

Certified Cards For:  
Anasazi "4" State #2  
Scharbauer "4" #2  
Scharbauer "4" #3

**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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mr. Dick Manus  
U.S. Dept. of the Interior  
Bureau of Land Management  
P.O. Box 1778  
Carlsbad, NM 88220

4a. Article Number

P 144 900 643

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991

U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

3800. TOTAL Postage & Fees \$5.13  
Postmark

Thank you for using Return Receipt Service.

**SENDER:**

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- 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.
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- 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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Randy Foote  
Mississippi Chemical Corp.  
1996 Potash Mine Road  
Carlsbad, NM 88220

4a. Article Number

P 144 900 279

4b. Service Type

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

7. Date of Delivery

6-15-93

5. Signature (Addressee)

6. Signature (Agent)

Randy Foote

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

PS Form 3811, December 1991

U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

3800. TOTAL Postage & Fees \$5.51  
Postmark

Thank you for using Return Receipt Service.

Certified Cards For:  
Anasazi "4" State #2  
Scharbauer "4" #2  
Scharbauer "4" #3

**SENDER:**

- Complete items 1 and/or 2 for additional services.
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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:

Scharbauer cattle Company  
P.O. Box 1471  
Midland, TX 79701-1471

4a. Article Number

P 144 900 280

4b. Service Type

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

7. Date of Delivery

JUN 14 1993

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

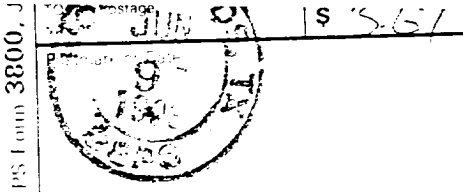
5. Signature (Addressee)

6. Signature (Agent)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT



**SENDER:**

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- Complete items 3 and 4a & b.
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- 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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

John R. Anderson  
P.O. Box 136  
Gail, TX 70738-0136

4a. Article Number

P 144 900 281

4b. Service Type

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

7. Date of Delivery

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

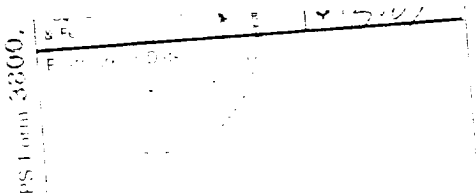
5. Signature (Addressee)

6. Signature (Agent)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT



Certified Cards For:  
Anasazi "4" State #2  
Scharbauer "4" #2  
Scharbauer "4" #3

**SENDER:**

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- Complete items 3, and 4a & b.
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- 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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Roy E. Lee  
600 Goliad Ave.  
Albuquerque, NM 87107

4a. Article Number

P 144 900 282

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

PS Form 3800

Postmark Date

Postmark Date

**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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ernie Szabo  
New Mexico State Land Office  
P.O. Box 1148  
Santa Fe, NM 87504

4a. Article Number

P 144 900 283

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

PS Form 3800

Certified Cards For:  
Anasazi "4" State #2  
Scharbauer "4" #2  
Scharbauer "4" #3

**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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

R. D. Lee, Jr. & Leora Lee  
P.O. Box 363  
Lovington, NM 88260-0363

4a. Article Number

P 144 900 284

4b. Service Type

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

7. Date of Delivery

6-15-83

5. Signature (Addressee)

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**

PS Form 3800

TOTAL POSTAGE & Fees	\$ 5.61
Postmark or Date	JUN 15 1983

**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):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Giles M. Lee & Joie A. Lee  
West Star Route, Box 478  
Lovington, NM 88260-0478

4a. Article Number

P 144 900 285

4b. Service Type

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

7. Date of Delivery

6-14-83

5. Signature (Addressee)

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**

PS Form 3800

TOTAL POSTAGE & Fees	\$ 5.61
Postmark or Date	JUN 14 1983

Certified Cards For:

Anasazi "4" State #2

Scharbauer "4" #2

Scharbauer "4" #3

**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:

Mary Ann Ham  
H.C. 64, Box 22  
Big Lake, TX 76932-0022

4a. Article Number

P 144 900 286

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 |

7. Date of Delivery

6-11-93

5. Signature (Addressee)

6. Signature (Agent)

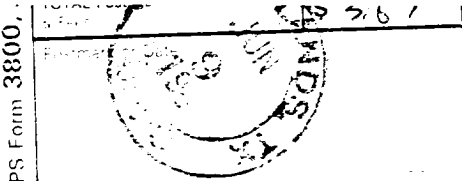
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**



**SENDER:**

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- Write "Return Receipt Requested" on the mailpiece below the article number.
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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:

Becky Brooks Christmas  
P.O. Box 173  
Wagon Mound, NM 87752-0173

4a. Article Number

P 144 900 287

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 |

7. Date of Delivery

6/16/93

5. Signature (Addressee)

6. Signature (Agent)

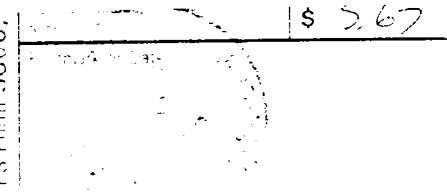
8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**



Certified Cards For:

Anasazi "4" State #2

Scharbauer "4" #2

Scharbauer "4" #3

**SENDER:**

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- Write "Return Receipt Requested" on the mailpiece below the article number.
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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:

**Elizabeth Forrester Berry  
& Daniel C. Berry, III  
P.O. Box 160  
Eunice, NM 88231-0160**

5. Signature (Addressee)  
*Mrs Dan C Berry*

6. Signature (Agent)

4a. Article Number  
**P 144 900 288**

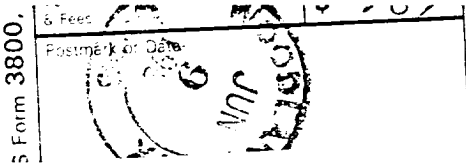
4b. Service Type  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery  
**6-15-93**

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ★U.S. GPO: 1992-323-402 **DOMESTIC RETURN RECEIPT**



**SENDER:**

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- Complete items 3, and 4a & b.
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- 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:

**Brookie Lee Green & Dan Green  
2814 Emerson Place  
Midland, TX 79701**

5. Signature (Addressee)  
*Brookie L. Green*

6. Signature (Agent)

4a. Article Number  
**P 144 900 289**

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

7. Date of Delivery  
**6/14**

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1991 ★U.S. GPO: 1992-323-402 **DOMESTIC RETURN RECEIPT**



Certified Cards For:  
Anasazi "4" State #2  
Scharbauer "4" #2  
Scharbauer "4" #3

**SENDER:**

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- Print your name and address on the reverse of this form so that we can return this card to you.
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- 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):

1. ☐ Addressee's Address  
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Malcolm S. Anderson  
3530 Rangenview Rd.  
Greeley, CO 80634

4a. Article Number

P 144 900 290

4b. Service Type

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

7. Date of Delivery

5. Signature (Addressee)

*Malcolm S. Anderson*  
Signature (Agent)

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

Form 3811, December 1991 ★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**

PS Form 3800, June 1990

TOTAL  
& Fees \$5.61

Postmark or Date  
JUN 14 1993  
10  
1993  
EPE

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
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- 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):

1. ☐ Addressee's Address  
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Robert Romero, Executor  
8560 Park Lane, #25  
Dallas, TX 75321

4a. Article Number

P 144 900 291

4b. Service Type

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

7. Date of Delivery

JUN 18 1993

5. Signature (Addressee)

*Robert A. Romero*  
Signature (Agent)

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

PS Form 3811, December 1991 ★U.S. GPO: 1992-323-402

**DOMESTIC RETURN RECEIPT**

PS Form 3800, June 1990

Postmark or Date

Thank you for using Return Receipt Service.