

- **SENDER:** Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one).

☐ Show to whom and date delivered \$
☐ Show to whom, date, and address of delivery .. \$

- 2.
- ☐
- RESTRICTED DELIVERY**
- \$
-
- (The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL \$

- 3.
- ARTICLE ADDRESSED TO:**

C. Daniel Walker
Box 12508
Fort Worth

- 4.
- TYPE OF SERVICE:**

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

ARTICLE NUMBER

P458354723

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☒ Authorized agent

Tracy for CDW
 DATE OF DELIVERY **6 NOV 1986** POSTMARK
 (may be on reverse side)

6. ADDRESSEE'S ADDRESS (Only if requested)

6 NOV 1986

7. UNABLE TO DELIVER BECAUSE:

7a. EMPLOYEE'S INITIALS

- **SENDER:** Complete items 1, 2, 3, and 4.
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☐ Show to whom, date, and address of delivery .. \$

- 2.
- ☐
- RESTRICTED DELIVERY**
- \$
-
- (The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL \$

- 3.
- ARTICLE ADDRESSED TO:**

James L. Harden
Petro Atlas Corporation

- 4.
- TYPE OF SERVICE:**

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

ARTICLE NUMBER

P458354757

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☒ Authorized agent*Boyd White*

5. DATE OF DELIVERY

11-3-86POSTMARK
(may be on reverse side)

6. ADDRESSEE'S ADDRESS (Only if requested)

7. UNABLE TO DELIVER BECAUSE:

7a. EMPLOYEE'S INITIALS

★ GPO: 1982-379-593

★ GPO: 1982-379-593

SEE EXAMINER STOGNER

FEDERAL BUREAU OF INVESTIGATION

Santa Fe

EXHIBIT NO. 2

CASE NO.

9046

3811, July 1982

● **SENDER:** Complete items 1, 2, 3, and 4.
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2. ☐ **RESTRICTED DELIVERY** \$
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL \$ _____

3. **ARTICLE ADDRESSED TO:**
Lewis Burleson

4. **TYPE OF SERVICE:** ☐ REGISTERED ☐ INSURED ☐ CERTIFIED ☐ COD ☐ EXPRESS MAIL

ARTICLE NUMBER
P458354720

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. **DATE OF DELIVERY**
11-3-86

POSTMARK
(may be on reverse side)

6. **ADDRESSEE'S ADDRESS** (Only if requested)

7. **UNABLE TO DELIVER BECAUSE:**

7a. **EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECEIPT

3811, July 1982

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(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL \$ _____

3. **ARTICLE ADDRESSED TO:**
O. H. Berry
#1 Marienfeld

4. **TYPE OF SERVICE:** ☐ REGISTERED ☐ INSURED ☐ CERTIFIED ☐ COD ☐ EXPRESS MAIL

ARTICLE NUMBER
P458354758

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. **DATE OF DELIVERY**
11-3-86

POSTMARK
(may be on reverse side)

6. **ADDRESSEE'S ADDRESS** (Only if requested)

7. **UNABLE TO DELIVER BECAUSE:**

7a. **EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECEIPT

PS 3811, July 1982

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- ☐ Show to whom, date, and address of delivery .. \$
2. ☐ **RESTRICTED DELIVERY** \$
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL \$ _____

3. **ARTICLE ADDRESSED TO:**
TXO Production/David Hundley

4. **TYPE OF SERVICE:** ☐ REGISTERED ☐ INSURED ☐ CERTIFIED ☐ COD ☐ EXPRESS MAIL

ARTICLE NUMBER
P458354 760

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. **DATE OF DELIVERY**
11-3-86

POSTMARK
(may be on reverse side)

6. **ADDRESSEE'S ADDRESS** (Only if requested)

7. **UNABLE TO DELIVER BECAUSE:**

7a. **EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECEIPT

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(CONSULT POSTMASTER FOR FEES)

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☐ Show to whom, date, and address of delivery .. \$
 2. ☐ **RESTRICTED DELIVERY** \$
 (The restricted delivery fee is charged in addition to the return receipt fee.)
- TOTAL \$** _____

3. ARTICLE ADDRESSED TO:

TXO Production Company
900 Wilco Bldg.
Midland, Texas 79701

4. TYPE OF SERVICE:

- ☐ REGISTERED ☐ INSURED
☒ CERTIFIED ☐ COD
☐ EXPRESS MAIL

ARTICLE NUMBER

P 458-354-773

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

Janice Dalan

5. DATE OF DELIVERY**POSTMARK**
(may be on reverse side)

11-7-80

6. ADDRESSEE'S ADDRESS (Only if requested)**7. UNABLE TO DELIVER BECAUSE:****7a. EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECD

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☐ Show to whom, date, and address of delivery .. \$
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 (The restricted delivery fee is charged in addition to the return receipt fee.)
- TOTAL \$** _____

3. ARTICLE ADDRESSED TO:

Jack Huff
Box 471; Midland

4. TYPE OF SERVICE:

- ☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

ARTICLE NUMBER

P 458 354 75

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☒ Authorized agent

Harry A. ...

5. DATE OF DELIVERY**POSTMARK**
(may be on reverse side)

NOV 05 1986

6. ADDRESSEE'S ADDRESS (Only if requested)**7. UNABLE TO DELIVER BECAUSE:****7a. EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECEIPT

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☐ Show to whom, date, and address of delivery .. \$
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 (The restricted delivery fee is charged in addition to the return receipt fee.)
- TOTAL \$** _____

3. ARTICLE ADDRESSED TO:

Frank Shogrin

4. TYPE OF SERVICE:

- ☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

ARTICLE NUMBER

P458354724

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☒ Authorized agent

J. B. ...

5. DATE OF DELIVERY**POSTMARK**
(may be on reverse side)

11/3/86

6. ADDRESSEE'S ADDRESS (Only if requested)**7. UNABLE TO DELIVER BECAUSE:****7a. EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECEIPT

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☐ Show to whom, date, and address of delivery .. \$
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 (The restricted delivery fee is charged in addition to the return receipt fee.)
- TOTAL \$** _____

3. ARTICLE ADDRESSED TO:

J. Cecil Rhodes

4. TYPE OF SERVICE:

- ☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

ARTICLE NUMBER

P458354678

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☒ Authorized agent

Wood B. ...

5. DATE OF DELIVERY**POSTMARK**
(may be on reverse side)

11-3-86

6. ADDRESSEE'S ADDRESS (Only if requested)**7. UNABLE TO DELIVER BECAUSE:****7a. EMPLOYEE'S INITIALS**

★ GPO: 1982-379-593

RETURN RECEIPT