒ Addressee

B. Received by (Printed Name)

Lynne Darmon

C. Date of Delivery

11/23/09

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:

The THW & ADW Living Trust  
1763 Royal Oaks Dr N, #E305  
Bradbury, CA 91040-1999

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 8833

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

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:

Barbara C Larimore c/o Minerals Service Agent  
P.O. Box 244  
St. Jacob, IL 62281-0244

2. Article Number

(Transfer from service label)

7008 1140 0004 6108 9045

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

11-23-09

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:

Joan M Voigt  
7 Sherborne Wood  
San Antonio, TX 78218

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3090

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

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:

J E Cieszinski  
22 Riverside Drive  
Roswell, NM 88201

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2857

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*J E Cieszinski* ☐ Agent  
☒ Addressee

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:

J T Jackson & Associates  
2302 Sierra Vista  
Artesia, NM 88210-9409

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2758

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*J T Jackson* ☐ Agent  
☒ Addressee

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:

Steve W & Stacy D Lewis  
1807 Don Lewis Road  
Artesia, NM 88210-9340

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2819

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Nancy Holder* ☐ Agent  
☒ Addressee

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:

Todd M Wilson  
3608 S County Rd I184  
Midland, TX 79706-6468

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3113

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Dorothy Izard

☒ Agent☐ Addressee

B. Received by (Printed Name)

Dorothy Izard

C. Date of Delivery

11/21/09

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:

Cannon Exploration Company  
3608 S County Road 1184  
Midland, TX 79706-6468

2. Article Number

(Transfer from service label)

7008 1140 0004 6107 9244

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Dorothy Izard

☒ Agent☐ Addressee

B. Received by (Printed Name)

Dorothy Izard

C. Date of Delivery

11/21/09

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:

Lobos Energy Partners LLC  
3817 NW Expressway, Ste 950  
OKC, OK 73112

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3380

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Eric Olsen

☐ Agent☐ Addressee

B. Received by (Printed Name)

E Olsen

C. Date of Delivery

11/21/09

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:

Roger T & Holly L Elliott Family Lmtd Pishp LP  
4105 Baybrook Drive  
Midland, TX 79707

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 3076

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Holly Elliott* ☐ Agent ☐ Addressee

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:

Neeco Inc.  
P.O. Box 10847  
Midland, TX 79702

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2925

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Fred Schwenning* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Fred Schwenning 11-30-87

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:

Western Oil Producers Inc.  
P.O. Box 2800  
Midland, TX 79702-2800

2. Article Number

(Transfer from service label)

7008 1830 0003 1986 2734

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Fred Schwenning* ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Fred Schwenning 11-30-09

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 THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Wm. B. Shelton</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p>		<p>B. Received by (Printed Name) <i>William Shelton</i> C. Date of Delivery <i>11/30/09</i></p>	
<p>2. Article Number            (Transfer from service label) <b>7008 1140 0004 6108 9083</b></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt 102595-02-M-1540</p>	
<p>Edith A Shelton Marital Trust - Bill Shelton Trustee            218 W Glen Eagles Road            Statesville, NC 28625</p>		<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

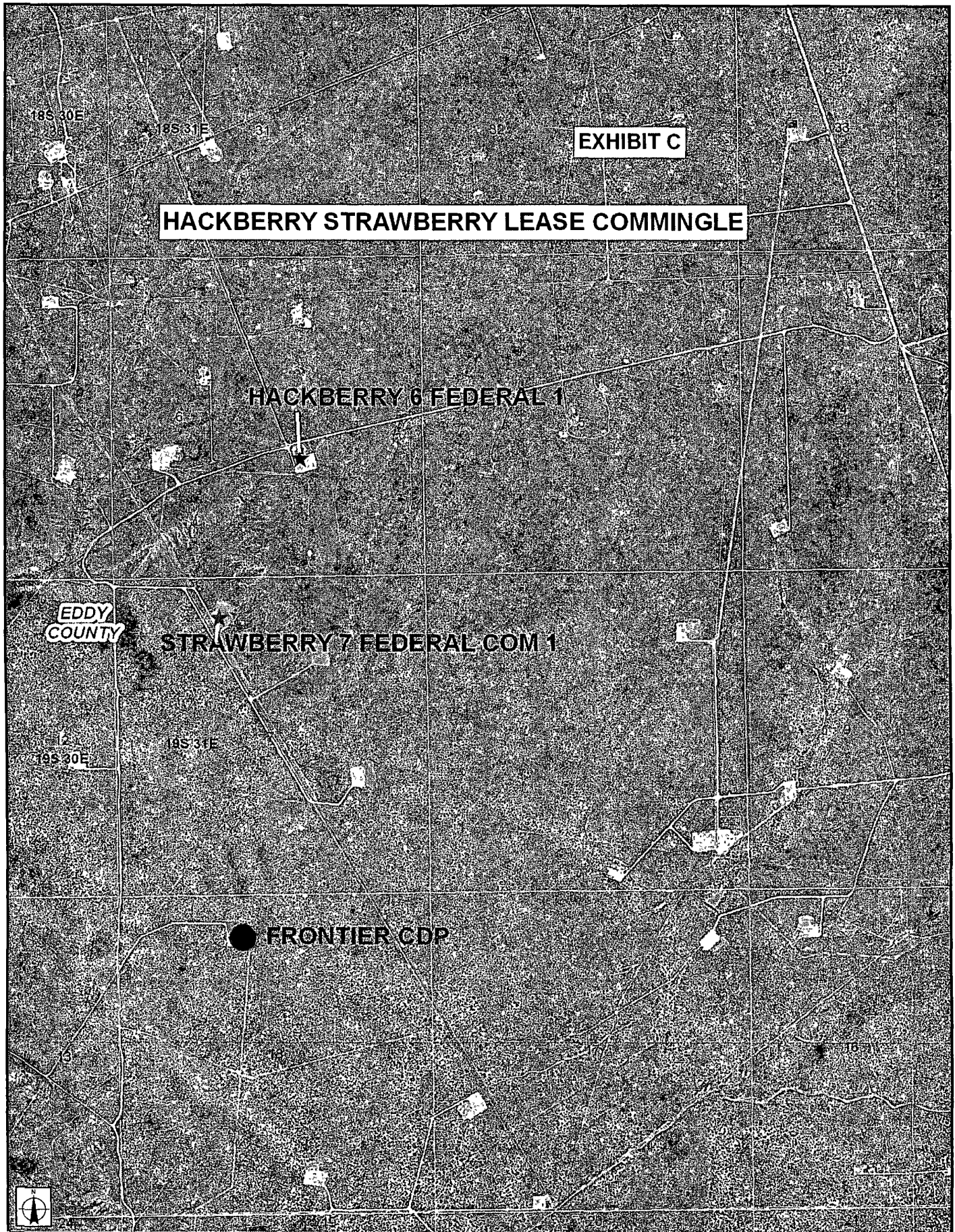
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Steve Thompson</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p>		<p>B. Received by (Printed Name) <i>STEVE THOMPSON</i> C. Date of Delivery <i>11-30-09</i></p>	
<p>Steven P. Thompson            P.O. Box 14596            Odessa, TX 79768</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number            (Transfer from service label) <b>7008 1830 0003 1986 2536</b></p>		<p>3. Service Type  <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt 102595-02-M-1540</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Jeannine Celery</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p>		<p>B. Received by (Printed Name) <i>Jeannine Celery</i> C. Date of Delivery <i>12-1-09</i></p>	
<p>PBR Properties Joint Venture            P.O. Box 2802            Midland, TX 79702</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>2. Article Number            (Transfer from service label) <b>7008 1830 0003 1986 3144</b></p>		<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt 102595-02-M-1540</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Rance C Miles</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Rance C Miles  P.O. Box 713  Artesia, NM 88211-0713</p> </div>	<p>B. Received by (Printed Name) <i>D.ance Miles</i> C. Date of Delivery <i>12-4-09</i></p>
<p>2. Article Number  <i>(Transfer from service label)</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>PS Form 3811, February 2004</p>	<p>3. Service Type  <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>Domestic Return Receipt</p>	
<p>102595-02-M-1540</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Beverly Barr</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Richard K Barr  P.O. Box 847  Boerne, TX 78006</p> </div>	<p>B. Received by (Printed Name) <i>Beverly Barr</i> C. Date of Delivery <i>12-4-09</i></p>
<p>2. Article Number  <i>(Transfer from service label)</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>
<p>PS Form 3811, February 2004</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>Domestic Return Receipt</p>	
<p>102595-02-M-1540</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Ineta Russell</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>James E Guy &amp; Peggy Guy Trustee of the P J Guy  Trustees of the Family Trust  604 S 17th Street Artesia, NM 88210</p> </div>	<p>B. Received by (Printed Name) C. Date of Delivery</p>
<p>2. Article Number  <i>(Transfer from service label)</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>PS Form 3811, February 2004</p>	<p>3. Service Type  <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>Domestic Return Receipt</p>	
<p>102595-02-M-1540</p>	



Strawberry 7 Federal #1  
 Sec 7, T19S, R31E  
 710FNL & 1090FWL  
 Eddy, N.M  
 API# 30-015-31876

Production System: Open


1) Oil sales by tank gauge to tank truck.


2) Seal requirements:

A Production Phase. On all Tanks.


(1) All valves 5 sealed closed

Sales Phase: On Tank being hauled.


(1) Valve 1 sealed closed. 

(2) Valve 3 sealed closed. 


(3) Valve 4 sealed closed. 


(4) Valve 5 sealed closed. 


(5) Misc Valves. Plugged or otherwise unaccessible.


NOTE. Valve 2 is either a test or roll line if there is a valve 2 it will be sealed closed. 


#### Ledger for Site Diagram

Valve #1: Production Line 

Valve #2: Test or Roll line 

Valve #3: Equalizer Line 

Valve #4: Circ / Drain Line 

Valve #5: Sales Line 

Valve #6: BS&W Load Line 

Buried Lines: -----

Firewall: 

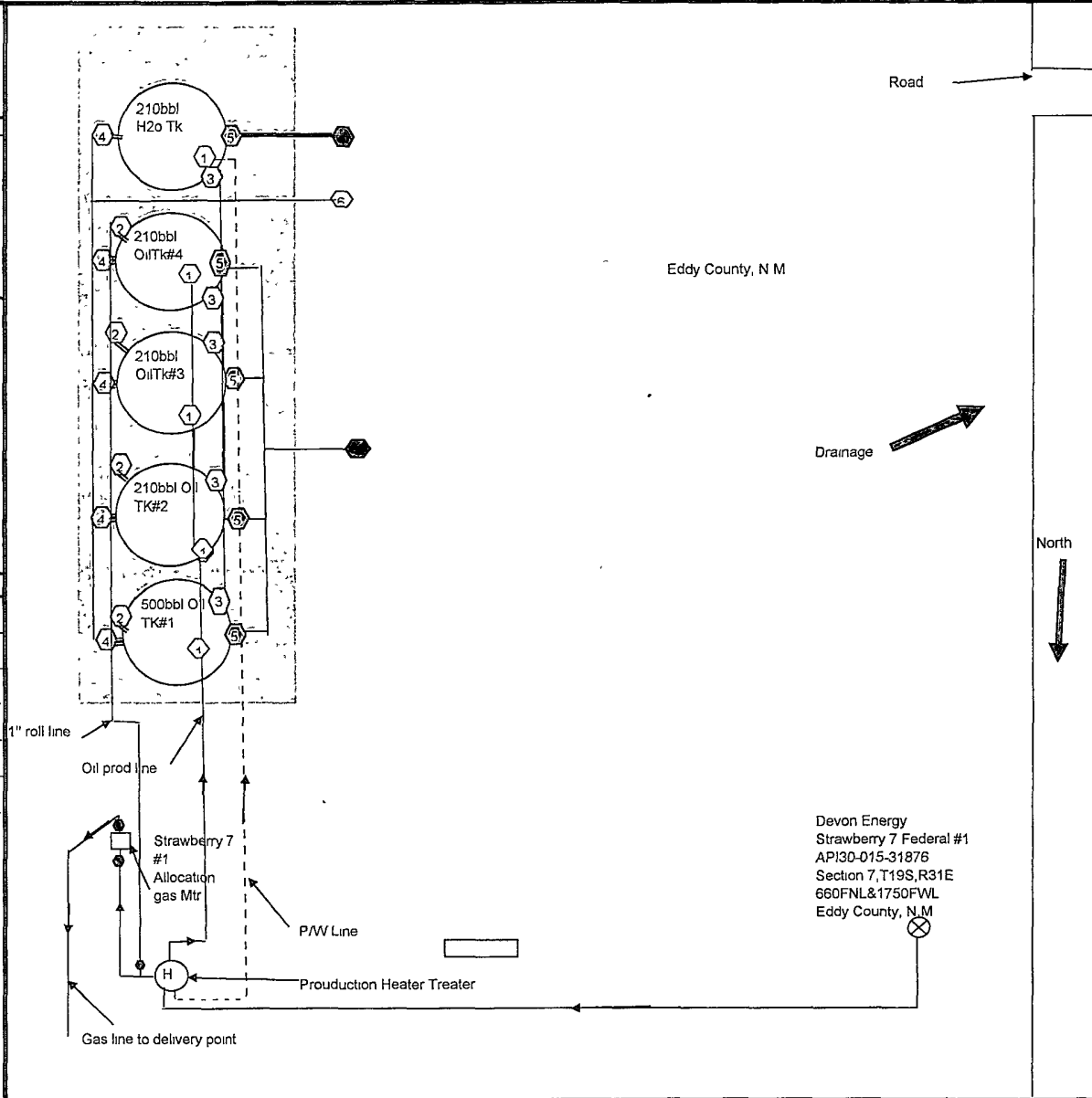
Wellhead: 

Stak-pak: 

Production line: -----

Water line: -----

Gas Meter   



Hackberry 6 Federal #1  
Section 6, T19S,R31E  
1980FSL&1980FEL  
Eddy County, N.M  
API# 30-015-31020

Production System: Open

- 1) Oil sales by tank gauge to tank truck.
- 2) Seal requirements

A. Production Phase: On all Tanks.

(1) All valves 5 sealed closed.

Sales Phase On Tank being hauled.

(1) Valve 1 sealed closed. 1

(2) Valve 3 sealed closed. 3

(3) Valve 4 sealed closed. 4

(4) Valve 5 sealed closed. 5

(5) Misc. Valves: Plugged or otherwise  
unaccessible

NOTE: Valve 2 is either a test or roll line  
if there is a valve 2 it will be sealed  
closed. 2

#### Ledger for Site Diagram

Valve #1: Production Line 1

Valve #2: Test or Roll line 2

Valve #3: Equalizer Line 3

Valve #4: Circ /Drain Line 4

Valve #5: Sles Line 5

Valve #6: BS&W Load Line 6

Buried Lines: -----

Firewall. 

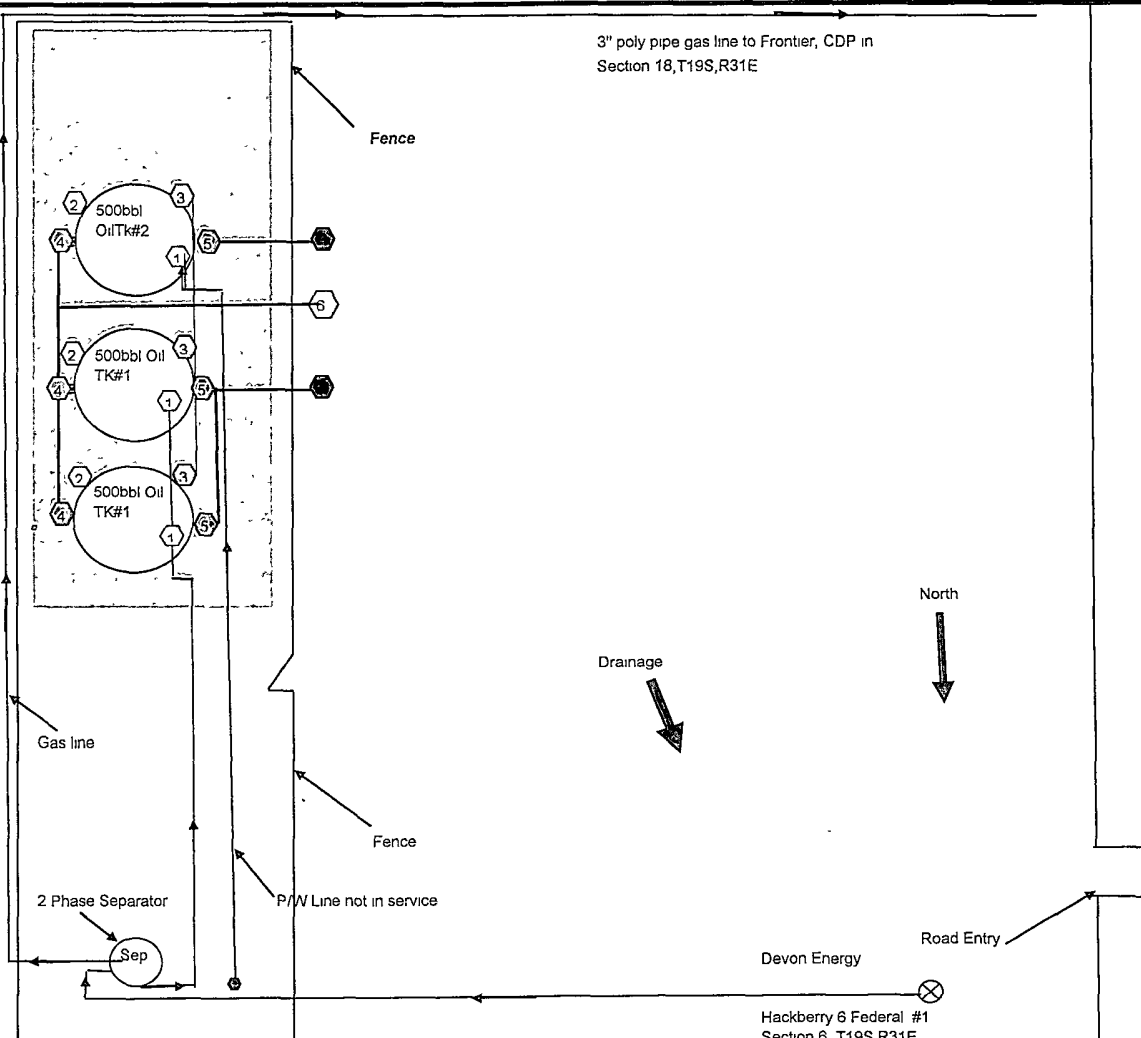
Wellhead: 

Stak-pak: 

Production line: -----

Water line: -----

Gas Meter   



# Varian Star Chromatography Workstation

7

## Natural Gas Analysis Report

<b>Run File</b>	C:\STAR\DATA\DEVON13_9;19;37 AM_2-16-09_RUN		
<b>Method</b>	C:\Star\BTUC6+.mth		
<b>Operator</b>	Precision Gas Meas	<b>Analysis Date</b>	2/16/09
<b>Station #</b>	06065001	<b>Company</b>	DEVON ENERGY
<b>Lease</b>	HACKBERRY 6-1	<b>Pulled Data</b>	2/13/09 PRESS 46 TEMP 29
<b>Producer</b>	DEVON ENERGY	<b>Water (lbs)</b>	

<u>Component</u>	<u>Mole %</u>	<u>BTU</u>	<u>GPM</u>
H2S	0.0020	0.01	0.0000
nitrogen	2.6924	0.00	0.0000
methane	69.8548	707.17	0.0000
propane	7.4048	186.74	2.0404
i-butane	0.9298	30.31	0.3042
n-butane	2.5092	82.04	0.7911
carbon dioxide	0.3468	0.00	0.0000
i-pentane	0.6611	26.51	0.2420
n-pentane	0.7294	29.31	0.2642
ethane	13.5728	240.74	3.6301
hexane+	1.2969	65.85	0.5572
<b>Totals</b>	100.0000	1,368.68	7.8292

<b>Relative Density from Composition</b>	0.8202
<b>BTUs @ 14.65 Saturated</b>	1,351
<b>BTUs @ 14.65 Dry</b>	1,375
<b>Compressibility</b>	0.99543

2/16/09



## Laboratory Services, Inc.

2609 West Marland  
Hobbs, New Mexico 88240

Telephone: (575) 397-3713

A

FOR: Devon Energy  
P.O. Box 250  
Artesia, New Mexico 88211-0250

SAMPLE: Sta. # 677-33-066  
IDENTIFICATION Strawberry 7 Fed. Com. #1  
COMPANY: Devon Energy  
LEASE:  
PLANT:

SAMPLE DATA: DATE SAMPLED. 11/17/08 12:00 pm  
ANALYSIS DATE: 11/20/08  
PRESSURE - PSIA 68  
SAMPLE TEMP. °F 90  
ATMOS. TEMP. °F

GAS (XX) LIQUID ( )  
SAMPLED BY: Jared Pittman/AFM  
ANALYSIS BY: Vickie Sullivan

REMARKS: H2S = 0

## COMPONENT ANALYSIS

COMPONENT	MOL PERCENT	GPM
Hydrogen Sulfide (H2S)	0.000	
Nitrogen (N2)	2.606	
Carbon Dioxide (CO2)	0.092	
Methane (C1)	70.382	
Ethane (C2)	13.425	3.582
Propane (C3)	7.658	2.105
I-Butane (IC4)	0.951	0.310
N-Butane (NC4)	2.585	0.813
I-Pentane (IC5)	0.642	0.234
N-Pentane (NC5)	0.663	0.240
Hexane Plus (C6+)	<u>0.996</u>	<u>0.432</u>
	100.000	7.716
BTU/CU.FT. - DRY	1356	MOLECULAR WT. 23.3917
AT 14.650 DRY	1352	
AT 14.650 WET	1328	
AT 14.73 DRY	1359	
AT 14.73 WET	1336	
SPECIFIC GRAVITY -		
CALCULATED	0.806	
MEASURED		

## OFF LEASE PRODUCTION - EDDY COUNTY

	01/01/09	02/01/09	03/01/09	04/01/09	05/01/09	06/01/09	07/01/09	08/01/09	09/01/09
Well Name	Sum Est Gas	Sum Est Gas	Sum Est Gas	Sum Est Gas	Sum Est Gas	Sum Est Gas	Sum Est Gas	Sum Est Gas	Sum Est Gas
HACKBERRY 6 FED 1	212	248	91	90	168	173	167	231	242
STRAWBERRY 7 FED 1	1,131	1,031	1,099	1,282	1,287	1,136	1,158	1,613	1,257

**Bureau of Land Management  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972**

**Off-Lease Measurement, Storage and Surface Commingling**

**Conditions of Approval**

Approval of surface commingling and off-lease sales and/or measurement is subject to the following conditions of approval:

1. This agency shall be notified of any change in sales method or location of sales point.
2. This agency shall be notified of any spill or discharge as required by NTL-3A.
3. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
4. This approval is subject to like approval by the New Mexico Oil Conservation Division.
5. Additional wells and/or leases require additional commingling approvals.
6. This approval does not constitute right-of-way approval for any off-lease activities. Within 30 days, an application for right-of-way approval must be submitted to the Realty Section if not already done.
7. Approval for combining production from various sources is a privilege which is granted to lessees for the purpose of aiding conservation and extending the economic life of leases. Applicants should be cognizant that failure to operate in accordance with the provisions outlined in the Authorized Officer's conditions of approval and/or subsequent stipulations or modifications will subject such approval to revocation.
8. All above-ground structures not subject to safety requirements shall be painted by the holder to blend with the natural color of the landscape. The paint used shall be color which simulates "standard Environmental Colors" – Shale Green, Munsell Soil Color No. 5Y 4/2.
9. If any additional wells are added to this CDP, a gas meter will have to be installed on the Hackberry 6 Federal # 1, after commingling approval has been submitted for additional wells.