

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. 2. ☐ Restricted Delivery (Extra charge)†

Article Addressed to: Amerada Hess 2207 Industrial Midland, TX 79701	4. Article Number P652 034 489 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
Signature - Agent X [Signature]	
Date of Delivery 1-11-88	

S Form 3811, Mar. 1987 * U.S.G.P.O. 1987-178-268 DOMESTIC RETURN RECEIPT

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3. Article Addressed to: Bureau of Land Mgmt. P.O. Box 1778 Carlsbad, NM 88220	4. Article Number P652 034 4 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X [Signature]	
7. Date of Delivery 1-4-88	

PS Form 3811, Mar. 1987 * U.S.G.P.O. 1987-178-268 DOMESTIC RETURN RECEIPT
R.S. Prentice 117 MWO

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Article Addressed to: Cities Service O+G P.O. Box 1919 Midland, TX 79702	4. Article Number P652 034 487 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
Signature - Agent X [Signature]	
Date of Delivery 1-4-88	

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3. Article Addressed to: John Hendrix Corp. 223 W. Wall, Ste. 525 Midland, TX 79701	4. Article Number P652 034 486 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee X [Signature]	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 1/4/88 MWO	

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3. Article Addressed to: Kirby Exp. Box 1745 Houston, TX 77001	4. Article Number P699 088 371 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee X [Signature]	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 1/5/88	

PS Form 3811, Mar. 1987 * U.S.G.P.O. 1987-178-268 DOMESTIC RETURN RECEIPT