

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. †(Extra charge)†
 2. Restricted Delivery †(Extra charge)†

3. Article Addressed to: ARLO Oil and Gas Company Box 1610 Midland, Texas 79702	4. Article Number P-484 859 291 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 <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 6/5/78 <i>(CEH)</i>	

PS Form 3811, Mar. 1987 U.S. P.S. 1987-178-289 **DOMESTIC RETURN RECEIPT**

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

3. Article Addressed to: Chevron U.S.A., Inc. Box 1150 Midland, Texas 79702	4. Article Number P-484 859 290 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 <i>[Signature]</i>	
7. Date of Delivery 6/5/78 <i>(CEH)</i>	

PS Form 3811, Mar. 1987 U.S. P.S. 1987-178-289 **DOMESTIC RETURN RECEIPT**

Price 7
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 †(Extra charge)† †(Extra charge)†

Addressed to: Production Company Douston Region 501 Westlake Park Blvd. P.O. Box 3092 Houston, Texas 77253		4. Article Number P-484 859 295
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>K. Wald</i>		Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery SEP 19 1988		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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1. Show to whom delivered, date, and addressee's address. Restricted Delivery
 †(Extra charge)† †(Extra charge)†

3. Article Addressed to: Mobil Producing Texas & New Mexico P. O. Box 633 Midland, Texas 79702		4. Article Number P-484 859 296
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>John Blackwell</i>		Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery 16-SEP-88 (CEN)		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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 †(Extra charge)† †(Extra charge)†

3. Article Addressed to: Bureau Of Land Management P.O. Box 1778 Carlsbad, NM 88220		4. Article Number P-484 859 297
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>Betty Hill</i>		Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery 9-19-88		8. Addressee's Address (ONLY if requested and fee paid)

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 †(Extra charge)† †(Extra charge)†

3. Article Addressed to: Yates Petroleum Corporation 105 South 4th Artesia, New Mexico 88210	4. Article Number P-484 859 292
	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	
7. Date of Delivery 9/16/88	

PS Form 3811, Mar. 1987 * U.S.D.R.O. 1987-178-288 **DOMESTIC RETURN RECEIPT**

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

3. Article Addressed to: Mr. J. C. Williamson P.O. Box 16 Midland, Texas 79702	4. Article Number P-484 859 293
	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 <i>J. C. Williamson</i>	
7. Date of Delivery SEP 16 1988	

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

3. Article Addressed to: Mr. Ralph E. Willieson P.O. Box 994 Midland, Texas 79702	4. Article Number P-484 859 294
	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 <i>R. E. Willieson</i>	
7. Date of Delivery SEP 16 1988	