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mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. nt your name and address on the reverse that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.	A Signeture  A Signeture  A Agent  A Addressee  B Received by (Printed Name)  C. Date of Delivery
cle Addressed to:	Posts delivery eddress different from item 1?
W MEXICO OIL CONSERVATION DIV	THE WOLL
TN: MICHAEL STOGNER	23 4
20 ST FRANCIS DRIVE	
NTA FE NM 87504	3. Service Type
o Siete NSL-proof of not itr	☑ Certified Mail     ☐ Express Mail     ☐ Registered     ☐ Return Receipt for Merchandise     ☐ Insured Mail     ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
icle Number 7004 13	L60 0006 1812 6706
m 3811, February 2004	in Heceipt 111111111111111111111111111111111111