

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

IVAN LEE RICHARDSON  
5954 WOODARD AVENUE  
FREELAND, WA 98249

46 6626 1961 0225 0120 6956

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Freeland, WA 98249

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fees as appropriate)

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.01

\$9.96

IVAN LEE RICHARDSON  
5954 WOODARD AVENUE  
FREELAND, WA 98249

0753

03

Postmark  
Here

07/11/2025

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

## CERTIFIED MAIL®



9589 0710 5270 1981 9293 94

9589 0710 5270 1981 9293 94

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark  
Here

IVAN LEE RICHARDSON  
5954 WOODARD AVENUE  
FREELAND, WA 98249

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

### SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
  - 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:

IVAN LEE RICHARDSON  
5954 WOODARD AVENUE  
FREELAND, WA 98249

9590 9402 9238 4295 5741 94

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9293 94

PS Form 3811, July 2020 PSN 7530-02-000-9053

### 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

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

Mail  
Mail Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

KORU PROPERTIES,  
800 W. MAIN #1460  
BOISE, ID 83702

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.  
Boise, ID 83702

Certified Mail Fee \$4.85  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00  
Postage \$1.01  
\$9.96

KORU PROPERTIES,  
800 W. MAIN #1460  
BOISE, ID 83702

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

## CERTIFIED MAIL®



9589 0710 5270 1981 9293 63  
9589 0710 5270 1981 9293 63

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

KORU PROPERTIES,  
800 W. MAIN #1460  
BOISE, ID 83702

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$  
Postmark Here

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9293 63

9590 9402 9238 4295 5742 31



KORU PROPERTIES,  
800 W. MAIN #1460  
BOISE, ID 83702

- SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3.
  - 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:

### COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                         | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery |   |

iii Restricted Delivery

Domestic Return Receipt

atlanta  
exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

BANK OF THE CASCADES  
POB 30918  
BILLINGS, MT 59116

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Billings, MT 59116

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

\$1.01

\$9.96

BANK OF THE CASCADES  
POB 30918  
BILLINGS, MT 59116

07/11/2025

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**

9589 0710 5270 1981 9294 17  
9589 0710 5270 1981 9294 17

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark  
Here

BANK OF THE CASCADES  
POB 30918  
BILLINGS, MT 59116

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
■ 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.

Article Addressed to:

BANK OF THE CASCADES  
POB 30918  
BILLINGS, MT 59116

2. Article Number (Transfer from service label)  
9589 0710 5270 1981 9294 17  
PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

atlanta  
exploration company  
4035 Jefferson Avenue  
Texarkana, AR 71854

FRANK LAND LIVESTOCK, LLC  
C/O RICHARD K. LEIRZ  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>  
Boise, ID 83709

Certified Mail Fee \$4.85  
Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

\$1.01  
FRANK LAND LIVESTOCK, LLC  
C/O RICHARD K. LEIRZ  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

\$9.96

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



9589 0710 5270 1981 9294 00  
9589 0710 5270 1981 9294 00

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

FRANK LAND LIVESTOCK, LLC  
C/O RICHARD K. LEIRZ  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:  
FRANK LAND LIVESTOCK, LLC  
C/O RICHARD K. LEIRZ  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

2. Article Number (Transfer from service label)  
9589 0710 5270 1981 9294 00

PS Form 3811, July 2020 PSN 7530-02-000-9033

3. Service Type  
☐ Adult Signature  
☒ Adult Signature Restricted Delivery  
☐ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation<sup>TM</sup>  
☐ Signature Confirmation Restricted Delivery

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

A. Signature ☒ Agent  
B. Received by (Printed Name) ☐ Addressee  
C. Date of Delivery

COMPLETE THIS SECTION ON DELIVERY



# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

THE FRANKLIN GROUP, INC.  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Boise, ID 83709

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.01

THE FRANKLIN GROUP, INC.  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

## CERTIFIED MAIL®



9589 0710 5270 1981 9293 70  
9589 0710 5270 1981 9293 70

THE FRANKLIN GROUP, INC.  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postmark  
Here

### SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
  - 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:

THE FRANKLIN GROUP, INC.  
9222 WEST BARNES DRIVE  
BOISE, ID 83709

### 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

- ☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☐ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

TERSORO LOGISTICS NORTHWEST  
PIPELINE, LLC  
19100 RIDGEWOOD PARKWAY  
SAN ANTONIO, TX 78259

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

San Antonio, TX 78259

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

\$1.01

TERSORO LOGISTICS NORTHWEST  
PIPELINE, LLC  
19100 RIDGEWOOD PARKWAY  
SAN ANTONIO, TX 78259

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

### CERTIFIED MAIL®



9589 0710 5270 1981 9294 24  
9589 0710 5270 1981 9294 24

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

TERSORO LOGISTICS NORTHWEST  
PIPELINE, LLC  
19100 RIDGEWOOD PARKWAY  
SAN ANTONIO, TX 78259

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

2. Article Number (Transfer from service label)  
9589 0710 5270 1981 9294 24

9590 9402 9238 4295 5742 48



TERSORO LOGISTICS NORTHWEST  
PIPELINE, LLC  
19100 RIDGEWOOD PARKWAY  
SAN ANTONIO, TX 78259

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

A. Signature

X

B. Received by (Printed Name)

☐ Agent  
☐ Addressee

C. Date of Delivery

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

3. Service Type

☐ Adult Signature  
☒ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Mail  
☐ Mail Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Restricted Delivery

Domestic Return Receipt

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

ROBERT FORTIN AND JODI  
HAWKINS  
3610 N. PARADISE LANE  
WASILLA, AK 99623

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9589 0710 5270 1981 9293 56  
9589 0710 5270 1981 9293 56

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee	\$	4.85
Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	0.00
<input type="checkbox"/> Return Receipt (electronic)	\$	0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	0.00
<input type="checkbox"/> Adult Signature Required	\$	0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	0.00

Postmark Here

ROBERT FORTIN AND JODI  
HAWKINS  
3610 N. PARADISE LANE  
WASILLA, AK 99623

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

95 E626 T86T 0225 0710 6956

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Wasilla, AK 99623

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	0.00
<input type="checkbox"/> Return Receipt (electronic)	\$	0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	0.00
<input type="checkbox"/> Adult Signature Required	\$	0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	0.00



\$1.01  
ROBERT FORTIN AND JODI  
HAWKINS  
3610 N. PARADISE LANE  
WASILLA, AK 99623

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
  - 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:

ROBERT FORTIN AND JODI  
HAWKINS  
3610 N. PARADISE LANE  
WASILLA, AK 99623



9590 9402 9238 4295 5742 24

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9293 56

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

atlanta  
exploration company  
4035 Jefferson Avenue  
Texarkana, AR 71854

WYNETTA BROWN  
41721 ROAD 769  
GOTHENBURG, NE 69138

4884 5824 0000 0262 6T02

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

GOTHENBURG, NE 69138

**OFFICIAL USE**

0753 03

Postmark Here 08/19/2025

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.07

\$ Tot \$10.77

\$ Sei

\$ Str

\$ Cif

WYNETTA BROWN  
41721 ROAD 769  
GOTHENBURG, NE 69138

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7019 2970 0000 4285 4884  
7019 2970 0000 4285 4884

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

WYNETTA BROWN  
41721 ROAD 769  
GOTHENBURG, NE 69138

Postmark Here

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.07

\$ Tot \$10.77

\$ Sei

\$ Str

\$ Cif

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

WYNETTA BROWN  
41721 ROAD 769  
GOTHENBURG, NE 69138

2. Article Number (Transfer from service label)

7019 2970 0000 4285 4884

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

☐ Adult Signature ☐ Registered Mail<sup>TM</sup>  
☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery  
☐ Certified Mail<sup>®</sup> ☐ Signature Confirmation<sup>TM</sup>  
☐ Certified Mail Restricted Delivery ☐ Signature Restricted Delivery  
☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery

atlanta  
exploration company  
P.O. Box 9  
Magnolia, AR 71754-0009

PATRICIA SHEETS  
2624 CENTRAL AVENUE APT 1  
KEARNEY, NE 68847

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>

Kearney, NE 68847

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$4.40
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.36

\$11.06

0753 07

Postmark Here

07/28/2025

PATRICIA SHEETS  
2624 CENTRAL AVENUE APT 1  
KEARNEY, NE 68847

For Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



9589 0710 5270 1981 9280 38  
9589 0710 5270 1981 9280 38

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Postmark Here

PATRICIA SHEETS  
2624 CENTRAL AVENUE APT 1  
KEARNEY, NE 68847

For Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

PATRICIA SHEETS  
2624 CENTRAL AVENUE APT 1  
KEARNEY, NE 68847

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9280 38

PS Form 3811, July 2020 PSN 7530-02-000-9053

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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	



atlanta  
exploration company  
P.O. Box 9  
Magnolia, AR 71754-0009

TRISTON KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Gothenburg, NE 69138

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.36

**\$11.06**

TRISTON KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

Postmark Here 07/28/2025

0753 07

For Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

9589 0710 5270 1981 9280 69

9589 0710 5270 1981 9280 69

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Postmark Here

TRISTON KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

For Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

TRISTON KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9280 69

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	

Mail Restricted Delivery

Domestic Return Receipt

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

CHAO LIVING TRUST  
C/O GARY SHUNG CHAO AND  
SHAWLANG CHANG CHAO  
41621 MISSION CREEK DRIVE  
FREMONT, CA 94539

41 0826 1961 0225 0720 6956

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fremont, CA 94539

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage

\$9.96

CHAO LIVING TRUST  
C/O GARY SHUNG CHAO AND  
SHAWLANG CHANG CHAO  
41621 MISSION CREEK DRIVE  
FREMONT, CA 94539

Postmark  
Here

07/09/2025

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

## CERTIFIED MAIL®



9589 0710 5270 1981 9280 14  
9589 0710 5270 1981 9280 14

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

CHAO LIVING TRUST  
C/O GARY SHUNG CHAO AND  
SHAWLANG CHANG CHAO  
41621 MISSION CREEK DRIVE  
FREMONT, CA 94539

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9280 14

all Restricted Delivery

Domestic Return Receipt

9590 9402 9238 4295 5747 67



CHAO LIVING TRUST  
C/O GARY SHUNG CHAO AND  
SHAWLANG CHANG CHAO  
41621 MISSION CREEK DRIVE  
FREMONT, CA 94539

1. Article Addressed to:

- Complete items 1, 2, and 3.
- 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.

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Certified Mail Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

atlanta  
exploration company  
P.O. Box 9  
Magnolia, AR 71754-0009

KENDALL DRAKE KRUSE  
1421 AVE A  
GOTHENBERG, NE 69138

25 0826 1861 1225 0720 6856

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Gothenburg, NE 69138

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$10.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.36

\$11.06

KENDALL DRAKE KRUSE  
1421 AVE A  
GOTHENBERG, NE 69138

0753  
07

Postmark  
Here

07/28/2025

PS Form 3800, January 2023 PSN 7530-02-000-9053 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9589 0710 5270 1981 9280 52

9589 0710 5270 1981 9280 52

PS Form 3800, January 2023 PSN 7530-02-000-9053 See Reverse for Instructions

KENDALL DRAKE KRUSE  
1421 AVE A  
GOTHENBERG, NE 69138

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9280 52

9590 9402 9238 4295 5747 05



KENDALL DRAKE KRUSE  
1421 AVE A  
GOTHENBERG, NE 69138

- SENDER: COMPLETE THIS SECTION**
- Complete items 1, 2, and 3.
  - 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:

- 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
- |   |   |
|---|---|
| <input type="checkbox"/> Adult Signature                                | <input type="checkbox"/> Priority Mail Express®                     |
| <input checked="" type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                                | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery             | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                            | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery        |   |

Domestic Return Receipt

atlanta  
exploration company  
4035 Jefferson Avenue  
Texarkana, AR 71854

VISTA INVESTMENT PROPERTY,  
LLC  
3672 E. ALTA RIDGE CT.  
BOISE, ID 83716

TE 4626 7867 0225 0720 6856

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Boise, ID 83716

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postmark Here

11 2025

VISTA INVESTMENT PROPERTY, LLC  
3672 E. ALTA RIDGE CT.  
BOISE, ID 83716

\$9.96

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

9589 0710 5270 1981 9294 31

9589 0710 5270 1981 9294 31

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark Here

VISTA INVESTMENT PROPERTY, LLC  
3672 E. ALTA RIDGE CT.  
BOISE, ID 83716

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

VISTA INVESTMENT PROPERTY, LLC  
3672 E. ALTA RIDGE CT.  
BOISE, ID 83716

9590 9402 9238 4295 5746 13

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9294 31

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

atlanta  
exploration company  
4035 Jefferson Avenue  
Texarkana, AR 71854

BWR HOLDING COMPANY, LLC  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>.

Caldwell, ID 83607

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00

Postage \$1.01

\$9.96 BWR HOLDING COMPANY, LLC  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**

9589 0710 5270 1981 9280 21  
9589 0710 5270 1981 9280 21

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage \$

BWR HOLDING COMPANY, LLC  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BWR HOLDING COMPANY, LLC  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

2. Article Number (Transfer from service label)  
9589 0710 5270 1981 9280 21  
PS Form 3811, July 2020 PSN 7530-02-000-9053

3. Service Type

<input type="checkbox"/> Registered Mail <sup>®</sup>	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery



atlanta  
exploration company  
P.O. Box 9  
Magnolia, AR 71754-0009

LONNIE RAY SHEETS AND KATH  
SHEETS  
6420 MONTCLAIR ST  
PAHRUMP, NV 89061-7734

62 2826 7961 0225 0720 6856

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).  
Pahrump, NV 89061

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00  
Postage \$1.36

0753  
07

Postmark  
Here

LONNIE RAY SHEETS AND KATHERINE  
SHEETS  
6420 MONTCLAIR ST  
PAHRUMP, NV 89061-7734

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®



9589 0710 5270 1981 9282 29  
9589 0710 5270 1981 9282 29

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

LONNIE RAY SHEETS AND KATHERINE  
SHEETS  
6420 MONTCLAIR ST  
PAHRUMP, NV 89061-7734

Certified Mail Fee  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$

Postmark  
Here

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9282 29



9590 9402 9238 4295 5746 51

LONNIE RAY SHEETS AND KATHERINE  
SHEETS  
6420 MONTCLAIR ST  
PAHRUMP, NV 89061-7734

SENDER: COMPLETE THIS SECTION  
■ Complete items 1, 2, and 3.  
■ 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:

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ d Mail  
☐ d Mail Restricted Delivery (500)

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

atlanta  
exploration company  
P.O. Box 9  
Magnolia, AR 71754-0009

BRITTANY KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

GOTHENBERG, NE 69138

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.36  
\$11.06

BRITTANY KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

9589 0710 5270 1981 9282 12  
9589 0710 5270 1981 9282 12

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$

BRITTANY KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

BRITTANY KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9282 12

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

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  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

DAVID SHEETS  
23811 ANNA CT  
RAPID CITY, SD 57702

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**Rapid City, SD 57702**

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$1.01

**\$9.96**

DAVID SHEETS  
23811 ANNA CT  
RAPID CITY, SD 57702

Postmark Here

06/06/2025

PS Form 3800, January 2020 PSN 7530-02-000-9053 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

9589 0710 5270 1981 9277 96

9589 0710 5270 1981 9277 96

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**DAVID SHEETS**  
23811 ANNA CT  
RAPID CITY, SD 57702

PS Form 3800, January 2020 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
■ 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:

**DAVID SHEETS**  
23811 ANNA CT  
RAPID CITY, SD 57702

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9277 96

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Mail Restricted Delivery

Domestic Return Receipt

atlanta  
exploration company  
4035 Jefferson Avenue  
Texarkana, AR 71854

MICHAEL BARTLETT  
76379 ROAD 418  
COZAD, NE 69130

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

COZAD, NE 69130

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fees as appropriate)

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail Restricted Delivery

☐ Adult Signature Required

☐ Adult Signature Restricted Delivery

Postage \$1.07

\$10.77

MICHAEL BARTLETT  
76379 ROAD 418  
COZAD, NE 69130

Postmark  
Here

07/16/2025

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9589 0710 5270 1981 9281 51  
9589 0710 5270 1981 9281 51

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Postmark  
Here

MICHAEL BARTLETT  
76379 ROAD 418  
COZAD, NE 69130

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
  - 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:

MICHAEL BARTLETT  
76379 ROAD 418  
COZAD, NE 69130

2. Article Number (Transfer from service label)

9590 9402 9510 5069 7942 07

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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®  
☐ Registered Mail™  
☐ Signature Confirmation™  
☐ Signature Restricted Delivery  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

- Complete items 1, 2, and 3.
- 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:**

TAMI WALKOWIAK  
405 COTTONWOOD  
MILFORD, NE 68405



9590 9402 9510 5069 7941 91

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9278 19

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt :

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee

<b>Extra Services &amp; Fees (check box, add fee as appropriate)</b>	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
<b>Postage</b>	

Postmark  
Here

TAMI WALKOWIAK  
405 COTTONWOOD  
MILFORD, NE 68405

### for Instructions

**CERTIFIED MAIL**  
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

FACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

atlanta

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>

Certified Mail Fee \$4.85

<b>Extra Services &amp; Fees (check box, add fee if appropriate)</b>		<b>\$4.10</b>
<input type="checkbox"/> Return Receipt (hardcopy)	\$	<del>\$0.00</del>
<input type="checkbox"/> Return Receipt (electronic)	\$	<del>\$0.00</del>
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	<del>\$0.00</del>
<input type="checkbox"/> Adult Signature Required	\$	<del>\$0.00</del>
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	<del>\$0.00</del>

Postage	\$1.01
---------	--------

\$9.96

TAMI WALKOWIAK  
405 COTTONWOOD  
MILFORD, NE 68405

TAMI WALKOWIAK  
405 COTTONWOOD  
MILFORD, NE 68405

Postmark  
Here

06/06/2025





4035 Jefferson Avenue  
Texarkana, AR 71854

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

SHAWNA FREDERICKSON  
465 F STREET  
MILFORD, NE 68405



9590 9402 9510 5069 7941 84

Article Number/Transfer from existing label.

9589 0710 5270 1981 9278 26

PS Form 3811, July 2020 PSN 7530-02-000-9053

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
- ☐ Adult Signature
  - ☐ Adult Signature Restricted Delivery
  - ☐ Certified Mail®
  - ☐ Certified Mail Restricted Delivery
  - ☐ Collect on Delivery Restricted Delivery
  - ☐ Collect on Delivery Restricted Delivery Mail
  - ☐ Collect on Delivery Restricted Delivery (over 5000)
  - ☐ Priority Mail Express®
  - ☐ Registered Mail™
  - ☐ Registered Mail Restricted Delivery
  - ☐ Signature Confirmation™
  - ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee

- Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) \$
  - ☐ Return Receipt (electronic) \$
  - ☐ Certified Mail Restricted Delivery \$
  - ☐ Adult Signature Required \$
  - ☐ Adult Signature Restricted Delivery \$
- Postage \$

Postmark  
Here

SHAWNA FREDERICKSON  
465 F STREET  
MILFORD, NE 68405

for Instructions

MAIL®  
DO NOT WRITE IN THESE SPACES  
DO NOT WRITE IN THESE SPACES

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

- Certified Mail Fee \$4.85
- Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) \$4.10
  - ☐ Return Receipt (electronic) \$0.00
  - ☐ Certified Mail Restricted Delivery \$0.00
  - ☐ Adult Signature Required \$0.00
  - ☐ Adult Signature Restricted Delivery \$
- Postage \$1.01

\$9.96

SHAWNA FREDERICKSON  
465 F STREET  
MILFORD, NE 68405

0753 03  
JUN 06 2025  
Postmark  
Here  
06/06/2025

SHAWNA FREDERICKSON  
465 F STREET  
MILFORD, NE 68405

for Instructions



**atlanta**  
exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:**

SANDY SHEETS  
1014 1<sup>ST</sup> ST. APT 1  
MILFORD, NE 68405



9590 9402 9510 5069 7941 77

**2. Article Number (Transfer from service label)**

9589 0710 5270 1981 9278 33

PS Form 3811, July 2020 PSN 7530-02-000-9053

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**

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$

Postmark  
Here

SANDY SHEETS  
1014 1<sup>ST</sup> ST. APT 1  
MILFORD, NE 68405

for Instructions

OF ENVELOPE TO THE RIGHT  
PRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

9589 0710 5270 1981 9278 33

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

MILFORD, NE 68405

Certified Mail Fee \$4.85

0753

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

03

Postage \$1.01

Postmark  
Here  
06/06/2025

SANDY SHEETS  
1014 1<sup>ST</sup> ST. APT 1  
MILFORD, NE 68405

for Instructions

SANDY SHEETS  
1014 1<sup>ST</sup> ST. APT 1  
MILFORD, NE 68405

# atlanta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

**PAM HOUCHIN**  
**12990 EVERGREEN ROAD**  
**RIVERDALE, NE 68870**

02 6226 T96T 0225 0TLO 6856

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).  
Riverdale, NE 68870

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.01

\$9.96

**PAM HOUCHIN**  
**12990 EVERGREEN ROAD**  
**RIVERDALE, NE 68870**

Postmark  
02 2025

07/02/2025

USPS

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

## CERTIFIED MAIL®



9589 0710 5270 1981 9279 70

9589 0710 5270 1981 9279 70

**PAM HOUCHIN**  
**12990 EVERGREEN ROAD**  
**RIVERDALE, NE 68870**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$

Postmark  
Here

For Instructions

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9279 70

Domestic Return Receipt

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Mail  
☐ Mail Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

A. Signature

X

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes No

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- 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.

- A. Signature
- B. Received by (Printed Name)
- C. Date of Delivery
- D. Is delivery address different from item 1? If YES, enter delivery address below:

**atlanta**  
exploration company  
P.O. Box 9  
Magnolia, AR 71754-0009

ANGIE KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

2294 5924 0000 0462 6102

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

GOTHENBERG, NE 69138

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.07

\$10.77

ANGIE KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

0753 04

Postmark  
Here

07/29/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7019 2970 0000 4285 4822  
7019 2970 0000 4285 4822

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

ANGIE KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$  
Postmark  
Here

**OFFICIAL USE**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

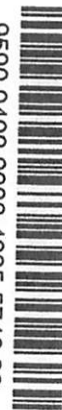
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

2. Article Number (Transfer from service label)

7019 2970 0000 4285 4822

9590 9402 9238 4295 5746 99



ANGIE KRUSE  
1421 AVENUE A  
GOTHENBERG, NE 69138

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

**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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

atlanta  
exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

CARL BURDEN SHEETS  
2626 WOOD DRIVE  
BOISE, ID 83703

ts. They reserve

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Boise, ID 83703

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$1.01

\$9.96

CARL BURDEN SHEETS  
2626 WOOD DRIVE  
BOISE, ID 83703

Postmark  
Here

06/10/2025

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9589 0710 5270 1981 9278 57

9589 0710 5270 1981 9278 57

CARL BURDEN SHEETS  
2626 WOOD DRIVE  
BOISE, ID 83703

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

Postmark  
Here

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

CARL BURDEN SHEETS  
2626 WOOD DRIVE  
BOISE, ID 83703

**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**

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

9590 9402 9510 5069 7941 53

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9278 57

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt



atlanta  
exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

KRISTINA PAPE  
6200 W. ROKEBY ROAD  
DENTON, NE 68339

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Denton, NE 68339

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$0.00

☐ Return Receipt (electronic) \$0.00

☐ Certified Mail Restricted Delivery \$0.00

☐ Adult Signature Required \$0.00

☐ Adult Signature Restricted Delivery \$0.00

Postage \$1.01

\$9.96

KRISTINA PAPE  
6200 W. ROKEBY ROAD  
DENTON, NE 68339

Postmark

Here

06/16/2025

USPS

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



9589 0710 5270 1981 9279 49

9589 0710 5270 1981 9279 49

KRISTINA PAPE  
6200 W. ROKEBY ROAD  
DENTON, NE 68339

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

Postmark  
Here

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

B. Received by (Printed Name)

☐ Addressee

C. Date of Delivery

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

- Complete items 1, 2, and 3.
- 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:

KRISTINA PAPE

6200 W. ROKEBY ROAD

DENTON, NE 68339



9590 9402 9510 5069 7943 51

2. Article Number (Transfer from service label)

9589 0710 5270 1981 9279 49

Mail Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

3. Service Type

☒ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

# anta

exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854

PIONEER TITLE COMPANY OF ADA COUNTY  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Caldwell, ID 83607

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48

PIONEER TITLE COMPANY OF ADA COUNTY  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

0753  
04

Postmark  
Here

09/08/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

### CERTIFIED MAIL®



7019 2970 0000 4285 4907  
7019 2970 0000 4285 4907

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

PIONEER TITLE COMPANY OF ADA COUNTY  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

#### SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

PIONEER TITLE COMPANY OF ADA COUNTY  
15254 BALD EAGLE AVENUE  
CALDWELL, ID 83607

2. Article Number (Transfer from service label)

9590 9402 9510 5069 7943 06

7019 2970 0000 4285 4907

#### 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

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

9. Restricted Delivery

Domestic Return Receipt



4035 Jefferson Avenue  
Texarkana, AR 71854  
870.627.3955  
www.atlantaexploration.com

June 5, 2025

Derek Oliver Mclean  
8103 53<sup>rd</sup> Dr NE  
Marsville, WA 98270

RE: West Barlow Unit  
Fruitland, ID

Dear Derek,

Our client, Snake River Oil and Gas Inc, is in the process of drilling a gas well in the Fruitland, ID area. They want to make sure all owners are leased, so that each mineral owner would receive their share of royalty money from the well, if productive. We show that Carol Ann Marcy McLean owns some small mineral interest in the area. These minerals were passed down from Charles. D. Ablin. Will you please confirm that you are the heir of Carol Ann Marcy McLean.

We would appreciate any information that you could provide. Please give me a call at 870.234.2526 or email me at [rodney@atlantaexpl.com](mailto:rodney@atlantaexpl.com)

Sincerely,

Rodney May

RM/ns

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Marsville, WA 98270

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.73

Total Postage and Fees \$9.68

0753  
03

Postmark  
Here

JUN 05 2025  
06/05/2025

LIVER MCLEAN  
53<sup>RD</sup> DR NE  
LLE, WA 98270

SEE REVERSE FOR INSTRUCTIONS

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

DEREK OLIVER MCLEAN  
8103 53<sup>RD</sup> DR NE  
MARSVILLE, WA 98270



9590 9402 7934 2305 4181 03

2. Article Number (Transfer from service label)

7019 2970 0000 4285 4815

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X   
B. Received by (Printed Name)  
Derek McLean

☐ Agent  
☐ Addressee

C. Date of Delivery

06/13/25

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

3. Service Type

☒ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Mail Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery



4035 Jefferson Avenue  
Texarkana, AR 71854  
870.627.3955  
[www.atlantaexploration.com](http://www.atlantaexploration.com)

June 5, 2025

Donal P. Mclean  
220 K St  
Cheney, WA 99004

RE: West Barlow Unit  
Fruitland, ID

Dear Donal,

Our client, Snake River Oil and Gas Inc, is in the process of drilling a gas well in the Fruitland, ID area. They want to make sure all owners are leased, so that each mineral owner would receive their share of royalty money from the well, if productive. We show that Carol Ann Marcy McLean owns some small mineral interest in the area. These minerals were passed down from Charles. D. Ablin. Will you please confirm that you are the heir of Carol Ann Marcy McLean.

We would appreciate any information that you could provide. Please give me a call at 870.234.2526 or email me at [rodney@atlantaexploration.com](mailto:rodney@atlantaexploration.com)

Sincerely,

Rodney May

Rodney May

RM/ns

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Cheney, WA 99004

**OFFICIAL USE**

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee if applicable)

☐ Return Receipt (hardcopy) \$0.00

☐ (electronic) \$0.00

☐ Restricted Delivery \$0.00

☐ Restricted Delivery \$0.00

☐ Agent \$0.73


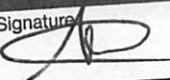
☐ Addressee Fees

C. Date of Delivery

Donal P. McLean  
 220 K STREET  
 CHENEY, WA 99004

Postmark Here  
 06/05/2025

See Reverse for Instructions

<b>FRONT: COMPLETE THIS SECTION</b>	<b>COMPLETE THIS SECTION ON DELIVERY</b>
<p>Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0; text-align: center;"> <p>DONAL P. MCLEAN</p> <p>220 K STREET</p> <p>CHENEY, WA 99004</p> </div> <div style="text-align: center;">  <p>9590 9402 7934 2305 4180 97</p> </div> <p>Article Number (Transfer from service label)</p> <p style="font-size: 1.2em; font-weight: bold;">7019 2970 0000 4285 4808</p>	<p>A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p><b>X</b> </p> <p>B. Received by (Printed Name) <span style="float: right;">C. Date of Delivery</span></p> <p>D. Is delivery address different from item 1? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span></p> <p style="margin-left: 20px;">If YES, enter delivery address below:</p>   <p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p><input checked="" type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> </div> <div style="width: 35%;"> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p> </div> </div> <p style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Mail  <input type="checkbox"/> Mail Restricted Delivery              (500)           </p>

Domestic Return Receipt

Form 3811, July 2020 PSN 7530-02-000-9053



**atlanta**  
exploration company

4035 Jefferson Avenue  
Texarkana, AR 71854  
870.627.3955  
www.atlantaexploration.com

June 5, 2025

Breanna Mclean Froemake  
1048 E. 16<sup>th</sup> St  
Lafayette, OR 97127

RE: West Barlow Unit  
Fruitland, ID

Dear Breanna,

Our client, Snake River Oil and Gas Inc, is in the process of drilling a gas well in the Fruitland, ID area. They want to make sure all owners are leased, so that each mineral owner would receive their share of royalty money from the well, if productive. We show that Carol Ann Marcy McLean owns some small mineral interest in the area. These minerals were passed down from Charles. D. Ablin. Will you please confirm that you are t

We would appreciate any information that you could p  
870.234.2526 or email me at [rodney@atlantaexploration.com](mailto:rodney@atlantaexploration.com)

Sincerely,

  
Rodney May

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Lafayette, OR 97127

**OFFICIAL USE**

Certified Mail Fee	\$4.85
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.73
Total Postage and Fees	\$9.68

Postmark Here  
05 2025  
06/05/2025

Receiver: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

- 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:

BREANNA MCLEAN FROEMAKE  
1048 E. 16<sup>TH</sup> STREET  
LAFAYETTE, OR 97127

9590 9402 7934 2305 4180 80

2. Article Number (Transfer from service label)

7019 2970 0000 4285 4792

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
☒ Breanna Froemake ☐ Agent

B. Received by (Printed Name)  
 ☐ Addressee

C. Date of Delivery

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

3. Service Type

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input checked="" type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (\$500)	

See Reverse for Instructions

Domestic Return Receipt



RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

RIGGINS PROPERTIES, LLC  
6055 ELMORE ROAD  
FRUITLAND, ID 83619

0986 6970 0000 0627 0202

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

Total \$10.48

RIGGINS PROPERTIES, LLC  
6055 ELMORE ROAD  
FRUITLAND, ID 83619

0753 02  
Postmark Here  
09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9880  
7020 1290 0000 0163 9880

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)

9590 9402 9238 4295 5583 30



RIGGINS PROPERTIES, LLC  
6055 ELMORE ROAD  
FRUITLAND, ID 83619

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	\$
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

RIGGINS PROPERTIES, LLC

6055 ELMORE ROAD  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent  
☒ X  
B. Received by (Printed Name) ☐ Addressee  
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  
☐ Adult Signature  
☐ Certified Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Mail Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

LAKE RIVER OIL & GAS  
JEFFERSON AVENUE  
KARKANA, AR 71854

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

0753 02

Postmark Here

09/15/2025

THE THOMAS & KRISTINE RYAN FAMILY TRUST  
159 SYCAMORE STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7020 1290 0000 0163 9811

7020 1290 0000 0163 9811

**OFFICIAL USE**

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Postmark Here

THE THOMAS & KRISTINE RYAN FAMILY TRUST  
159 SYCAMORE STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

THE THOMAS & KRISTINE RYAN FAMILY TRUST  
159 SYCAMORE STREET  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9811

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

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

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery	
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

AUTO ZONE PARTS, INC.  
123 SOUTH FRONT STREET  
MEMPHIS, TN 38103

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$5.30  
\$4.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00  
Postage \$0.78

0753  
02

Postmark  
Here

09/15/2025

\$40.48

AUTO ZONE PARTS, INC.  
123 SOUTH FRONT STREET  
MEMPHIS, TN 38103

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7022 3330 0000 5007 7250  
7022 3330 0000 5007 7250

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$  
Total \$  
Sent \$  
City

Postmark  
Here

AUTO ZONE PARTS, INC.  
123 SOUTH FRONT STREET  
MEMPHIS, TN 38103

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
  - 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:

AUTO ZONE PARTS, INC.  
123 SOUTH FRONT STREET  
MEMPHIS, TN 38103

9590 9402 9238 4295 5582 62

2. Article Number (Transfer from service label)  
7022 3330 0000 5007 7250

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature ☒ Agent ☐
- B. Received by (Printed Name) ☐ Addressee
- 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®
  - ☐ Registered Mail™
  - ☐ Signature Confirmation™
  - ☐ Signature Restricted Delivery
  - ☐ Collect on Delivery
  - ☐ Collect on Delivery Restricted Delivery
  - ☐ Mail Restricted Delivery
  - ☐ Priority Mail Express®
  - ☐ Registered Mail™
  - ☐ Signature Confirmation™
  - ☐ Signature Restricted Delivery

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

JASON EIGUREN  
7229 ELMORE ROAD  
FRUITLAND, ID 83619

E786 E9TD 0000 062T 020L

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

0753  
02

Postmark  
Here

09/15/2025

JASON EIGUREN  
7229 ELMORE ROAD  
FRUITLAND, ID 83619

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9873  
7020 1290 0000 0163 9873

JASON EIGUREN  
7229 ELMORE ROAD  
FRUITLAND, ID 83619

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

See reverse for instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

JASON EIGUREN  
7229 ELMORE ROAD  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

9590 9402 9238 4295 5583 23

7020 1290 0000 0163 9873

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

B. Received by (Printed Name)

☐ Addressee

C. Date of Delivery

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

3. Service Type

- ☒ Adult Signature
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Certified Mail®
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Mail Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
ANA, AR 71854

CITY OF FRUITLAND  
POB 324  
FRUITLAND, ID 83619

9986 6910 0000 0621 0202

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

0753  
02  
Postmark  
Here

09/15/2025

City, State, ZIP+4<sup>®</sup>

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**

7020 1290 0000 0163 9866  
7020 1290 0000 0163 9866

CITY OF FRUITLAND  
POB 324  
FRUITLAND, ID 83619

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

\$0.78

\$10.48

Postmark  
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.

2. Print your name and address on the reverse so that we can return the card to you.

3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CITY OF FRUITLAND  
POB 324  
FRUITLAND, ID 83619

9590 9402 9238 4295 5583 16

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9866

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery

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

3. Service Type

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery

Domestic Return Receipt



RIVER OIL & GAS  
PERSON AVENUE  
ANA, AR 71854

ECKHARDT PROPERTIES, LLC  
1706 N. WHITLEY  
FRUITLAND, ID 83619

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

9296 E9T0 0000 062T 0202

0753 02

Postmark Here

09/15/2025

ECKHARDT PROPERTIES, LLC  
1706 N. WHITLEY  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.78
<b>Total</b>	<b>\$10.48</b>

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9828  
7020 1290 0000 0163 9828

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Postage \$

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postmark Here

ECKHARDT PROPERTIES, LLC  
1706 N. WHITLEY  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
■ 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:

ECKHARDT PROPERTIES, LLC  
1706 N. WHITLEY  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9828

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

☒ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☐ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™

☐ Collect on Delivery ☐ Signature Restricted Delivery

☐ Insured Mail ☐ Restricted Delivery

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

JORDAN & JOSEPH HEINTZ  
1792 WALNUT AVENUE  
FRUITLAND, ID 83619

2112 9924 0000 0262 6102

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$5.30  
Postage \$0.78  
Total \$6.08

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postmark Here  
SEP 15 2025  
09/15/2025

JORDAN & JOSEPH HEINTZ  
1792 WALNUT AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7019 2970 0000 4286 7112  
7019 2970 0000 4286 7112

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$5.30  
Postage \$0.78  
Total \$6.08

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postmark Here

JORDAN & JOSEPH HEINTZ  
1792 WALNUT AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JORDAN & JOSEPH HEINTZ  
1792 WALNUT AVENUE  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)  
7019 2970 0000 4286 7112

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent  
B. Received by (Printed Name) ☐ Addressee  
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®  
☐ Registered Mail™  
☐ Signature Confirmation™  
☐ Signature Restricted Delivery  
☐ Collect on Delivery  
☐ Restricted Delivery

4. Priority Mail Express®  
☐ Registered Mail™  
☐ Signature Confirmation™  
☐ Signature Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
ANA, AR 71854

JEFFREY & LISA BERRY  
1820 WALNUT AVENUE  
FRUITLAND, ID 83619

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

JEFFREY & LISA BERRY  
1820 WALNUT AVENUE  
FRUITLAND, ID 83619

0753 02

Postmark  
Here  
SEP 15 2025

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7019 2970 0000 4286 7099  
7019 2970 0000 4286 7099

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

JEFFREY & LISA BERRY  
1820 WALNUT AVENUE  
FRUITLAND, ID 83619

Postmark  
Here

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

JEFFREY & LISA BERRY  
1820 WALNUT AVENUE  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

7019 2970 0000 4286 7099

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

B. Received by (Printed Name)

☐ Addressee

C. Date of Delivery

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

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Mail  
☐ Mail Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

JACK & WENDY WALKER  
1875 NW 24 STREET  
FRUITLAND, ID 83619

2902 9824 0000 0262 6702

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

**OFFICIAL USE**

0753 02

Postmark Here SEP 15 2025

09/15/2025

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.78
<b>\$10.48</b>	

JACK & WENDY WALKER  
1875 NW 24 STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7019 2970 0000 4286 7082  
7019 2970 0000 4286 7082

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

JACK & WENDY WALKER  
1875 NW 24 STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

JACK & WENDY WALKER  
1875 NW 24 STREET  
FRUITLAND, ID 83619

2. Article Number (transfer from service label)

7019 2970 0000 4286 7082

PS Form 3811, July 2020 PSN 7530-02-000-9053

9590 9402 7934 2305 4180 59

**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

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery	
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Mail Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

HANSON HOLDINGS, LLC  
32501 HWY 95  
PARMA, ID 83660

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Parma, ID 83660

**OFFICIAL USE**

Certified Mail Fee	\$5.30	
Extra Services & Fees (check box, add fee as appropriate)	\$4.40	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$0.78	
Total	\$10.48	

Postmark Here  
SEP 15 2025  
0753 02  
09/15/2025

HANSON HOLDINGS, LLC  
32501 HWY 95  
PARMA, ID 83660

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7019 2970 0000 4286 7075  
7019 2970 0000 4286 7075

**OFFICIAL USE**

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee	\$	
Extra Services & Fees (check box, add fee as appropriate)	\$	
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$	

Postmark Here

HANSON HOLDINGS, LLC  
32501 HWY 95  
PARMA, ID 83660

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

HANSON HOLDINGS, LLC  
32501 HWY 95  
PARMA, ID 83660

2. Article Number (Transfer from service label)

9590 9402 7934 2305 4180 73

7019 2970 0000 4286 7075

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt



RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

GLORIA M. LOCK  
5295 SAND HOLLOW  
NEW PLYMOUTH, ID 83655

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

New Plymouth, ID 83655

**OFFICIAL USE**

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48

GLORIA M. LOCK  
5295 SAND HOLLOW  
NEW PLYMOUTH, ID 83655

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7019 2970 0000 4286 7051  
7019 2970 0000 4286 7051

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

GLORIA M. LOCK  
5295 SAND HOLLOW  
NEW PLYMOUTH, ID 83655

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

GLORIA M. LOCK  
5295 SAND HOLLOW  
NEW PLYMOUTH, ID 83655

2. Article Number (Transfer from service label)

9590 9402 8084 2349 0160 38

7019 2970 0000 4286 7051

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

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

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

ENDURANCE HOLDINGS, LLC  
1977 EAST OVERLAND ROAD  
MERIDIAN, ID 83642

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>.

Meridian ID 83642

**OFFICIAL USE**

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$4.40
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48

ENDURANCE HOLDINGS, LLC  
1977 EAST OVERLAND ROAD  
MERIDIAN, ID 83642

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**

7019 2970 0000 4286 7037  
7019 2970 0000 4286 7037

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>.

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

ENDURANCE HOLDINGS, LLC  
1977 EAST OVERLAND ROAD  
MERIDIAN, ID 83642

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

ENDURANCE HOLDINGS, LLC  
1977 EAST OVERLAND ROAD  
MERIDIAN, ID 83642

Article Number (Transfer from service label)  
9590 9402 8084 2349 0160 21

7019 2970 0000 4286 7037

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery

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

3. Service Type

<input checked="" type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery	

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

DARLEEN M. WALKER  
GARY LEE WALKER  
1626 OAK AVENUE  
FRUITLAND, ID 83619

ETD2 9924 0000 0262 6T02

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

0753 02  
SEP 15 2025  
09/15/2025

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.78
<b>Total</b>	<b>\$10.48</b>

DARLEEN M. WALKER  
GARY LEE WALKER  
1626 OAK AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7019 2970 0000 4286 7013  
7019 2970 0000 4286 7013

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	\$
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
<b>Total</b>	<b>\$</b>

DARLEEN M. WALKER  
GARY LEE WALKER  
1626 OAK AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PS Form 3811, July 2020 PSN 7530-02-000-9053

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

DARLEEN M. WALKER  
GARY LEE WALKER  
1626 OAK AVENUE  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

9590 9402 8084 2349 0160 07

7019 2970 0000 4286 7013

**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

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

RIVER OIL & GAS  
FERSON AVENUE  
KANA, AR 71854

CLOUDLAND, LLC  
125 BEECH STREET  
FRUITLAND, ID 83619

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).  
Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

CLOUDLAND, LLC  
125 BEECH STREET  
FRUITLAND, ID 83619

0753  
02

Postmark  
Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7019 2970 0000 4286 7006  
7019 2970 0000 4286 7006

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

CLOUDLAND, LLC  
125 BEECH STREET  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)  
7019 2970 0000 4286 7006

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery

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

3. Service Type

☒ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

CLOUDLAND, LLC  
125 BEECH STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Domestic Return Receipt



RIVER OIL & GAS  
FFERSON AVENUE  
KANA, AR 71854

SHARON L. HARMON  
166 ASH LOOP  
FRUITLAND, ID 83619

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

**OFFICIAL USE**

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48

0753 02

Postmark Here

09/15/2025

SHARON L. HARMON  
166 ASH LOOP  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7020 1290 0000 0163 9774

7020 1290 0000 0163 9774

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Postmark Here

SHARON L. HARMON  
166 ASH LOOP  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.

2. Print your name and address on the reverse so that we can return the card to you.

3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SHARON L. HARMON  
166 ASH LOOP  
FRUITLAND, ID 83619

9590 9402 9510 5069 7942 21

7020 1290 0000 0163 9774

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ X

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

<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

SUSAN & JACK WINSTON  
309 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

FRUITLAND, ID 83619

**OFFICIAL USE**

0753 02

Postmark Here

09/15/2025

SUSAN & JACK WINSTON  
309 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7020 1290 0000 0163 9859  
7020 1290 0000 0163 9859

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

SUSAN & JACK WINSTON  
309 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

SUSAN & JACK WINSTON  
309 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9859

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent ☒ X

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<sup>®</sup>

☐ Registered Mail<sup>TM</sup>

☐ Signature Confirmation<sup>TM</sup>

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery

☐ Insured Mail

☐ Registered Mail Express<sup>®</sup>

☐ Registered Mail<sup>TM</sup>

☐ Signature Confirmation<sup>TM</sup>

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery

☐ Insured Mail

Domestic Return Receipt

RIVER OIL & GAS  
FERSON AVENUE  
KANA, AR 71854

TYSEN KLAKE & KELLY KLAKE  
1718 HICKORY AVENUE  
FRUITLAND, ID 83619

Eh2L 2005 0000 DEEE 2202

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee \$5.30  
\$4.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

TYSEN KLAKE & KELLY KLAKE  
1718 HICKORY AVENUE  
FRUITLAND, ID 83619

0753

Postmark  
Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7022 3330 0000 5007 7243  
7022 3330 0000 5007 7243

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

TYSEN KLAKE & KELLY KLAKE  
1718 HICKORY AVENUE  
FRUITLAND, ID 83619

Certified Mail Fee  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$

Postmark  
Here

**OFFICIAL USE**

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)  
7022 3330 0000 5007 7243

9590 9402 9238 4295 5728 93



TYSEN KLAKE & KELLY KLAKE  
1718 HICKORY AVENUE  
FRUITLAND, ID 83619

**SENDER: COMPLETE THIS SECTION**  
■ Complete items 1, 2, and 3.  
■ 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:

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent  
B. Received by (Printed Name) ☐ Addressee  
C. Date of Delivery  
D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No  
3. Service Type  
☐ Agent Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Mail Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
FFERSON AVENUE  
KANA, AR 71854

SHANNON M. CRAWFORD FAMILY TRUST  
POB 1106  
FRUITLAND, ID 83619

7926 E970 0000 062T 0202

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Fruitland, ID 83619

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

SHANNON M. CRAWFORD FAMILY TRUST  
POB 1106  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

SHANNON M. CRAWFORD FAMILY TRUST  
POB 1106  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)  
7020 1290 0000 0163 9767

3. Service Type  
☒ Certified Mail<sup>®</sup>  
☐ Registered Mail<sup>™</sup>  
☐ Signature Confirmation<sup>™</sup>  
☐ Signature Restricted Delivery<sup>™</sup>  
☐ Collect on Delivery  
☐ Restricted Delivery

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

A. Signature ☐ Agent  
☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7020 1290 0000 0163 9767  
7020 1290 0000 0163 9767

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$

Postmark Here

SHANNON M. CRAWFORD FAMILY TRUST  
POB 1106  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

IVER OIL & GAS  
ERSON AVENUE  
ANA, AR 71854

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>.

Fruitland, ID 83619

**OFFICIAL USE**

Certified Mail Fee \$5.30

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	\$4.40
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00

Postage \$0.78

\$10.48

0753 02

Postmark Here SEP 19 2025

09/15/2025

KATHRYN STINNETT  
205 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**

7020 1290 0000 0163 9842

7020 1290 0000 0163 9842

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)<sup>®</sup>.

**OFFICIAL USE**

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage \$

KATHRYN STINNETT  
205 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

KATHRYN STINNETT  
205 NW 9<sup>TH</sup> STREET  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9842

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

Domestic Return Receipt



RIVER OIL & GAS  
PERSON AVENUE  
ANA, AR 71854

RYAN HILLAM  
1820 N. WHITLEY DRIVE  
FRUITLAND, ID 83619

5886 6970 0000 0621 0202

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

FRUITLAND, ID 83619

**OFFICIAL USE**

Certified Mail Fee	\$5.30	
Extra Services & Fees (check box, add fee as appropriate)	\$4.40	
<input type="checkbox"/> Return Receipt (hardcopy)	\$3.00	
<input type="checkbox"/> Return Receipt (electronic)	\$1.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	

Postage \$0.78

\$10.48

0753 02

Postmark Here

SEP 15 2025

09/15/2025

RYAN HILLAM  
1820 N. WHITLEY DRIVE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7020 1290 0000 0163 9835  
7020 1290 0000 0163 9835

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee	\$	
Extra Services & Fees (check box, add fee as appropriate)	\$	
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage

RYAN HILLAM  
1820 N. WHITLEY DRIVE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

RYAN HILLAM  
1820 N. WHITLEY DRIVE  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

9590 9402 9238 4295 5582 86

7020 1290 0000 0163 9835

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery

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

3. Service Type

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery	

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

TERRY HURRLE & JONI HURRLE  
1865 WALNUT AVENUE  
FRUITLAND, ID 83619

4086 E9TD 0000 062T 0202

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48  
TERRY HURRLE & JONI HURRLE  
1865 WALNUT AVENUE  
FRUITLAND, ID 83619

0753  
02

Postmark  
Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9804  
7020 1290 0000 0163 9804

TERRY HURRLE & JONI HURRLE  
1865 WALNUT AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

Postmark  
Here

**OFFICIAL USE**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9804

9590 9402 9238 4295 5747 29



TERRY HURRLE & JONI HURRLE  
1865 WALNUT AVENUE  
FRUITLAND, ID 83619

- SENDER: COMPLETE THIS SECTION**
- Complete items 1, 2, and 3.
  - 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:

- COMPLETE THIS SECTION ON DELIVERY**
- A. Signature ☐ Agent
- B. Received by (Printed Name) ☐ Addressee
- 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®
- ☐ Registered Mail™
- ☐ Signature Confirmation™
- ☐ Signature Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

SUSAN M. NEWMAN  
182 ASH LOOP  
FRUITLAND, ID 83619

9666 6910 0000 0621 0202

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00  
Postage \$0.78

0753  
02

Postmark  
Here

09/15/2025

SUSAN M. NEWMAN  
182 ASH LOOP  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9003 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7020 1290 0000 0163 9798  
7020 1290 0000 0163 9798

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$

Postmark  
Here

SUSAN M. NEWMAN  
182 ASH LOOP  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9003 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

SUSAN M. NEWMAN  
182 ASH LOOP  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)

9590 9402 9238 4295 5747 43



7020 1290 0000 0163 9798

PS Form 3811, July 2020 PSN 7530-02-000-9003

**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**

- ☒ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation<sup>TM</sup>  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

SHAWN MATTHEW CRAIG  
JOHN W. & DORIS M. CRAIG FAMILY TR  
1634 OAK AVENUE  
FRUITLAND, ID 83619

1986 E9TD 0000 062T 0202

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$4.40  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00  
Postage \$0.78  
\$10.48

0753 02  
Postmark Here  
09/15/2025

SHAWN MATTHEW CRAIG  
JOHN W. & DORIS M. CRAIG FAMILY TRUST  
1634 OAK AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9781  
7020 1290 0000 0163 9781

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$  
Postmark Here

SHAWN MATTHEW CRAIG  
JOHN W. & DORIS M. CRAIG FAMILY TRUST  
1634 OAK AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

SHAWN MATTHEW CRAIG  
JOHN W. & DORIS M. CRAIG FAMILY TRUST  
1634 OAK AVENUE  
FRUITLAND, ID 83619

2. Article Number (Transfer from service label)  
9590 9402 9238 4295 5746 06  
7020 1290 0000 0163 9781  
PS Form 3811, July 2020 PSN 7530-02-000-9053

**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  
☒ Adult Signature  
☐ Registered Mail™  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

: RIVER OIL & GAS  
FFERSON AVENUE  
RKANA, AR 71854

JULIE R. FUGATE TRUST  
1861 NW 24<sup>TH</sup> STREET  
FRUITLAND, ID 83619

2726 6970 0000 0621 0202

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

FRUITLAND, ID 83619

Certified Mail Fee \$5.30  
\$4.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00  
Postage \$0.78

0753  
02

Postmark  
Here

09/15/2025

\$10.48

JULIE R. FUGATE TRUST  
1861 NW 24<sup>TH</sup> STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7020 1290 0000 0163 9712  
7020 1290 0000 0163 9712

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

JULIE R. FUGATE TRUST  
1861 NW 24<sup>TH</sup> STREET  
FRUITLAND, ID 83619

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$

Postmark  
Here

**OFFICIAL USE**

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

JULIE R. FUGATE TRUST  
1861 NW 24<sup>TH</sup> STREET  
FRUITLAND, ID 83619

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ X

☐ Agent

B. Received by (Printed Name)

☐ Addressee

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<sup>®</sup>

☐ Priority Mail Express<sup>®</sup>

☐ Registered Mail<sup>™</sup>

☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery

☐ Signature Confirmation<sup>™</sup>

☐ Collect on Delivery

☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery Restricted Delivery

☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)  
7020 1290 0000 0163 9712



9590 9402 9510 5069 7942 76



RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

JOVANI SALDIVAR -SALGADO & ASHLEY  
SALVIDAR  
1653 HICKORY AVENUE  
FRUITLAND, ID 83619

6212 9824 0000 0262 6102

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

0753  
02

Postmark  
Here

Postage \$0.78

09/15/2025

\$10.08 JOVANI SALDIVAR -SALGADO & ASHLEY  
SALVIDAR  
1653 HICKORY AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7019 2970 0000 4286 7129  
7019 2970 0000 4286 7129

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

JOVANI SALDIVAR -SALGADO & ASHLEY  
SALVIDAR  
1653 HICKORY AVENUE  
FRUITLAND, ID 83619

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

**OFFICIAL USE**

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

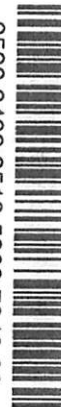
U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

2. Article Number (Transfer from service label)  
7019 2970 0000 4286 7129

9590 9402 9510 5069 7942 90



JOVANI SALDIVAR -SALGADO & ASHLEY  
SALVIDAR  
1653 HICKORY AVENUE  
FRUITLAND, ID 83619

**SENDER: COMPLETE THIS SECTION**  
■ Complete items 1, 2, and 3.  
■ 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:

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

☐ Agent

B. Received by (Printed Name)

☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes  
☐ No

3. Service Type

☒ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Mail Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

JOHN & JEAN SANDQUIST TRUST  
2750 ALDEN ROAD, UNIT 26  
FRUITLAND, ID 83619

5072 9824 0000 0262 6102

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).  
Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48  
JOHN & JEAN SANDQUIST TRUST  
2750 ALDEN ROAD, UNIT 26  
FRUITLAND, ID 83619

0753  
02

SEP 15 2025  
Postmark Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7019 2970 0000 4286 7105  
7019 2970 0000 4286 7105

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

JOHN & JEAN SANDQUIST TRUST  
2750 ALDEN ROAD, UNIT 26  
FRUITLAND, ID 83619

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$

Postmark  
Here

**OFFICIAL USE**

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

PS Form 3811, July 2020 PSN 7530-02-000-9053

2. Article Number (Transfer from service label)  
7019 2970 0000 4286 7105

9590 9402 7934 2305 4180 42



3. Service Type  
☒ Adult Signature  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Restricted Delivery

JOHN & JEAN SANDQUIST TRUST  
2750 ALDEN ROAD, UNIT 26  
FRUITLAND, ID 83619

**SENDER: COMPLETE THIS SECTION**  
■ Complete items 1, 2, and 3.  
■ 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:

**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

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

WILLIAM & HANNAH MURRY  
7740 RUDDER AVENUE  
BOISE, ID 83709

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Boise, ID 83709

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

0753  
02

Postmark  
Here

09/15/2025

WILLIAM & HANNAH MURRY  
7740 RUDDER AVENUE  
BOISE, ID 83709

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7019 2970 0000 4286 7068  
7019 2970 0000 4286 7068

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

WILLIAM & HANNAH MURRY  
7740 RUDDER AVENUE  
BOISE, ID 83709

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

WILLIAM & HANNAH MURRY  
7740 RUDDER AVENUE  
BOISE, ID 83709

2. Article Number (Transfer from service label)

9590 9402 8084 2349 0160 45

PS Form 3811, July 2020 PSN 7530-02-000-9000

**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**

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

GARY & HELEN FLOYD TRUST  
297 ASH LOOP  
FRUITLAND, ID 83619

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

GARY & HELEN FLOYD TRUST  
297 ASH LOOP  
FRUITLAND, ID 83619

0753  
02

Postmark  
Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7019 2970 0000 4286 7044  
7019 2970 0000 4286 7044

PS Form 3811, July 2020 PSN 7530-02-000-9063

2. Article Number (Transfer from service label)

9590 9402 7934 2305 4181 65

7019 2970 0000 4286 7044

GARY & HELEN FLOYD TRUST  
297 ASH LOOP  
FRUITLAND, ID 83619

- SENDER: COMPLETE THIS SECTION**
- Complete items 1, 2, and 3.
  - 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:

**COMPLETE THIS SECTION ON DELIVERY**

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

- 3. Service Type**
- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>™</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Certified Mail<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$

Postmark  
Here

GARY & HELEN FLOYD TRUST  
297 ASH LOOP  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7/ER OIL & GAS  
PERSON AVENUE  
NA, AR 71854

DICKINSON FROZEN FOODS, INC.  
1205 E. IRON EAGLE DRIVE SUITE B  
EAGLE, ID 83616

0202 9824 0000 0262 6102

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee	\$5.30	
Extra Services & Fees (check box, add fee as appropriate)	\$4.40	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$10.78	
<b>Total</b>	<b>\$20.48</b>	

0753 02

Postmark Here

09/15/2025

DICKINSON FROZEN FOODS, INC.  
1205 E. IRON EAGLE DRIVE SUITE B  
EAGLE, ID 83616

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**

7019 2970 0000 4286 7020  
7019 2970 0000 4286 7020

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee	\$5.30	
Extra Services & Fees (check box, add fee as appropriate)	\$4.40	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$10.78	
<b>Total</b>	<b>\$20.48</b>	

Postmark Here

DICKINSON FROZEN FOODS, INC.  
1205 E. IRON EAGLE DRIVE SUITE B  
EAGLE, ID 83616

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Complete items 1, 2, and 3.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DICKINSON FROZEN FOODS, INC.  
1205 E. IRON EAGLE DRIVE SUITE B  
EAGLE, ID 83616

2. Article Number (Transfer from service label)

7019 2970 0000 4286 7020

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input checked="" type="checkbox"/> Registered Mail™	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Insured Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™

Domestic Return Receipt



RIVER OIL & GAS  
FFERSON AVENUE  
RKANA, AR 71854

MONICA M. EGGERS  
128 SYCAMORE STREET  
FRUITLAND, ID 83619

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48

MONICA M. EGGERS  
128 SYCAMORE STREET  
FRUITLAND, ID 83619

Postmark  
Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9743  
7020 1290 0000 0163 9743

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	\$
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark  
Here

MONICA M. EGGERS  
128 SYCAMORE STREET  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

MONICA M. EGGERS  
128 SYCAMORE STREET  
FRUITLAND, ID 83619

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☒ X ☐ Agent

B. Received by (Printed Name) ☐ Addressee

C. Date of Delivery ☐ Yes  
If YES, enter delivery address below: ☐ No

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

3. Service Type

- ☒ Certified Mail®
- ☐ Registered Mail™
- ☐ Signature Confirmation™
- ☐ Signature Restricted Delivery
- ☐ Registered Mail™
- ☐ Signature Confirmation™
- ☐ Signature Restricted Delivery
- ☐ Registered Mail™
- ☐ Signature Confirmation™
- ☐ Signature Restricted Delivery

2. Article Number (Transfer from service label)

9590 9402 9510 5069 7942 52

Mail Restricted Delivery

PS Form 3871, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

RIVER OIL & GAS  
FFERSON AVENUE  
RKANA, AR 71854

RICHERT & KIMMIE WATKINS  
1648 HICKORY AVENUE  
FRUITLAND, ID 83619

0566 E910 0000 062T 0202

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.  
Fruitland, ID 83619

Certified Mail Fee \$5.30  
\$4.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

0753  
02

Postmark  
Here

09/15/2025

RICHERT & KIMMIE WATKINS  
1648 HICKORY AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9750  
7020 1290 0000 0163 9750

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

RICHERT & KIMMIE WATKINS  
1648 HICKORY AVENUE  
FRUITLAND, ID 83619

**OFFICIAL USE**

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Certified Mail Fee \$5.30  
\$4.40  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$0.00  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78  
\$10.48

Postmark  
Here

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
  - 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:

RICHERT & KIMMIE WATKINS  
1648 HICKORY AVENUE  
FRUITLAND, ID 83619

9590 9402 9510 5069 7942 38

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9750

PS Form 3811, July 2020 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature ☒ X ☐ Agent
- 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

- ☒ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

Mail Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
PERSON AVENUE  
KANAN, AR 71854

LARRY MORRIS  
8185 N. PENNSYLVANIA AVENUE  
FRUITLAND, ID 83619

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

FRUITLAND, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$4.40  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

\$10.48

0753  
02

Postmark  
Here

09/15/2025

LARRY MORRIS  
8185 N. PENNSYLVANIA AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7020 1290 0000 0163 9736  
7020 1290 0000 0163 9736

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postmark  
Here

LARRY MORRIS  
8185 N. PENNSYLVANIA AVENUE  
FRUITLAND, ID 83619

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
  - 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:

LARRY MORRIS  
8185 N. PENNSYLVANIA AVENUE  
FRUITLAND, ID 83619

9590 9402 9510 5069 7942 69

2. Article Number (Transfer from service label):

7020 1290 0000 0163 9736

PS Form 3811, July 2020 PSN 7530-02-000-9063

**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<sup>®</sup>  
☐ Registered Mail<sup>TM</sup>  
☐ Signature Confirmation<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery Restricted Delivery  
Mail Restricted Delivery

RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

KELBY G. BOWDEN & BRITTANY BOWDEN  
1685 OAK AVENUE  
FRUITLAND, ID 83619

6226 6970 0000 0621 0202

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Fruitland, ID 83619

Certified Mail Fee \$5.30  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$4.40  
☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.78

Total \$10.48

KELBY G. BOWDEN & BRITTANY BOWDEN  
1685 OAK AVENUE  
FRUITLAND, ID 83619

0753 02

Postmark Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7020 1290 0000 0163 9729  
7020 1290 0000 0163 9729

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$  
Total \$  
To \$  
St \$  
City \$  
State \$  
Zip \$

KELBY G. BOWDEN & BRITTANY BOWDEN  
1685 OAK AVENUE  
FRUITLAND, ID 83619

Postmark Here

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
  - 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:

KELBY G. BOWDEN & BRITTANY BOWDEN  
1685 OAK AVENUE  
FRUITLAND, ID 83619

9590 9402 9510 5069 7942 83

2. Article Number (Transfer from service label)

7020 1290 0000 0163 9729

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☐ Agent
- B. Received by (Printed Name) ☐ Addressee
- 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®  
☐ Adult Signature  
☐ Certified Mail Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

RIVER OIL & GAS  
FFERSON AVENUE  
RKANA, AR 71854

CHESTER BOREN & SANDRA BOREN  
2089 N. 6<sup>TH</sup> STREET  
PAYETTE, ID 83661

6669 9824 0000 0462 6102

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Payette ID 83661

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

\$10.48

CHESTER BOREN & SANDRA BOREN  
2089 N. 6<sup>TH</sup> STREET  
PAYETTE, ID 83661

Postmark  
Here

09/15/2025

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**



7019 2970 0000 4286 6993  
7019 2970 0000 4286 6993

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

CHESTER BOREN & SANDRA BOREN  
2089 N. 6<sup>TH</sup> STREET  
PAYETTE, ID 83661

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	\$
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postmark  
Here

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

7019 2970 0000 4286 6993

Domestic Return Receipt

2. Article Number (Transfer from service label)

9590 9402 8084 2349 0159 87



CHESTER BOREN & SANDRA BOREN  
2089 N. 6<sup>TH</sup> STREET  
PAYETTE, ID 83661

- SENDER: COMPLETE THIS SECTION
- Complete items 1, 2, and 3.
  - 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:

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Adult Signature              | <input type="checkbox"/> Priority Mail Express <sup>®</sup>         |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail <sup>TM</sup>              |
| <input type="checkbox"/> Certified Mail <sup>®</sup>             | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Signature Confirmation <sup>TM</sup>       |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery |   |
| <input type="checkbox"/> Insured Mail                            |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery        |   |



RIVER OIL & GAS  
PERSON AVENUE  
KANA, AR 71854

ANDARKO LAND CORP  
1201 LAKE ROBBINS DRIVE  
THE WOODLANDS, TX 77380

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

Spring, TX 77380

**OFFICIAL USE**

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

Total \$10.48

Ser

Str

City

Postmark Here

0753 02

09/15/2025

ANDARKO LAND CORP  
1201 LAKE ROBBINS DRIVE  
THE WOODLANDS, TX 77380

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL<sup>®</sup>**

7019 2970 0000 4286 6979  
7019 2970 0000 4286 6979

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	\$
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage

Total

Ser

Str

City

Postmark Here

ANDARKO LAND CORP  
1201 LAKE ROBBINS DRIVE  
THE WOODLANDS, TX 77380

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

ANDARKO LAND CORP  
1201 LAKE ROBBINS DRIVE  
THE WOODLANDS, TX 77380

2. Article Number (Transfer from service label)

7019 2970 0000 4286 6979

PS Form 3811, July 2020 PSN 7530-02-000-9053

**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

<input checked="" type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express <sup>®</sup>
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail <sup>TM</sup>
<input type="checkbox"/> Certified Mail <sup>®</sup>	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation <sup>TM</sup>
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	

Restricted Delivery

Domestic Return Receipt