

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:

Cornish Plains Livestock, LLLP
1601 44th Avenue, Ct Unit 1
Greeley, CO 80634-3354

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☒ *Marys Brown* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Marys Brown* C. Date of Delivery *7-23*

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

1601 44th Ave, Ct Unit 1, Greeley, CO 80634

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Transfer from service label) **7014 0510 0000 9464 8984**

PS Form 3811, July 2013 Domestic Return Receipt



U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

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

Postmark Here

Sent To *Ruth M. Wilson*
Street Apt. No. *33830 CR 615*
or PO Box No. *GILL, CO 80624*
City, State, Zip+4

PS Form 3800, August 2005 See Reverse for Instructions

CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com

OFFICIAL USE

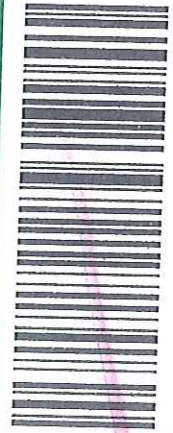
Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	

Postmark Here

Sent To *Cornish Plains Livestock, LLLP*
Street Apt. No. *1601 44th Ave, Ct Unit 1*
or PO Box No. *Greeley, CO 80634-3354*
City, State, Zip+4

PS Form 3800, August 2005 See Reverse for Instructions

CERTIFIED MAIL™



714 0510 0000 9464 8922

Ruth M. Wilson
33830 County Road 61.5
Gill CO 80624

NIXIE 503 SE 1009 0008/06/15
RETURN TO SENDER
UNCL AIMED
UNABLE TO FORWARD
BC: 80401328450 *1420-00260-14-39

US POSTAGE
FIRST-CLASS
062S0009055847
50401
\$6.74 0
S7912.019

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:

Parry Peppler
33427 Faith Lane
Eaton, CO 80615

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)
7/16/15

C. Date of Delivery

☐ Yes
☐ No

D. Is delivery address different from item 1?
If YES, enter delivery address below:

2. Article Number
(Transfer from service label)
7014 0510 0000 9464 8946

Domestic Return Receipt
PS Form 3811, July 2013

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

Postmark Here

Sent To
Parry Peppler
Street, Apt. No.,
or PO Box No. 33427 FAITH LANE
City, State, ZIP+4®
EATON, CO 80615

PS Form 3800, August 2006
See Reverse for Instructions

CERTIFIED MAIL™

7014 0510 0000 9464 8946

0000 9464 8946

0000 9464 8946

\$6.74 0

US POSTAGE
FIRST-CLASS
062S00009056847
90401

S7912.020

State of Colorado
600 Grant Street
Suite 640
Denver, CO 80203-3527

50203352765

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Donald & Deana Lutze
33505 CR 61.75
Gill, CO 80624

2. Article Number (Transfer from service label)
7014 0510 0000 9464 8960

PS Form 3811, July 2013

Domestic Return Receipt

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

5. Signature ☒ Agent ☐ Addressee
X Donald Lutze

6. Received by (Printed Name)
7/7/13

7. Date of Delivery

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

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

For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

Postmark Here

Sent To
Donald & Deana Lutze
Street, Apt. No., or PO Box No. 33505 CR 61.75
City, State, ZIP+4 Gill, CO 80624

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Robert Wilson
33727 Highway 392
Gill, CO 80624-9338

2. Article Number (Transfer from service label)
7014 0510 0000 9464 8939

PS Form 3811, July 2013

Domestic Return Receipt

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

5. Signature ☒ Agent ☐ Addressee
X Robert Wilson

6. Received by (Printed Name)
7/16/13

7. Date of Delivery

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

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

For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

Postmark Here

Sent To
Robert Wilson
Street, Apt. No., or PO Box No. 33727 Highway 392
City, State, ZIP+4 Gill, CO 80624-9338

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Jill Kushenski & Keith Miller
33669 Cr 61.75
Gill, CO 80624-9339

2. Article Number (Transfer from service label) 7014 0510 0000 9464 8953

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Jill Kushenski* ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

If YES, enter delivery address below:

3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

Postmark Here

Sent To *Jill Kushenski & Keith Miller*
Street, Apt. No., *33669 CR 61.75*
or PO Box No.
City, State, ZIP+4 *Gill, CO 80624-9339*

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Clifford & Linda Jung
33727 CR 61.75
Gill, CO 80624

2. Article Number (Transfer from service label) 7014 0510 0000 9464 8991

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Clifford Jung* ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery *7/6/13*

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

If YES, enter delivery address below:

3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

Postmark Here

Sent To *Clifford & Linda Jung*
Street, Apt. No., *33727 CR 61.75*
or PO Box No.
City, State, ZIP+4 *Gill, CO 80624*

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

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

Sent to Trey Beghtol
Street, Apt. No., 33726 CR 61.5
or PO Box No.
City, State, ZIP+4 Gill, CO 80624

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®
OFFICIAL USE

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

Sent to David T Kirby Moore
Street, Apt. No., 33674 CR 61.5
or PO Box No.
City, State, ZIP+4 Gill, CO 80624

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Trey Beghtol
33726 CR 61.5
Gill, CO 80624

2. Article Number (Transfer from service label) 7014 0510 0000 9464 7758
PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Trey Beghtol ☐ Agent ☐ Addressee

B. Received by (Printed Name) TREY BEGHTOL C. Date of Delivery

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

3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
David & Kirby Moore
33674 CR 61.5
Gill, CO 80624

2. Article Number (Transfer from service label) 7014 0510 0000 9464 8977
PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Kirby Moore ☐ Agent ☒ Addressee

B. Received by (Printed Name) Kirby Moore C. Date of Delivery 7/29/15

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

3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

Print Date: 7/14/2015 9:41:56 AM
User: ipt2014
Cost Code:

Stamps: 1
Weight: 0 lbs 1 oz
Class/Service: First Class ®
Refund Type: Mail-in

Class/Service: First Class ®	\$0.49
Special Services: Certified Mail ®	\$3.45
Return Receipt	\$2.80

Total Postage Per Stamp: \$6.74

TOTAL COST:

\$6.74

7014 0510 0000 4446 4092

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$.49
Certified Fee	3.45
Return Receipt Fee (Endorsement Required)	2.80
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.74
Sent To <u>Francisca Pedroza Oliva</u>	
Street, Apt. No., or PO Box No. <u>P.O. Box 3255</u>	
City, State, ZIP+4 <u>CARLSBAD, NM 88221-3255</u>	
PS Form 3800, August 2006 See Reverse for Instructions	

Postmark
Here

NOTHING WAS
RETURNED

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

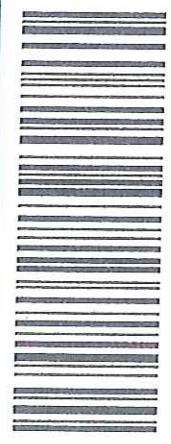
For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Postmark
Here

Sent To
Anadarko Land Co
Street and Apt. No., or PO Box No.
1675 Broadway
City, State, ZIP+4®
DENVER, CO 80202
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



7015 0640 0003 4769 2541

Anadarko Land Co., LP
1675 Broadway
Denver, CO 80202

\$6.74 0
US POSTAGE
FIRST-CLASS
062S0009056347
80401
S77912.023

NIXIE 802 SE 1009 0007/22/15
RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD
SC: 80401323450 *1420-00520-14-30

82421 03284
80202 4769 2541

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. **Bayswater** Exploration & Production, LLC
- 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:
Bayswater Exploration & Production, LLC
73017th Street
Suite 610
Denver, CO 80202

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
Received
B. Recipient (Name) ☐ Addressee
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes ☐ No

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)
7015 0640 0003 4769 2565
Domestic Return Receipt
PS Form 3811, July 2013

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Postmark
Here

Sent To
Bayswater Exp & Pro
Street and Apt. No., or PO Box No.
73017th Street, Ste. 610
City, State, ZIP+4®
DENVER CO 80202
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) \$
Return Receipt (electronic) \$
Certified Mail Restricted Delivery \$
Adult Signature Required \$
Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Blue & Gray Resources
8614 N. Sundown Trail
Parker, CO 80134
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only
For delivery information, visit our website at www.usps.com®.
OFFICIAL USE
Certified Mail Fee
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) \$
Return Receipt (electronic) \$
Certified Mail Restricted Delivery \$
Adult Signature Required \$
Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$
Sent To Great Western Oper.
252 Clayton St. 4th Floor
Denver, CO 80202
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.
1. Article Addressed to:
Blue & Gray Resources, Inc.
8614 N. Sundown Trail
Parker, CO 80134
2. Article Number (Transfer from service label) 7015 0640 0003 4769 2558
PS Form 3811, July 2013 Domestic Return Receipt
COMPLETE THIS SECTION ON DELIVERY
A. Signature [Signature]
B. Received by (Printed Name) C. Date of Delivery
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:
3. Service Type
Certified Mail® Priority Mail Express™
Registered Return Receipt for Merchandise
Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes No

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:
Great Western Operating Co., LLC
252 Clayton Street
4th Floor
Denver, CO 80202
2. Article Number (Transfer from service label) 7015 0640 0003 4769 2572
PS Form 3811, July 2013 Domestic Return Receipt
COMPLETE THIS SECTION ON DELIVERY
A. Signature [Signature]
B. Received by (Printed Name) C. Date of Delivery
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:
3. Service Type
Certified Mail® Priority Mail Express™
Registered Return Receipt for Merchandise
Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes No

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:

Grizzly Petroleum Co., LLC
1801 Broadway, Suite 500
Denver, CO 80202

2. Article Number
(Transfer from service label)

7015 0640 0003 4769 2589

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
J. Hill 7.16.13

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

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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:

JWL Investment, LLC
351 Glencoe Street
Denver, CO 80220

2. Article Number
(Transfer from service label)

7015 0640 0003 4769 2596

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature  ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

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

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage Here \$

Total Postage and Fees \$

Sent To Grizzly Pet. Co.
Street and Apt. No., or PO Box No. 1801 Broadway, Ste. 500
City, State, ZIP+4® DENVER CO 80202

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage Here \$

Total Postage and Fees \$

Sent To JWL Investment
Street and Apt. No., or PO Box No. 351 Glencoe St.
City, State, ZIP+4® DENVER CO 80220

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Kerr-McGee Oil & Gas Onshore
Street and Apt. No., or PO Box No. 1615 Broadway, Ste. 1200
City, State, ZIP+4® DENVER, CO 80202

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To KBL Mineral
Street and Apt. No., or PO Box No. 410 17th St. Ste. 1150
City, State, ZIP+4® DENVER CO 80202

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Kerr-McGee Oil & Gas Onshore
1675 Broadway
Suite 1200
Denver, CO 80202

2. Article Number (Transfer from service label) **7015 0640 0003 4769 2510**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent

B. Received by (Printed Name) The Corporation Company
1675 Broadway, Ste. 1200
Denver, CO 80202

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

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

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:
KBL Mineral Co., LLC
410 17th Street
Suite 1150
Denver, CO 80202

2. Article Number (Transfer from service label) **7015 0640 0003 4769 2602**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent

B. Received by (Printed Name) McGee
410 17th St
2/16/13

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

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

0152 6924 E000 0490 5102

2092 6924 E000 0490 5102

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Noble Energy, Inc.
1675 Broadway
Suite 1200
Denver, CO 80202

2. Article Number (Transfer from service label)
7014 0510 0000 9464 7765

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X The Corporation Company
1675 Broadway, Ste. 1200
B. Received by (Printed Name)
CO 80202 of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
For delivery information visit our website at www.usps.com®

OFFICIAL USE

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

Postmark Here

Sent To
Noble Energy
Street, Apt. No. 1675 Broadway, Ste. 1200
City, State, ZIP+4 DENVER, CO 80202
PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
PDC Energy, Inc.
1775 Sherman Street
Suite 3000
Denver, CO 80203

2. Article Number (Transfer from service label)
7014 0510 0000 9464 7772

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Monique Longoria
B. Received by (Printed Name)
C. Date of Delivery
7-16-13
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below:

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes

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

Postmark Here

Sent To
PDC Energy, Inc.
Street, Apt. No. 1775 Sherman St, Ste 3000
City, State, ZIP+4 DENVER, CO 80203
PS Form 3800, August 2006 See Reverse for Instructions

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

Sent To Redstone Partners
Street, Apt. No. 6768 S. Queen Rd.
or PO Box No. LITTLETON, CO 80127
City, State, ZIP+4[®]

Postmark Here

PS Form 3800, August 2006 See Reverse for Instructions

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OFFICIAL USE

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

Sent To Suncor Energy USA
Street, Apt. No. 717 17th Street, Suite 2900
or PO Box No. DENVER, CO 80202
City, State, ZIP+4[®]

Postmark Here

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Redstone Partners, LLC
6768 South Queen Road
Littleton, CO 80127

2. Article Number (Transfer from service label) **7014 0510 0000 9464 7550**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) Jill Lov C. Date of Delivery Jul 19 2010

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

3. Service Type
☐ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Suncor Energy USA, Inc.
717 17th Street
Suite 2900
Denver, CO 80202

2. Article Number (Transfer from service label) **7014 0510 0000 9464 7567**

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Kelly Saffan ☒ Agent ☐ Addressee

B. Received by (Printed Name) Kelly Saffan C. Date of Delivery

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

3. Service Type
☐ Certified Mail[®] ☐ Priority Mail Express[™]
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

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:

Swan Exploration, LLC
8100 E. Maplewood Avenue
Suite 240
Greenwood Village, CO 80111

2. Article Number (Transfer from service label) 7014 0510 0000 9464 7574

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 7/16/15

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

If YES, enter delivery address below:

3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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OFFICIAL USE

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Postmark Here

Sent To Swan Exploration
Street, Apt. No., 8100 E. Maplewood Ave., Ste. 240
City, State, ZIP+4 GREENWOOD VILLAGE, CO 80111

PS Form 3800, August 2006 See Reverse for Instructions

7014 0510 0000 9464 7574

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:

Wolf Point Exploration, LLC
215 West Oak Street
Suite 900
Fort Collins, CO 80521

2. Article Number (Transfer from service label) 7014 0510 0000 9464 7581

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery Robert Messing 7/16/15

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

If YES, enter delivery address below:

3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7014 0510 0000 9464 7581

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Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Postmark Here

Sent To Wolf Point Expl.
Street, Apt. No., 215 W. Oak St., Ste 900
City, State, ZIP+4 FORT COLLINS, CO 80521

PS Form 3800, August 2006 See Reverse for Instructions

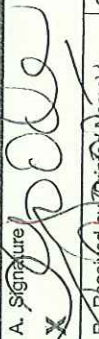
SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

WYOTEX Oil Company
P.O. Box 280969
Lakewood, CO 80228

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  ☒ Agent ☐ Addressee
- B. Received by Printed Name C. Date of Delivery 7/27/13
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☐ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Transfer from service label) 7015 0640 0003 4769 2534

PS Form 3811, July 2013

Domestic Return Receipt

4552 6924 E000 0640 5T02

U.S. Postal Service
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OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

Total Postage and Fees

Sent To Wyotex Oil Comp.
Street and Apt. No. P.O. Box 280969
City, State, Zip+4® LAKEWOOD, CO 80228

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark
Here