

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:

Petro-Thermo Corporation
Attn: Robert Abbott, Pres.
7704 Pioneer Trail NE
Albuquerque, NM 87109

2. Article Number

(Transfer from service label) **7000 1670 0008 7524 4308**

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

1-24-02

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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

7000 1670 0008 7524 4308

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To

Petro-Thermo Corporation
Attn: Robert W. Abbott, President
7704 Pioneer Trail NE
Albuquerque, NM 87109

PS Form 3800, May 2000

See Reverse for Instructions

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

7000 1670 0008 7524 4492

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To

Agua, Inc.
Attn: Robert W. Abbott, President
7704 Pioneer Trail NE
Albuquerque, NM 87109

PS Form 3800, May 2000

See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

Agua, Inc.
Attn: Robert Abbott, Pres.
7704 Pioneer Trail NE
Albuquerque, NM 87109

2. Article Number

(Transfer from service label) **7000 1670 0008 7524 4492**

PS Form 3811 August 2001

Domestic Return Receipt

102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

1-24-02

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Petrotran Corporation
Attn: Robert Abbott, Pres.
P. O. Box 92090
Pasadena, CA 91109-2090

2. Article Number

(Transfer from service label) **7000 1670 0008 7524 4515**

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
 Addressee

B. Received by (Printed Name)

Robert Abbott

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$



Sent To

Petrotran Corporation
Attn: Robert W. Abbott, President
P. O. Box 92090
Pasadena, CA 91109-2090

PS Form 3800, May 2000

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

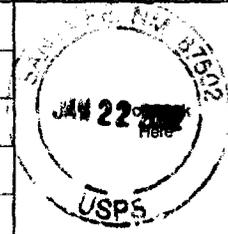
Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$



Sent To

Agua, Inc.
Robert W. Abbott
P. O. Box 92090
Pasadena, CA 92090

PS Form 3800, January 2001

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.
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1. Article Addressed to:

Agua, Inc.
Attn: Robert W. Abbott
P. O. Box 92090
Pasadena, CA 92090

2. Article Number

(Transfer from service label) **7001 1940 0004 7923 3415**

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
 Addressee

B. Received by (Printed Name)

Robert W. Abbott

C. Date of Delivery

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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

7000 1670 0008 7524 4522

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	
Sent To Petro-Thermo Corporation Special No. 7519274 Attn: Robert Abbott, President P. O. Box 92090 Pasadena, CA 91109-2090 PS Form 3800, May 2000 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:

Petro-Thermo Corporation
Attn: Robert Abbott, Pres.
P. O. Box 92090
Pasadena, CA 91109-2090

2. Article Number

(Transfer from service label) **7000 1670 0008 7524 4522**

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
 If YES, enter delivery address below. No

3. Service Type

Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

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:

Petrotran Corporation
Attn: Robert W. Abbott, Pres.
P. O. Box 92090
Albuquerque, NM 87109

2. Article Number

(Transfer from service label) **7000 1670 0008 7524 4539****COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

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

3. Service Type

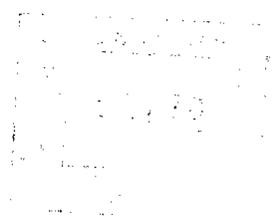
 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (*Extra Fee*) Yes

Mexico
MINERALS and NATURAL RESOURCES DEPARTMENT

Saint Francis Drive
29
New Mexico 87505-5472

JAN 28
Office

NO SUCH NUMBER
MS N
under



CERTIFIED MAIL



Petrotran Corporation
ATTN: Robert W. Abbott, President
P.O.Box 92090
Albuquerque, NM 87109

70 0004 2530 4578

87109/9999

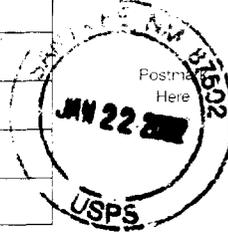


U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 1670 0008 0000 4252 4539

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



<small>Sent To</small> Petrotran Corporation	
<small>Street, Apt. No., or P.O. Box No.</small> Attn: Robert W. Abbot, President	
<small>P.O. Box</small> 92090	<small>City, State, ZIP</small> Albuquerque NM 87109

PS Form 3800, May 2000

See Reverse for Instructions