



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:

Max R. Chudy
50 S. Meadow
Orchard Park, NY 14127-2723

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-17

COMPLETE THIS SECTION ON DELIVERY

| | |
|---|---------------------------------------|
| A. Received by (Please Print Clearly) <i>N. Chudy</i> | B. Date of Delivery <i>12/1/00</i> |
| C. Signature <i>[Signature]</i> | |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| If YES, enter delivery address below: | |

3. Service Type

Trilogy
Howser Well #2
December 21, 2000
11/29/00

Merchant

☐ Yes ☒ No

7000 0520 0022 8754 3865

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:

Home Stake Oil & Gas Co.
15 East 5th Street Ste. 2800
Tulsa, OK 74103-4311

2. Article Number (Copy from service label)

Trilogy
Howser Well #2
December 21, 2000
11/29/00
7000 0520 0022 8754 3841

COMPLETE THIS SECTION ON DELIVERY

| | |
|---|---------------------------------------|
| A. Received by (Please Print Clearly) <i>[Signature]</i> | B. Date of Delivery <i>12/1/00</i> |
| C. Signature <i>[Signature]</i> | |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| If YES, enter delivery address below: | |

COMPLETE THIS SECTION ON DELIVERY

| | |
|--|---|
| A. Received by (Please Print Clearly) Howser Well #2 December 21, 2000 11/29/00 7000 0520 0022 8754 3834 | B. Date of Delivery <input type="checkbox"/> Agent <input type="checkbox"/> Address <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| C. Signature <i>[Signature]</i> | |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| If YES, enter delivery address below: | |

3. Service Type

- ☐ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.
- ☐ Restricted Delivery? (Extra Fee)
- ☐ Yes

Article's Number (Copy from service label)

Evans Oil and Gas LLC
1513 East Old Shakopee Road
Bloomington, MN 55425-2440

Article Addressed to:

Domestic Return Receipt

102595-99-M-1789

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

John F. & Rita M. Corvino
2550 S. Kensington
Westchester, IL 60153

4a. Article Number

7412 0520 0022 8754 3858

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD
- ☒ Certified
- ☐ Insured

7. Date of Delivery

12-21-94

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595 98-0-0229

Domestic Return Receipt

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:

John F. Corvino & Rita M.
Corvino
2550 S. Kensington
Westchester, IL 60153

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

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

- ☐ Yes
- ☐ No

3. Service Type

Trilogy

Howser Well #2

December 21, 2000

11/29/00

7000 0520 0022 8754

3858

archandise

Yes

PS Form 3811, July 1999

Domestic Return Receipt

Thank you for using Return Receipt Service.