

**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.  Restricted Delivery  
↑(Extra charge)↑

3. Article Addressed to: Gene Shumate Vice President - Land Siete Oil: Coas Corporation P.O. Box 2523 Roswell, N.M. 88202	4. Article Number P-488 198 051
5. Signature - Addressee X	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
6. Signature - Agent X <i>[Signature]</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)

**SERVICE NOT PAID FOR**

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

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

3. Article Addressed to: Emily Goodfellow Land Department Central Division Amoco Production Co. 501 Westlake Blvd. Houston, TX 77253	4. Article Number P-488 198 050
5. Signature - Addressee X	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
6. Signature - Agent X <i>[Signature]</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery NOV 6 1989	8. Addressee's Address (ONLY if requested and fee paid)

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

3. Article Addressed to: Joe B. Thomas Trades Unionization Dept. Exxon Corporation 2615 W. Missouri Avenue Midland, Texas 79701	4. Article Number P-488 198 052
5. Signature - Addressee X <i>[Signature]</i>	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
6. Signature - Agent X <i>[Signature]</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery 11-2-89	8. Addressee's Address (ONLY if requested and fee paid)

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

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