

- Complete items 1 and/or 2 for a/c.
- Complete items 3, 4a, and 4b.
- Print your name and address on the card to you.
- Attach this form to the front of the malpractice permit.
- Write "Return Receipt Requested" on the mail.
- The Return Receipt will show to whom the a delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mr. Sonny Longo

Southeastern Petroleum Inc.

P.O. Box 1893

Roswell, NM 88202

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

8. Addressee's Address (Only if requested and fee is paid)

4a. Article Number

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4b. Service Type

☐ Registered

☐ Express Mail ☐ Insured

☒ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

Domestic Return Receipt

CERTIFIED

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**Oil Conservation Division
811 South First St.
Artesia, New Mexico 88210**

MAIL

RETURN RECEIPT REQUESTED

2.2.5

~~Sonny Longo~~

Southeastern Petroleum Inc.

P.O. Box 1893

Rowsw

SOUT093 002022007 1796 04 06/08/97
FORWARD TIME EXP RTN TO SEND
: SOUTHEASTERN PETRO
PO BOX 0124
ROSWELL NM 00202-0124

RETURN TO SENDER

Thank you for using Return Receipt Service.