CERTIFICATE OF MAILING

I hereby certify that I caused a true and correct copy of the foregoing LETTER to be mailed by certified mail, postage prepaid, the 17th day of May, 1991 to:

Alan W. Smith, President
North American Equities, Ltd.
15851 Dallas Parkway #675
Dallas, Texas 75248

Lydia O. Sletvold
United Bank of Denver
1700 Broadway
Denver, Colorado 80274-0085

North American Equities, Ltd.
Kontorsenteret Aker Brygge
Stranden 1 Oslo 1
Norway

Raymond D. McCall
Irizarry & McCall, P.C.
Suite 2323
One United Bank Center
1700 Lincoln Street
Denver, Colorado 80201

Jill R. Hodge
1401 17th Street, Suite 1600
Denver, Colorado 80202

Nils K. Hillestad
1401 17th Street, Suite 1600
Denver, Colorado 80202

Aage Oxholm
1401 17th Street, Suite 1600
Denver, Colorado 80202

Jack Otani
HCR Box 840
Sells, Arizona 85634

Lynda S. Jenson

Lynda S. Jenson

KK DNOG

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO." Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.
1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)* 2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:
Jill R. Hodge
1401 17th Street, Suite 1600
Denver CO 80202

4. Article Number
R 074 919 901

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X J Smith

6. Signature — Agent
X

7. Date of Delivery
6-6-91 mg

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form **3811**, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address and ZIP Code in the space below.
- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

HOLYOKE, CO PM JUN 11 1991 80734

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

~~STATE OF UTAH~~
NATURAL RESOURCES
~~OIL, GAS, & MINING~~
3 TRIAD CENTER, SUITE 350
~~SALT LAKE CITY, UTAH 84180-1203~~

All Entries MUST Be in Ball Point or Typed

REGISTERED NO. R 454 049 014

POSTMARK OF P.O. NO. 8 SALT LAKE CITY MAY 22 1991 USPO

Post Office Completion			
Reg. Fee	$ 4.40	Special Delivery	$
Handling Charge	$	Return Receipt	$ 1.00
Postage	$ 1.73	Restricted Delivery	$
Received by		☒ Intl	

Customer Completion (Please Print)
Customer must declare Full value $ ☐ With Postal Insurance ☐ Without Postal Insurance $25,000 Domestic Ins. Limit

FROM
Division of Oil, Gas and Mining
355 W North Temple, 3 Triad Center
Salt Lake City Utah ZIP CODE 84180

TO
North American Equities. Ltd
Kontorsenteret Aker Brygge
Stranden 1 Oslo 1 NORWAY ZIP CODE

KK DNOG

PS FORM 3806 Apr. 1985 RECEIPT FOR REGISTERED MAIL *(Customer Copy)*
(See Information on Reverse)

Save This Receipt For Registered Mail Claims & Inquiries

DECLARATION OF VALUE—Mailers are required to declare the FULL value at the time of mailing on all registered mail articles, whether insurance is desired or not. Failure to declare full value may invalidate any claim.

INSURANCE—Domestic Postal insurance may be purchased by paying the appropriate fee. Domestic insurance on registered mail is limited to the lesser of (1) the value of the article at the time of mailing or the cost or replacement if lost or totally damaged, or (2) the cost of repairs. An article may also be sent by registered mail without postal insurance by paying the appropriate fee. No indemnity will be paid for articles mailed without Postal insurance coverage. Consult your postmaster for additional details of insurance limits and coverage for domestic and international registered mail.

FILING CLAIMS—Claim must be filed within 1 year from the date of mailing. Present this receipt and submit evidence of value, cost of repairs, or cost of duplication. The contents and packing must be presented when filing a claim for damage or loss of contents. Appeals of Postal Service decisions on claims must be filed within 3 months of the date of the original decision. Inquiries on registered claims may be filed provided at least 3 months but not more than 6 months have elapsed since the date the original claim was filed. Duplicate claims must not be initiated without authorization from the St. Louis PDC, or the Office of Mail Classification, USPS Headquarters.

INTERNATIONAL REGISTERED MAIL—Indemnity coverage for International Registered Mail is limited. Consult postmaster for maximum indemnity limits.

PS Form **3806**, Apr. 1985 (Reverse Part 1)

KK DNG

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

Nils K. Hillestad
1401 17th Street, Suite 1600
Denvero CO 80202

4. Article Number
P 014 979 998

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X Smith

6. Signature — Agent
X

7. Date of Delivery
4-6-91 MG

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address and ZIP Code in the space below.
• Complete items 1, 2, 3, and 4 on the reverse.
• Attach to front of article if space permits, otherwise affix to back of article.
• Endorse article "Return Receipt Requested" adjacent to number.

HOLYOKE, CO
PM
JUN 11
1991
80734

PENALTY FOR PRIVATE USE, $300

RETURN TO
Print Sender's name, address, and ZIP Code in the space below.

STATE OF UTAH
NATURAL RESOURCES
OIL, GAS, & MINING
3 TRIAD CENTER, SUITE 350
SALT LAKE CITY, UTAH 84180-1203

RE DNOM INA1007/021

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

Aage Oxholm
1401 17th Street, Suite 1600
Denver CO 80202

4. Article Number: P 074 979 989

Type of Service:
- ☐ Registered
- ☒ Certified
- ☐ Express Mail
- ☐ Insured
- ☐ COD
- ☒ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X J Smith

6. Signature — Agent
X

7. Date of Delivery
6.6.91 MG

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address and ZIP Code in the space below.
- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

STATE OF UTAH
NATURAL RESOURCES
OIL, GAS, & MINING
3 TRIAD CENTER, SUITE 350
SALT LAKE CITY, UTAH 84180-1203

HOLYOKE, CO
PM
JUN 71
1991
80734

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

Alan W. Smith, President
North American Equities, Ltd.
15851 Dallas Parkway #675
Dallas TX 75248

4. Article Number: P 879 595 996

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X [signature]

7. Date of Delivery
05/24/91

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address and ZIP Code in the space below.
- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

STATE OF UTAH
NATURAL RESOURCES
OIL, GAS, & MINING
3 TRIAD CENTER, SUITE 350
SALT LAKE CITY, UTAH 84180-1203

P 879 595 996

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

KK DN69

Sent to Alan W. Smith	
Street and No. North American Equities, Ltd 15851 Dallas Parkway #675	
P.O., State and ZIP Code Dallas TX 75248	
Postage	$ 29
Certified Fee	100
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	200
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 229
Postmark or Date	

PS Form 3800, June 1985

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry.

U.S.G.P.O. 1987-197-722

KK DNL09 (NH/001/021)

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to: Jack Otani HCR Box 840 Sells AZ 85634	4. Article Number P 074 979 990 Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail ☒ Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address *(ONLY if requested and fee paid)*
6. Signature — Agent X Nancy Ramon	
7. Date of Delivery 5-24-91	

PS Form **3811**, Mar. 1988 ★ U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS
Print your name, address and ZIP Code in the space below.
- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO ➡ Print Sender's name, address, and ZIP Code in the space below.

STATE OF UTAH
NATURAL RESOURCES
OIL, GAS, & MINING
3 TRIAD CENTER, SUITE 350
SALT LAKE CITY, UTAH 84180-1203

KK DNL09

P 074 979 990

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to Jack Otani	
Street and No. HCR Box 840	
P.O., State and ZIP Code Sells AZ 85634	
Postage	$ 29
Certified Fee	100
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	100
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ 2.29
Postmark or Date	

PS Form 3800, June 1985

Fold at line over top of envelope to the right of the return address.

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article RETURN RECEIPT REQUESTED adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry. U.S.G.P.O. 1988-212-132

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. *(Extra charge)*
2. ☐ Restricted Delivery *(Extra charge)*

3. Article Addressed to:

Raymond McCall
Irizarry & McCall, P.C.
Suite 2323
One United Bank Center
1700 Lincoln Street
Denver CO 80201

4. Article Number: P 074 979 986

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Address
X

6. Signature — Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.
- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

U.S.MAIL

PENALTY FOR PRIVATE USE, $300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

STATE OF UTAH
NATURAL RESOURCES
OIL, GAS, & MINING
3 TRIAD CENTER, SUITE 350
SALT LAKE CITY, UTAH 84180-1203

P 074 979 986

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to	Raymond D. McCall
Street and No.	Irizarry & McCall, P.C.
	1700 Lincoln Street Ste2323
P.O., State and ZIP Code	Denver CO 80201
Postage	$ .29
Certified Fee	.100
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	.100
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$ .29
Postmark or Date	

KL DNR9

PS Form 3800, June 1985

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address, saving the receipt attached and present the article at a post office service window or hand it to your rural carrier (no extra charge).

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a "Return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article RETURN RECEIPT REQUESTED adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry. * U.S.G.P.O. 1986-217-132