

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF SAMSON RESOURCES
COMPANY FOR COMPULSORY POOLING
AND APPROVAL OF AN UNORTHODOX GAS
WELL LOCATION, LEA COUNTY, NEW MEXICO.

Case No. 13207

AFFIDAVIT REGARDING NOTICE

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

2. I am an attorney for applicant.

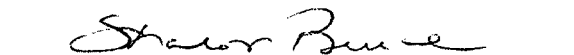
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.

4. Notice of the application was provided to the interest owners at their correct addresses by certified mail. Copies of the notice letters and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.


James Bruce

SUBSCRIBED AND SWORN TO before me this 19th day of January, 2004, by James Bruce.


Notary Public

My Commission Expires:

3/14/05

OIL CONSERVATION DIVISION

CASE NUMBER

EXHIBIT NUMBER

7

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (PHONE)
(505) 660-6612 (CELL)
(505) 982-2151 (FAX)

jamesbruc@aol.com

December 31, 2003

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Pure Energy Group, Inc.
Suite 220
153 Treeline Park
San Antonio, Texas 78209-1880

Pure Energy Group, Inc.
Suite 1925
700 North St. Mary's Street
San Antonio, Texas 78205

Chisos, Ltd.
Suite 1200
1221 Lamar Street
Houston, Texas 77010

Attention: Greg Bonaguerio

Todd Upson
7002 Clearspring Parkway
Garland, Texas 75044

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Samson Resources Company, regarding the N½ of Section 15, Township 20 South, Range 33 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, January 22, 2004 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Friday, January 16, 2004, if you intend to enter an appearance and



participate in the case.

Very truly yours,

A handwritten signature in cursive script, appearing to read "James Bruce". The signature is written in dark ink and is positioned above the printed name.

James Bruce

Attorney for Samson Resources Company

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	0.60	UNIT ID: 0500
Certified Fee	2.30	
Registered Fee	1.75	
Restricted Delivery Fee	4.65	
Total Postage & Fees	8.30	

Postmark Here
 Clerk: KJBWFK
 12/31/03

Sent To
 Chisao, Ltd.
 Suite 1200
 1221 Lamar Street
 Houston, Texas 77010
 City, State, ZIP+4

PS Form 3800, June 2002 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:

Todd Upson
 7002 Clearspring Parkway
 Garland, Texas 75044

2. Article Number
 (Transfer from service label)
 PS Form 3811, August 2001

7003 2260 0006 7446 0629

Domestic Return Receipt

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 ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Chisao, Ltd.
 Suite 1200
 1221 Lamar Street
 Houston, Texas 77010

2. Article Number
 (Transfer from service label)
 PS Form 3811, August 2001

7003 2260 0006 7446 0629

Domestic Return Receipt

102595-02-M-1540

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 ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7003 2260 0006 7446 0629

Domestic Return Receipt

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	0.60	UNIT ID: 0500
Certified Fee	2.30	
Registered Fee	1.75	
Restricted Delivery Fee	4.65	
Total Postage & Fees	8.30	

Postmark Here
 Clerk: KJBWFK
 12/31/03

Todd Upson
 7002 Clearspring Parkway
 Garland, Texas 75044
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

2190 9442 9000 0922 E002

6290 9442 9000 0922 E002

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 0.60 UNIT ID: 0500

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

2.30

1.75

4.65

Postmark
Here

Clerk: KJBMFK

12/31/03

Sent To

Pure Energy Group, Inc.

Suite 220

153 Treeline Park

San Antonio, Texas 78209-1880

City, State, ZIP+4

PS Form 3800, June 2002

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:

Pure Energy Group, Inc.

Suite 220

153 Treeline Park

San Antonio, Texas 78209-1880

2. Article Number

(Transfer from service label)

7003 2260 0006 7446 0643

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1840

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

☐ G.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 0.60

UNIT ID: 0500

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

2.30

1.75

4.65

Postmark
Here

Clerk: KJBMFK

12/31/03

Sent To

Pure Energy Group, Inc.

Suite 220

153 Treeline Park

San Antonio, Texas 78209-1880

City, State, ZIP+4

PS Form 3800, June 2002

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:

Vice President
Edge Petroleum Corporation
Suite 2000
1301 Travis
Houston, Texas 77002

2. Article Number

(Transfer from service label)

7003 2260 0006 7444 8450

PS Form 3811, August 2001

Domestic Return Receipt

102586-02-M-1940

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent
B. Received by (Printed Name) *[Signature]* ☐ Addressee
C. Date of Delivery *1/5/04*
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.

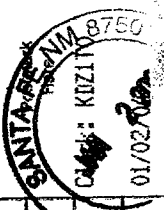
4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT[®]
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	0.60	UNIT ID: 0500
Certified Fee	2.30	
Return Receipt Fee (Endorsement Required)	1.75	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees \$	4.65	



Sent to: Edge Petroleum Corporation
Suite 2000
Street, PO 1301 Travis
City, Houston, Texas 77002

PS Form 3800, June 2002 See Reverse for Instructions

0548 4442 9000 0922 8002

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (PHONE)
(505) 660-6612 (CELL)
(505) 982-2151 (FAX)

jamesbruc@aol.com

January 5, 2003

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

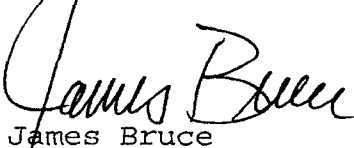
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of application, filed with the New Mexico Oil Conservation Division by Samson Resources Company, for an unorthodox gas well location in the N¼ of Section 15, Township 20 South, Range 33 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, January 22, 2004 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an offset interest owner, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Friday, January 16, 2004, if you intend to enter an appearance and participate in the case.

Very truly yours,



James Bruce

Attorney for Samson Resources Company

Notification for Unorthodox Location, Bandit "15" Federal #1

Owner	Location	Interest
Thunderbolt Petroleum Co., LLC 203 W. Wall Midland, TX 79701	NW Section 11	9.3055
Permian Resources Holdings Inc. P.O. Box 570 Midland, TX 79702	NW Section 11	6.389
Gene Schumate PO Box 2473 Midland, TX 79702	NW Section 11	4.65275
Carol Schumate	NW Section 11	4.65275
Nearburg Exploration Co., LLC PO Box 823085 Midland, TX 75382	NW Section 11	19.01198
Samson	NW Section 11 NW SW Section 11	41.25 41.66667
EGL Resources Inc. PO Box 10886 Midland, TX 79702	NW Section 11 E/2 SW, W/2 SE Section 11	14.73802 27.08333
A. W. Dugan 1415 W. Louisiana, #3100 Houston, TX 77002	NW/4 SW/4 Section 11 E/2 SW Section 10	8.33333 8.33333
Custer & Wright P.O. Box 2334 Midland, TX 79702	NW SW Section 11	11.86253
Conoco Phillips 600 North Dairy Ashford St. Houston, TX 77079-1100	NW SW Section 11 E/2 SW, W/2 SE Section 11 SW Section 10	38.13743 50 50
Trilogy Operation Inc. PO Box 7606 Midland, TX 79702	E/2 SW, W/2 SE Section 11 W/2 SW Section 10	8.3333 8.3333
Merit Energy 13727 Noel Rd., Suite 500 Dallas, TX 75240	SW SW Section 11 N/2, SW/4 Section 14 E/2 SW, W/2 SE Section 11	Operator Operator 14.5833
Shackelford Oil Company PO Box 10665	NE Section 10 NE SE, SW SE, NW SE Section 10	23.3333 40

Midland, TX 79702	SW Section 10	16.6667
Don G. Shackelford PO Box 10665 Midland, TX 79702	NE Section 10	16.66667
Murchison Oil & Gas, Inc. 1445 Ross Ave., #5300 Dallas, TX 75202	NE Section 10 NE SE, SW SE, NW SE Section 10 SW Section 10	40 40 16.6667
• Marshall & Winston, Inc. PO Box 50880 Midland, TX 79710	NE Section 10 NE SE, SW SE, NW SE Section 10 SW Section 10	20 20 8.3333
• Pure Resources, L.P. 500 W. Illinois Midland, TX 79701	SE SE Section 10	100

COMPLETE THIS SECTION ON DELIVERY

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:

Merit Energy
13727 Noel Rd., Suite 500
Dallas, TX 75240

3. Service Type ☐ Express Mail ☐ Return Receipt for Merchandise

☒ Certified Mail ☐ C.O.D. ☐ Yes
☐ Registered Mail ☐ Insured Mail (Extra Fee)

4. Restricted Delivery? (Extra Fee)

7003 2260 0006 7444 8528

102595-02-M-1540

Domestic Return Receipt

Article Number

Transfer from service label

Form 3817, August 2001

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee

B. Received by (Printed Name) ☐ Yes ☐ No

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

E. If YES, enter delivery address below:

3. Service Type ☐ Express Mail ☐ Return Receipt for Merchandise

☒ Certified Mail ☐ C.O.D. ☐ Yes

☐ Registered Mail ☐ Insured Mail (Extra Fee)

4. Restricted Delivery? (Extra Fee)

7003 2260 0006 7444 8511

102595-02-M-1540

Domestic Return Receipt

Article Number

Transfer from service label

Form 3817, August 2001

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:

Shackelford Oil Company
PO Box 10665
Midland, TX 79702

3. Service Type ☐ Express Mail ☐ Return Receipt for Merchandise

☒ Certified Mail ☐ C.O.D. ☐ Yes

☐ Registered Mail ☐ Insured Mail (Extra Fee)

4. Restricted Delivery? (Extra Fee)

7003 2260 0006 7444 8511

102595-02-M-1540

Domestic Return Receipt

Article Number

Transfer from service label

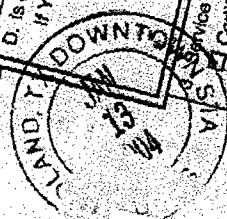
Form 3817, August 2001

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:

Custer & Wright
P.O. Box 2334
Midland, TX 79702



COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]*
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Domestic Return Receipt

102595-02-M-1540

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:

Carol Shumate
6890 E. Sunrise Drive
No. 120, PMB Space 256
Tucson, Arizona 85750

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]*
B. Received by (Printed Name)
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

☐ Agent
☐ Addressee

A. Signature X C Rivera C. Date of Delivery 11/2/06

B. Received by (Printed Name) C Rivera ☐ Yes ☐ No

D. Is delivery address different from item 1? ☐ Yes ☐ No

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

4. Restricted Delivery? ☐ Yes ☐ No

102595-02-M-1540

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:

Nearburg Exploration Co., LLC
PO Box 823085
Midland, TX 79382

2. Article Number (Transfer from service label)
PS Form 3811, August 2001

7003 2260 0006 7444 8580

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

☐ Agent
☐ Addressee

A. Signature X [Signature] C. Date of Delivery 11/2/06

B. Received by (Printed Name) [Signature] ☐ Yes ☐ No

D. Is delivery address different from item 1? ☐ Yes ☐ No

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

4. Restricted Delivery? ☐ Yes ☐ No

102595-02-M-1540

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:

Pure Resources, L.P.
500 W. Illinois
Midland, TX 79701

2. Article Number (Transfer from service label)

7003 2260 0006 7444 8474

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee
C. Date of Delivery 1/2/01

B. Received by (Printed Name) Sally A. L. L. L. ☐ Yes ☒ No

D. Is delivery address different from item 1? ☒ No

If YES, enter delivery address below:

1. Article Addressed to:

Trilogy Operation Inc.
P.O. Box 7608
Midland, TX 79702

3. Service Type ☐ Express Mail ☐ Return Receipt for Merchandise
☒ Certified Mail ☐ C.O.D. ☐ Yes
☐ Registered Mail ☐ Insured Mail ☐ Yes

4. Restricted Delivery? (Extra Fee) ☐ Yes

7003 2260 0006 7444 8535

102595-02-M-1540

Domestic Return Receipt

2. Article Number (Transfer from service label)

PS Form 3811, August 2001

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:

Perman Resources Holdings Inc.
P.O. Box 570
Midland, TX 79702

3. Service Type ☐ Express Mail ☐ Return Receipt for Merchandise
☒ Certified Mail ☐ C.O.D. ☐ Yes
☐ Registered Mail ☐ Insured Mail ☐ Yes

4. Restricted Delivery? (Extra Fee) ☐ Yes

7003 2260 0006 7444 8603

102595-02-M-1540

Domestic Return Receipt

2. Article Number (Transfer from service label)

PS Form 3811, August 2001

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee
C. Date of Delivery 1/2/01

B. Received by (Printed Name) Nena McMorrey ☐ Yes ☒ No

D. Is delivery address different from item 1? ☒ No

If YES, enter delivery address below:

1. Article Addressed to:

Perman Resources Holdings Inc.
P.O. Box 570
Midland, TX 79702

3. Service Type ☐ Express Mail ☐ Return Receipt for Merchandise
☒ Certified Mail ☐ C.O.D. ☐ Yes
☐ Registered Mail ☐ Insured Mail ☐ Yes

4. Restricted Delivery? (Extra Fee) ☐ Yes

7003 2260 0006 7444 8603

102595-02-M-1540

Domestic Return Receipt

2. Article Number (Transfer from service label)

PS Form 3811, August 2001

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:

Conoco Phillips
600 North Dairy Ashford St.
Houston, TX 77079-1100

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

7003 2260 0006 7444 8542

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

B. Received by (Printed Name)

D. LINDSAY

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7003 2260 0006 7444 8542

Domestic Return Receipt

102595-02-M-1540

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:

Marshall & Winston, Inc.
PO Box 50860
Midland, TX 79710

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

7003 2260 0006 7444 8481

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature]

B. Received by (Printed Name)

JASON HARRIS

C. Date of Delivery

11/14/01

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7003 2260 0006 7444 8481

Domestic Return Receipt

102595-02-M-1540