

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Amerada Hess Corporation
P. O. Box 2040
Tulsa, Oklahoma 74102

4a. Article Number
P 026 810 478

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 18 1994

5. Signature (Addressee)

6. Signature (Agent)
[Signature]

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

PS Form 3811, December 1991 U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Tempo Energy
Box 1712
Midland, Texas 79701-1712

4a. Article Number
P 026 810 430

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 18 1994

5. Signature (Addressee)

6. Signature (Agent)
Karen Lea

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

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

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Tahoe Energy Corporation
3909 West Industrial
Midland, Texas 79703

4a. Article Number
P 026 810 481

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11-16-94

5. Signature (Addressee)

6. Signature (Agent)
Carroll Oddy

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

PS Form 3811, December 1991 U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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RECEIVED

DEC 16 1994
OCD HOBBS
OFFICE

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I 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:
Exxon (USA)
P. O. Box 1600
Midland, Texas 79702

4a. Article Number
Z 021 610 959

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 18 1994

5. Signature (Addressee)

6. Signature (Agent)
T. Brown

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

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

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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:
Amoco Production Co.
P. O. Box 3092
Houston, Texas 77253

4a. Article Number
Z 021 610 960

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
NOV 16 1994

5. Signature (Addressee)

6. Signature (Agent)
C. X. [Signature]

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

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

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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:
El Paso Natural Gas
P. O. Box 1492
El Paso, Texas 79978

4a. Article Number
Z 021 610 961

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
11/21/94

5. Signature (Addressee)
[Signature]

6. Signature (Agent)

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

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

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3. Article Addressed to: Saba Energy Inc. 4500 W. Illinois Suite 205 Midland, TX 79703	4a. Article Number Z 021 610 970	Thank you for using Return Receipt Service.
5. Signature (Addressee) <i>Tracy Mills</i>	4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent) <i>[Signature]</i>	7. Date of Delivery 11-29-94	
8. Addressee's Address (Only if requested and fee is paid)		

PS Form 3811, December 1991 U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

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3. Article Addressed to: Betwell Oil & Gas Box 2577 Hialeah, Florida 33112	4a. Article Number Z 021 610 963	Thank you for using Return Receipt Service.
5. Signature (Addressee) <i>[Signature]</i>	4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent) <i>[Signature]</i>	7. Date of Delivery NOV 21 1994	
8. Addressee's Address (Only if requested and fee is paid)		

PS Form 3811, December 1991 U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

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3. Article Addressed to: Meridian Oil & Gas 21 Desta Drive P.O. Box 4239 Midland, Texas 79705 77210 Houston	4a. Article Number Z 021 610 964	Thank you for using Return Receipt Service.
5. Signature (Addressee)	4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent) <i>[Signature]</i>	7. Date of Delivery DEC 01 1994	
8. Addressee's Address (Only if requested and fee is paid)		

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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:

Johnny Owen
P. O. Box 1013
Jal, New Mexico 88252

4a. Article Number

Z 021 610 965

4b. Service Type

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery

11-16-94

5. Signature (Addressee)

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

6. Signature (Agent)

Samantha Navarro

PS Form 3811, December 1991

★U.S. GPO: 1993-352-714

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