#### STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION

APPLICATION OF ENCANA OIL & GAS (USA) INC. FOR APPROVAL OF THE BLANCO WASH UNIT, CREATION OF A NEW POOL FOR HORIZONTAL DEVELOPMENT WITHIN THE UNIT AREA, AND FOR ALLOWANCE OF 330 FOOT SETBACKS FROM THE EXTERIOR OF THE PROPOSED UNIT, SAN JUAN COUNTY, NEW MEXICO.

**CASE NO. 15212** 

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STATE OF NEW MEXICO	)
	) ss
COUNTY OF SANTA FE	)

Gabrielle A. Gerholt, attorney in fact and authorized representative of Encana Oil & Gas (USA) Inc., the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.

Gabrielle A. Gerholt

SUBSCRIBED AND SWORN to before this 1st day of October 2014 by Gabrielle A. Gerholt,



BEFORE THE OIL CONVERSATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 4

Submitted by: ENCANA OIL & GAS (USA) INC.
Hearing Date: October 2, 2014



Michael H. Feldewert Recognized Specialist in the Area ofNatural Resources - oil and gas law New Mexico Board of Legal Specialization mfeldewert@hollandhart.com

September 12, 2014

#### VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

TO: WORKING INTEREST OWNERS WITHIN THE UNIT

Re: APPLICATION OF ENCANA OIL & GAS (USA) INC. FOR APPROVAL OF THE BLANCO WASH UNIT, CREATION OF A NEW POOL FOR HORIZONTAL DEVELOPMENT WITHIN THE UNIT AREA, AND FOR ALLOWANCE OF 330 FOOT SETBACKS FROM THE EXTERIOR OF THE PROPOSED UNIT, SAN JUAN COUNTY, NEW MEXICO.

#### Ladies and Gentlemen:

This letter is to advise you that Encana Oil & Gas (USA) Inc. has filed the enclosed application with the New Mexico Oil Conservation Division and requested that this matter be scheduled for hearing before an Examiner on October 2, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as a Working Interest Owner within the proposed Unit, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date before the Division.

Parties desiring to appear in this case are required by Division Rule 19.15.4.13 NMAC to file a pre-hearing statement on or before 5 p.m. on the Thursday preceding the scheduled hearing date. The prehearing statement must be filed at the Division's Santa Fe office at the above specified address and an additional copy provided to my office. The pre-hearing statement must include: the names of the party and its attorneys; a concise statement of the party's position in the matter; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

If you have any questions about this matter, please contact: Mona Binion at Mona.Binion@Encana.com or (720) 876-5325.

Sincerely,

Michael H. Feldewert

ATTORNEYS FOR ENCANA OIL & GAS (USA) INC.



Michael H. Feldewert Recognized Specialist in the Area of Natural Resources - oil and gas law New Mexico Board of Legal Specialization mfeldewert@hollandhart.com

September 12, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING INTEREST OWNERS

Re: APPLICATION OF ENCANA OIL & GAS (USA) INC. FOR APPROVAL OF THE BLANCO WASH UNIT, CREATION OF A NEW POOL FOR HORIZONTAL DEVELOPMENT WITHIN THE UNIT AREA, AND FOR ALLOWANCE OF 330 FOOT SETBACKS FROM THE EXTERIOR OF THE PROPOSED UNIT, SAN JUAN COUNTY, NEW MEXICO.

#### Ladies and Gentlemen:

This letter is to advise you that Encana Oil & Gas (USA) Inc. has filed the enclosed application with the New Mexico Oil Conservation Division and requested that this matter be scheduled for hearing before an Examiner on October 2, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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If you have any questions about this matter, please contact: Mona Binion at Mona.Binion@Encana.com or (720) 876-5325.

Sincerely,

Michael H. Feldewert

ATTORNEYS FOR ENCANA OIL & GAS (USA) INC.



Michael H. Feldewert Recognized Specialist in the Area of Natural Resources - oil and gas law New Mexico Board of Legal Specialization mfeldewert@hollandhart.com

September 12, 2014

#### VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

TO: INDIAN ALLOTTEE MINERAL INTEREST OWNERS

RE: APPLICATION OF ENCANA OIL & GAS (USA) INC. FOR APPROVAL OF THE BLANCO WASH UNIT, CREATION OF A NEW POOL FOR HORIZONTAL DEVELOPMENT WITHIN THE UNIT AREA, AND FOR ALLOWANCE OF 330 FOOT SETBACKS FROM THE EXTERIOR OF THE PROPOSED UNIT, SAN JUAN COUNTY, NEW MEXICO.

#### Ladies and Gentlemen:

This letter is to advise you that Encana Oil & Gas (USA) Inc. has filed the enclosed application with the New Mexico Oil Conservation Division and requested that this matter be scheduled for hearing before an Examiner on October 2, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an affected Indian Allottee Mineral Interest Owner within the proposed Unit, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date before the Division.

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If you have any questions about this matter, please Mona.Binion@Encana.com or (720) 876-5325.

contact: Mona Binion at

Sincerely,

Michael H. Feldewert

Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401

David allen Pierce & Maxine Marcella Pierce Revocable Trust u/t/a 7/16/1996 P. O. Box 2802 Farmington, NM 87499

Nelson Minerals, LLC 4901 Crestwood Drive Farmington, NM 87401 Dorl Vamjprm Reemstma P. O. Box 4140 Farmington, NM 87499

Movest Capital P. O. Box 2439 Albany, TX 76430 Kennedy Minerals, Ltd 48 Road 6050 Farmington, NM 87401

Grover Family, LP P. O. Box 3666 Midland, TX 79702

Marilyn F. Menasco Revocable Trust dated 10/25/1996 7714 Stuebenway Stockton, CA 95270

Patricia Louise Dorsett Trust 16127 Chasemore Drive Spring, TX 77379 Virginia F. Zobeck Trust dated 9/1/2008 8003 Wayne Ave. Lubbock, TX 79424

Larry leon Parish 16127 Chasemore Drive Spring, TX 77379

The Ninety-Six Corporation 550 West Texace, Ste 1225 Midland, TX 79701

James R. Leeton, Jr. San Juan Royalty JV-90 P. O. Box 10561 Midland, TX 79702

HDBC Investments, Limited P. O. Box 12766 Dallas, TX 75225

ELSR, Limited Partnership 8080 N. Central Expressway Suite 1420, LB #12, Dallas, TX 75206

Paul Davis, Ltd P. O. Box 871 Midland, TX 79702

Cooksey Family Trust 4925 Greenvile Ave, Box 92 Dallas, TX 75206

Primitive Petroleum, Inc. 4514 Robin Lane Midland, TX 79707 James H. Essman P. O. Box 302 Midland, TX 79702

Charles B. Edmiaston P. O. Box 178 Justiceburg, TX 79330

Dick Holland 1801 West Wall St. Midland, TX 79702 Janice P. Campbell P. O. Box 2503 Midland, TX 79702

Mary L. Herrold Revocable Trust dated 1/7/1992 & Donald E. Herrold Revocable Trust dated 1/7/1992 6748 South Atlantic Place Tulsa, OK 74136

Icon Petroleum, Inc. 1411 West Illinois Ave. Midland, TX 79701 Kevin K. Leonard P. O. Box 50642 Midland, TX 79710

Miles Energy LLC PO Box 3841 Roswell, NM 88202 Dugan Production Corp. 709 East Murray Drive Farmington, NM 87401 R&R Royalty Ltd. 500 N. Shoreline Blvd., Suite 322 Corpus Christi, TX 78401

MARLENE MASON PO BOX 1604 FRUITLAND, NM 87416

ELIZABETH WERO CHAVEZ 314 S ASH ST AZTEC, NM 87410 SUSAN BEGAY PO BOX 1981 KIRTLAND, NM 87417

DANNY WERITO SR PO BOX 1794 BLOOMFIELD, NM 87413 ROSE B SANCHEZ PO BOX 1732 BLOOMFIELD, NM 87413

ERNEST VICTOR PO BOX 112 NAGEEZI, NM 87037

LUCY A MASON PO BOX 1862 BLOOMFIELD, NM 87413 DEBRA J CHAVEZ 4633 GILA ST TRLR 8 FARMINGTON, NM 87402 LAWRENCE CHARLIE PO BOX 5452 FARMINGTON, NM 87499

MARLENA MASON PO BOX 1604 FRUITLAND, NM 87416 MARY W VICTOR PO BOX 112 NAGEEZI, NM 87037 DICK H CHARLIE ESTATE PO BOX 2595 BLOOMFIELD, NM 87413

RAY LOPEZ PO BOX 422 NAGEEZI, NM 87037

JERRY VIGIL PO BOX 1836 FARMINGTON, NM 87499 MAYBELLE BEGAY PO BOX 1732 BLOOMFIELD, NM 87413

KATHLEEN VICTOR 600 W BLANCO BLVD APT 19 BLOOMFIELD, NM 87413 GLADYS STEWART, C/O AGNETHA GLOSHAY 3415 MATA ORTIZ DR SW ALBUQUERQUE, NM 87121

DAISY CHARLIE LEE PO BOX 5452 FARMINGTON, NM 87499

ROBERT R UPSHAW PO BOX 1862 BLOOMFIELD, NM 87413

LEONARD MASON JR PO BOX 1604 FRUITLAND, NM 87416 RICHARD R UPSHAW PO BOX 1543 FRUITLAND, NM 87416

SUSIE TRUJILLO PO BOX 2674 BLOOMFIELD, NM 87413 IDA WERITO BENALLY PO BOX 1006 AZTEC, NM 87410 LOUISE BEGAY HARKES PO BOX 2166 BLOOMFIELD, NM 87413

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HARRY VICTOR PO BOX 281 NAGEEZI, NM 87037	GEORGE WERITO PO BOX 3515 EARMINGTON, NM 87400	AUSTIN VICTOR PO BOX 71 NAGEEZI, NM 87037
NAGEEZI, NW 87037	FARMINGTON, NM 87499	NAGEEZI, NW 67037
ELAINE BETONI PO BOX 134	ARLANA R UPSHAW PO BOX 1543	SHANE MITCHELL MASON PO BOX 1604
NAGEEZI, NM 87037	FRUITLAND, NM 87416	FRUITLAND, NM 87416
CAROLINE BETCHELOR PO BOX 397	LEONARD MASON SR PO BOX 1604	RICHARD CHARLEY 29909 N 60TH ST
NAGEEZI, NM 87037	FRUITLAND, NM 87416	CAVE CREEK, AZ 85331
DARLENE J CHARLIE 4633 GILA ST TRLR 8 EARMINGTON, NM 87402	BESSIE SIMPSON 19 ROAD 6487	BENNY C BEGAY PO BOX 4152 SHURDOOK, NIM 87420
FARMINGTON, NM 87402  CARLA A KAYONNIE	KIRTLAND, NM 87417	SHIPROCK, NM 87420
(BEGAY) PO BOX 5535	DONALLIA WERITO LOPEZ 2132 ALVARADO DR NE ALBUQUERQUE, NM 87110	DONAHUE E WERITO PO BOX 2884 FARMINGTON, NM 87499
FARMINGTON, NM 87499	ALBOQUERQUE, IVIII 07110	ARMINGTON, NW 6747)
JUDY M BEGAY 2 ROAD 7588 BLOOMFIELD, NM 87413	CARLESTON VICTOR PO BOX 266 NAGEEZI, NM 87037	HARRY VIGIL PO BOX 6805 FARMINGTON, NM 87499
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AARON WERITO 2614 E 20TH ST APT C2 FARMINGTON, NM 87401	GABRIEL WERITO 2614 E 20TH ST APT C2 FARMINGTON, NM 87401	ROBBIE J WERITO 2 ROAD 3053 AZTEC, NM 87410
KEE VIGIL JR	CARLENA JAMES (BEGAY)	JERRY BEGAY
COUNTY RD 5109 #8 BLOOMFIELD, NM 87413	PO BOX 1043 IGNACIO, CO 81137	CR 7588 R2 #17A BLOOMFIELD, NM 87413

DORA MAE TOM (BEGAY)

RED VALLEY, AZ 86544

PO BOX 399

ETHEL P SMITH

BLOOMFIELD, NM 87413

PÒ BOX 1943

CARLOS L BEGAY

FARMINGTON, NM 87499

PO BOX 1756

KEVIN CHARLEY PO BOX 103 NAGEEZI, NM 87037

IRA S WERITO PO BOX 2535 BLOOMFIELD, NM 87413 LAWRENCE JACQUEZ PO BOX 275 NAGEEZI, NM 87037

CARL LEE BEGAY PO BOX 2524 KAYENTA, AZ 86033 RONALD JACQUEZ, C/O LINDA HOGUE PO BOX 1051 KIRTLAND, NM 87417

GARY BEGAY 2 ROAD 7588 BLOOMFIELD, NM 87413

RONNIE JACQUEZ, C/O SANDY JACQUEZ 228 S 1ST STREET BLOOMFIELD, NM 87413

CHARLES BEGAY JR 2 ROAD 7588 BLOOMFIELD, NM 87413

BYRON L WERITO PO BOX 26 COUNSELOR, NM 87018

DARRIN BEGAY 2 CR 7588 17A BLOOMFIELD, NM 87413 RAYLENE R UPSHAW, JENNIFER VIGIL, PARENT OF RAYLENE ROSE UPSHAW PO BOX 6805 FARMINGTON, NM 87499

XAVIER V BEGAY, CHERYL TSO, PARENT OF XAVIER V BEGAY PO BOX 48 NAGEEZI, NM 87037

SHAINE MASON POST OFFICE BOX 1494 FRUITLAND, NM 87416 SHAYLA S BEGAY, CHERYL TSO, PARENT OF SHAYLA S BEGAY PO BOX 48 NAGEEZI, NM 87037

ANDERSON, CATHERINE ANN	ANDERSON, PHOEBE	ARMSTRONG, BARBARA J
1585 S ASH ST	PO BOX 1782	PO BOX 6171
DENVER, CO 80222-3740	BLOOMFIELD, NM 87413	FARMINGTON, NM 87499
ARMSTRONG, JERRY	ARMSTRONG, ROGER	AYZE, BETTY L
25 COUNTY ROAD 5433	2 ROAD 7776	PO BOX 142
FARMINGTON, NM 87401	BLOOMFIELD, NM 87413	NAGEEZI, NM 87037
BETONIE, ELLA M	BLACKSMITH, RACHEL L	CHAVEZ, HARRY
945 N AUBURN SP #33	PO BOX 188	PO BOX 373
FARMINGTON, NM 87401	NAGEEZI, NM 87037	NAGEEZI, NM 87037
CHAVEZ, VIRGIL J	COMMANCHE, MARY HELEN	CURLEY, ELVIRA
508 N LINCOLN AVE 1	PO BOX 37	PO BOX 302
FARMINGTON, NM 87401	NAGEEZI, NM 87037	BLOOMFIELD, NM 87413
CURLEY, ERIC CASEY PO BOX 302 BLOOMFIELD, NM 87413	CURLEY, JEAN 910 S MEMORIAL DR SPACE 11 CORTEZ, CO 81321	CURLEY, MERRIL 4918 BELLFLOWER CIRCLE FARMINGTON, NM 87401
GARCIA, ALVIN PO BOX 512 BLOOMFIELD, NM 87413	GARCIA, EDDIE PO BOX 1424 BLOOMFIELD, NM 87413	GARCIA, ELVIS PO BOX 181 BLOOMFIELD, NM 87413
GARCIA, SEBRANA L 600 W BLANCO BLVD APT 40 BLOOMFIELD, NM 87413	HACEESA, EDWARD PO BOX 402 NAGEEZI, NM 87037	HACEESA, HARVEY PO BOX 393 NAGEEZI, NM 87037
HACEESA, RANDELL	HACEESA, RHONDA L	HACEESA, ROLINDA L
PO BOX 188	PO BOX 188	PO BOX 188
NAGEEZI, NM 87037	NAGEEZI, NM 87037	NAGEEZI, NM 87037
HACEESA, ROLINDA L PO BOX 188	HACEESA, RONNIE A PO BOX 188	HACEESA, RONNIE A PO BOX 188

NAGEEZI, NM 87037

NAGEEZI, NM 87037

NAGEEZI, NM 87037

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HACESSA, HOWARD PO BOX 393 NAGEEZI, NM 87037	HARRISON JR, JOHNSON PO BOX 111 NAGEEZI, NM 87037	HARRISON, JUDY PO BOX 453 NAGEEZI, NM 87037
NAGEEZI, NM 87037	NAGEEZI, NWI 87037	NAGEEZI, NW 87037
HARRISON, PAULINE	HARRISON, SARAH	HERNANDEZ, SANDY M
PO BOX 307 NAGEEZI, NM 87037	PO BOX 111 NAGEEZI, NM 87037	PO BOX 75 BLOOMFIELD, NM 87413
HOLIDAY, PAULINE M	HOSSESA, LOURA	LEVATO, CALVIN
HOUSE 4 COUNTY RD 7776 BLOOMFIELD, NM 87413	PO BOX 405 NAGEEZI, NM 87037	PO BOX 1191 IGNACIO, CO 81137
LEVATO, WENDELL L PO BOX 1191	LEWIS, JEFFERSON PO BOX 241	LEWIS, ROBINSON PO BOX 31
IGNACIO, CO 81137	NAGEEZI, NM 87037	NAGEEZI, NM 87037
LEWIS, SUSAN	LEWIS, THOMAS	LONE BEAR, DANA ALINE
PO BOX 785 CUBA, NM 87013	PO BOX 314 NAGEEZI, NM 87037	PO BOX 1312 NEW TOWN, ND 58763
MARTINEZ ESTATE, ROSE M EASTERN NAVAJO AGENCY	MARTINEZ, DOREEN F	MARTINEZ, EMMETT
PO BOX 328 CROWNPOINT, NM 87313	PO BOX 65444 Albuquerque, NM 87193	1300 NEW HAMPSHIRE 63 ROCKSPRING, WY 82901
MARTINEZ, LLOYD E	MARTINEZ, VERNA	MONTOYA, ADELINE GAIL
5304 BANDELIER DR NW ALBUQUERQUE, NM 87114	PO BOX 26 NAGEEZI, NM 87037	PO BOX 1248 DULCE, NM 87528
NICHLAS, EVA M	OTERO, ISABELLE T	SANDOVAL, LITA M
PO BOX 853 DULCE, NM 87528	PO BOX 8583 Albuquerque, NM 87198	235 MEADE ST DENVER, CO 80219
SYLVESTER ESTATE, MARTHA Y C/O THOMAS SYLVESTER	SYLVESTER SR, CHARLES H	SYLVESTER, MOANA M
PO BOX 636	PO BOX 6 NAGEEZI, NM 87037	PO BOX 2932 KIRTLAND, NM 87417
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NAGEEZI, NM 87037

**DULCE, NM 87528** 

KIRTLAND, NM 87417

SYLVESTER, THOMAS 1124 N FAIRGROUNDS RD #24, BOX 10 FARMINGTON, NM 87401

SYLVESTER, VINCENT D 1124 N FAIRGROUNDS RD #7 FARMINGTON, NM 87401 SYLVESTER, VINSTON D 1313 GRIFFIN AVE APT #2 FARMINGTON, NM 87401

THOMPSON JR, LARRY M PO BOX 3646 FARMINGTON, NM 87499 THOMPSON, TAMERA A 435 JEFFERSON ST AMERICAN FALLS, ID 83211 VALDEZ, JESSIE PO BOX 391 NAGEEZI, NM 87037

WERITO, MABEL PO BOX 83 NAGEEZI, NM 87037 WERITO, RUBY PO BOX 42 NAGEEZI, NM 87037 WERO, JANE M PO BOX 716 BLOOMFIELD, NM 87413

WILLIE ESTATE, AUDREY P 0 BOX 131 NAGEEZI, NM 87037

WILLIE, IRA M 758 STAGECOACH TRL DURANGO, CO 81301-8468 WILLIE, ROBERT J PO BOX 2233 BLOOMFIELD, NM 87413

YAZZIE, SHARON A PO BOX 1654 BLOOMFIELD, NM 87413

YAZZIE, VICTORIA A PO BOX 4012 SHIPROCK, NM 87420

ANTHONY, HAROLD G ALLEN, NANCY J AGUILAR, NANCY PO BOX 2626 1216 W AZTEC BLVD SP #3 CR 3186 #11 RUIDOSO DOWNS, NM 88346 **AZTEC, NM 87410 AZTEC, NM 87410** ANTONIO, EFFIE ARAGON, IRVETA ANTONIO, SHIRLEY PO BOX 5593 27 ROAD 5777 PO BOX 1255 FARMINGTON, NM 87499 FARMINGTON, NM 87401 KIRTLAND, NM 87417 ARAIZA, IFAITA ARMENTA, PAULINE ARMIJILLO JR, WALLACE A 409 W RIDGEWOOD DR PO BOX 1216 1616 WEST GARFIELD GARLAND, TX 75041-3022 DURANGO, CO 81302 PHOENIX, AZ 87005 ARMIJILLO, JORDAN K ARMIJO, MARCOS T ARMSTRONG, ROSE M 303 E SOUTH MOUNTAIN AVE **POST OFFICE BOX 373** PO BOX 1715 LOT #169 NAGEEZI, NM 87037 BLOOMFIELD, NM 87413 PHOENIX, AZ 85002 ATENCIO ESTATE, STEPHEN ATCITTY, ANNABELLE ATENCIO, CECIL EASTERN NAVAJO AGENCY PO BOX 1181 PO BOX 522 P 0 BOX 328 FARMINGTON, NM 87499 CANONCITO, NM 87026 CROWNPOINT, NM 87313 ATENCIO, ROBERT ATENCIO, RUTH H AUGUSTINE, ANITA M PO BOX 443 PO BOX 101 2310 W APACHE SP#23 NEEGEEZI, NM 87037 NAGEEZI, NM 87037 FARMINGTON, NM 87401 AUGUSTINE, FREDDIE AUGUSTINE, JUANITA L AYZE, JUANITA BOX 405 PO BOX 521 PO BOX 1413 BLOOMFIELD, NM 87413 CUBA, NM 87013 FRUITLAND, NM 87416 AYZE, SHAWNDENA S AYZE, RASHIDA G BARBER, JOANNE T 3958 MONTGOMERY BLVD NE PO BOX 1413 **126 E MAIN** APT 9 FRUITLAND, NM 87416 FARMINGTON, NM 87401 ALBUQUERQUE, NM 87109 BARBOAN, EDITH M BECENTI, DELENORE B BEGAY JR, ERNEST PO BOX 946 PO BOX 3004 PO BOX 5095

SHIPROCK, NM 87420

FARMINGTON, NM 87499

CUBA, NM 87013

BEGAY, ALVINA 15310 SE STEVENSON DR VANCOUVER, WA 98683	BEGAY, AMY L 3000 W RADCLIFF DR ENGLEWOOD, CO 80110	BEGAY, ANDERSON N 240 HWY 57 BLOOMFIELD, NM 87413
BEGAY, ANDREW T PO BOX 23 NAGEEZI, NM 87037	BEGAY, ANNIE I 1919 W TARRANT RD APT 515 GRAND PRAIRIE, TX 75050	BEGAY, BERNADINE N BOX 2213 BLOOMFIELD, NM 87413
BEGAY, CALVIN J #10 CR 6116 KIRTLAND, NM 87417	BEGAY, CLAUDIA R PO BOX 4218 SHIPROCK, NM 87420	
BEGAY, CORDELIA F PO BOX 3004 SHIPROCK, NM 87420	BEGAY, ELLA N 6073 CR 213 DURANGO, CO 81301	BEGAY, ELRINA 10 CR 6116 KIRTLAND, NM 87417
BEGAY, EMERSON N PO BOX 921 AZTEC, NM 87410	BEGAY, ERNEST PO BOX 5095 FARMINGTON, NM 87499	BEGAY, ERNESTINE PO BOX 5095 FARMINGTON, NM 87401
BEGAY, ERNIE 5860 TOWER RD APT 3 GREENDALE, WI 53129	BEGAY, ERWIN N PO BOX 921 AZTEC, NM 87410	BEGAY, EVA N PO BOX 921 AZTEC, NM 87410
BEGAY, GENE T PO BOX 296 NAGEEZI, NM 87037		BEGAY, HAROLD N PO BOX 921 AZTEC, NM 87410
BEGAY, HARRISON C/O EASTERN NAVAJO AGENCY PO BOX 328 CROWNPOINT, NM 87313	BEGAY, IRENE E 10 ROAD 5581 FARMINGTON, NM 87401	BEGAY, JACQUELINE N PO BOX 403 FARMINGTON, NM 87499
BEGAY, LEROY PO BOX 1309 CROWNPODIT NIM 07313	BEGAY, LILLIAN PO BOX 5095	BEGAY, LINDA N PO BOX 1532

FARMINGTON, NM 87499

BLOOMFIELD, NM 87413

CROWNPOINT, NM 87313

BETONE, VERNE L	BETONI, BYRON	BETONI, DAVID M
PO BOX 243	412 MOORE STREET	PO BOX 283
NAGEEZI, NM 87037	BLOOMFIELD, NM 87413	NAGEEZI, NM 87037
BETONI, EUGENE	BETONI, JOHN	BETONI, JOHNNY W
PO BOX 354	PO BOX 134	PO BOX 295
NAGEEZI, NM 87037	NAGEEZI, NM 87037	NAGEEZI, NM 87037
BETONI, JUAN E	BETONI, LEROY J	BETONI, RANDALL L
PO BOX 38	PO BOX 1192	14 ROAD 5150, NBU 1003 34
NAGEEZI, NM 87037	KIRTLAND, NM 87417	BLOOMFIELD, NM 87413
BETONI, RONNIE J	BEYALE JR, IKE	BEYALE, CARLADIA F
818 E MAIN #94	PO BOX 1331	PO BOX 993
FARMINGTON, NM 87401	TOHATCHI, NM 87325	FRUITLAND, NM 87416
BEYALE, DURWIN I	BEYALE, IRENE	BEYALE, IRVIN R
PO BOX 982	PO BOX 1643	27705 HWY 184
FRUITLAND, NM 87416	FRUITLAND, NM 87416	DOLORES, CO 81323
BEYALE, SHAWNDA	BEYALE, VALVEN D	BIA, DARLENE
PO BOX 1113	POST OFFICE BOX 3685	772 HOPE AVE
FRUITLAND, NM 87416	FARMINGTON, NM 87499	FARMINGTON, NM 87401
BINALLI, DOROTHY HARRISON 2011 TROY KING RD TRLR 200	BISILLY, JANE PO BOX 2164	BLACKIE ESTATE, JOE PO BOX 68
BLACKIE, JOLENE J PO BOX 1281	BLOOMFIELD, NM 87413  BLACKIE, LEONARD  C/0 JOLENE BLACKIE  206 PLAINVIEW DR	NAGEEZI, NM 87037  BLACKIE, LEROY PO BOX 2457
BLACKIE, SAMUEL 201 MOUNTAIN VIEW DR	BLOSCH, SANDRA M 303 E S MOUNTAIN AVE	KIRTLAND, NM 87417  BLUEEYES, GLORIA A PO BOX 2127
PACK SEDINGS WV 92001	DEFORME A 7 85042	EDITITIAND NIM 97/16

PHOENIX, AZ 85042

FRUITLAND, NM 87416

ROCK SPRINGS, WY 82901

BLUEEYES, LYDIA H	BLUEEYES, SADIE	BOO, RUTH I
1600 HARRISON ST	BOX 1462	PO BOX 156
BLOOMFIELD, NM 87413	FRUITLAND, NM 87416	MONTEZUMA CREEK, UT 84534
BOYD, SHERRY L 2132 ALVARADO NE ALBUQUERQUE, NM 87110	BRANTLEY, ROSE A 21 PERSIMMON DR MURRAY, KY 42071	BRAYFIELD, EVA 2501 LA PLATA HWY TRLR C FARMINGTON, NM 87401
BREWER, ARLINDA	BRIGHT, JESSIE	BUCK, BERTHA L
10700 ACADEMY NE #2318	5660 POST RD	PO BOX 1348
ALBUQUERQUE, NM 87111	WINSTON, GA 30187	SHIPROCK, NM 87420
BURNS, CHRISTIAN	CANUTO ESTATE, ALICE J	CANUTO JR, STEVEN
POST OFFICE BOX 3893	5502 W COMMANCHE	1420 YORK AVE SP 9
FARMINGTON, NM 87499	FARMINGTON, NM 87401	FARMINGTON, NM 87401
CANUTO JR, WILBUR	CANUTO, ANGEL E	CANUTO, BERTHA MAE SMITH
PO BOX 541	105 TEXAS SE	309 N 3RD ST SP #56
BLOOMFIELD, NM 87413	ALBUQUERQUE, NM 87108	BLOOMFIELD, NM 87413
CANUTO, CALVIN L	CANUTO, CURTIS	Canuto, Julia Mae Sandoval
PO BOX 1773	126 EAST MAIN ST	1420 YORK AVE #9
BLOOMFIELD, NM 87413	FARMINGTON, NM 87401	FARMINGTON, NM 87401
CANUTO, LEONARD	CANUTO, MABEL C	CANUTO, TULLY
309 N 3RD ST #22	PO BOX 3185	PO BOX 44
BLOOMFIELD, NM 87413	SHIPROCK, NM 87420	COUNSELOR, NM 87018
CANUTO, VIRGIL	CANUTO, WALTER	CANUTO, WILLARD
126 EAST MAIN	PO BOX 1773	PO BOX 541
FARMINGTON, NM 87401	BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413
CANUTO, WILTON E PO BOX 132	CASAUS, BERNICE P 5502 W COMANCHE	CASTIANO JR, RANDELL 126 EAST MAIN

FARMINGTON, NM 87401

FARMINGTON, NM 87401

FRUITLAND, NM 87416

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BEGAY, LOUISE J PO BOX 2451	BEGAY, MARILYN 126 EAST MAIN	BEGAY, MARVIN N PO BOX 343
FARMINGTON, NM 87401	FARMINGTON, NM 87401	NAGEEZI, NM 87037
BEGAY, MARY ETTA BOX 1048	BEGAY, MARY LOU N PO BOX 921	BEGAY, PAULINE W PO BOX 218
FRUITLAND, NM 87416	AZTEC, NM 87410	NAGEEZI, NM 87037
BEGAY, RENA PO BOX 5095	BEGAY, RUTH N PO BOX 2213	BEGAY, TRINA PO BOX 1132
FARMINGTON, NM 87499	BLOOMFIELD, NM 87413	FRUITLAND, NM 87416
BEGAY, VERNA NEZ 6021 14TH AVE SOUTH	BEGAY, WALLACE PO BOX 346	BEGAY, WILMA PO BOX 25
MINNEAPOLIS, MN 55417	NAGEEZI, NM 87037	NAGEEZI, NM 87037
BEGAYE, BRENT PO BOX 983	BELETSO, JEREMIAH J POST OFFICE BOX 3893	BELETSO, ZECHARIAH S POST OFFICE BOX 3893
BLOOMFIELD, NM 87413	FARMINGTON, NM 87499	FARMINGTON, NM 87499
BELIN, HAZEL I PO BOX 2803	BELON, CAROL A BOX 135	BENALLY, CAROLYN S #3 RD 6438, NBU 40
KIRTLAND, NM 87417	NAGEEZI, NM 87037	KIRTLAND, NM 87417
BENALLY, DAWN H 163 W 79TH #5-F	BENALLY, NORA A PO BOX 526	BENALLY, POLLY N PO BOX 3313
NEW YORK, NY 10024	BLOOMFIELD, NM 87413	FARMINGTON, NM 87401
BENALLY, RODGER V 6723 AVALON ST UNIT 8	BENNY, ALVA L PO BOX 3351	BENNY, ALVINA A PO BOX 5033
MESA, AZ 85205	KAYENTA, AZ 86033	MOHAVE VALLEY, AZ 86446
BENNY, DAVINA J	BENNY, ELVIN	BENNY, ELVIRA

PO BOX 2726

BLOOMFIELD, NM 87413

PO BOX 2726

BLOOMFIELD, NM 87413

PO BOX 1193

BLOOMFIELD, NM 87413

CASTIANO, ALLISON	CASTIANO, CHAVEZ B	CASTIANO, TAHIYAH J
126 E MAIN ST	PO BOX 3523	1628 MOON NE
FARMINGTON, NM 87401	SHIPROCK, NM 87420	ALBUQUERQUE, NM 87112
CASTIANO, TRAVIS R	CASTIANO, ZACHARIAH E	CASTILLO, JACQUELINE
126 E MAIN ST	1628 MOON NE	PO BOX 994
FARMINGTON, NM 87401	ALBUQUERQUE, NM 87112	CUBA, NM 87013-0994
CASTILLO, SARAH S PO BOX 4894 EL PASO, TX 79914	CASUSE, JOLANDA F 4860 W 4700 S APT 110 SALT LAKE CTY, UT 84118	CASUSE, ROGER L 1676 WEST 1190 NORTH CIR APT H ST GEORGE, UT 84770
CAYADITTO, BETTY J	CAYADITTO, EDISON	CAYADITTO, GARY
HCR 79 BOX 3087	1928 BUENA VISTA SE #C	PÓ BOX 22
CUBA, NM 87013	ALBUQUERQUE, NM 87106	CUBA, NM 87013
CAYADITTO, RICKY L	CHARLEY JR, JUAN	CHARLIE, CORA L
PO BOX 237	424 NORTH 4TH ST	1496 E 8 N RD
CUBA, NM 87013	BLOOMFIELD, NM 87413	MONTE VISTA, CO 81144
CHAVEZ JR, AMOS	CHAVEZ, ALICE	CHAVEZ, AMOS
PO BOX 240	PO BOX 23	PO BOX 240
COUNSELOR, NM 87018	MEXICAN SPRINGS, NM 87320	COUNSELOR, NM 87018
CHAVEZ, ANDREW	CHAVEZ, BESSIE A	CHAVEZ, FANNIE R
PO BOX 1512	18875 EAST SEAGULL DR	1119 JAMES CIRCLE
BLOOMFIELD, NM 87413	QUEEN CREEK, AZ 85142	BLOOMFIELD, NM 87413
CHAVEZ, JENITA 120 N MCQUEEN RD APT 246 CHANDLER, AZ 85225	CHAVEZ, MARQUEZ A POST OFFICE BOX 373 NAGEEZI, NM 87037	CHAVEZ, MICHAEL 715 W BROADWAY, SPACE 45 FARMINGTON, NM 87401
CHAVEZ, NITA L	CHAVEZ, ROSIE A	CHEVARILLO, ELOUISE
PO BOX 1342	PO BOX 1512	2550 EAST 16TH 8-203
BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413	FARMINGTON, NM 87401

ETCITTY, GEORGE C/O ERNESTINE NAKAI PO BOX 223 RED VALLEY, AZ 86544	ETCITTY, MARLENE PO BOX 5531 FARMINGTON, NM 87499	Etcitty, Raelyn C/O Kenny Burrows 5024 COYOTE WAY NE RIO RANCHO, NM 87144
Etcitty-Stevenson, Samantha	FORD, CALVIN	FORD, CHRISTINE
42 ROAD 5297	5930 W 79TH AVE	27 EAGLE ROCK VILLAGE
FARMINGTON, NM 87335	ARVADA, CO 80003	BUDD LAKE, NJ 07828
FORD, COLLEEN	FORD, ROXANA E	FRANK JR, STEVEN
5930 W 79TH AVE	5930 W 79TH AVE	PO BOX 2015
ARVADA, CO 80003	ARVADA, CO 80003-2516	SHIPROCK, NM 87420
FRANK, DARLENE	FRANK, DENNISON R	FRANK, ERNEST
PO BOX 1251	PO BOX 3461	PO BOX 5435
SHIPROCK, NM 87420	FARMINGTON, NM 87499	FARMINGTON, NM 87499
FRANK, STEPHANIE E	FRANK, SUSAN M	FRANK, TRAVIS
1061 DIEGO RD	PO BOX 1551	BOX 1561
SANTA ROSA, NM 88435	FARMINGTON, NM 87499	FARMINGTON, NM 87499
FRANK, TRISHA	FREELAND, JANICE J	GARCIA, AMBROSE
PO BOX 1561	PO BOX 2323	PO BOX 2276
FARMINGTON, NM 87499	GALLUP, NM 87305	BLOOMFIELD, NM 87413
GARCIA, ARABELLE	GARCIA, CALVERT	GARCIA, CHRISTINE C
PO BOX 1054	#5 CR 5245	PO BOX 1284
BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413
GARCIA, CLAUDIA	GARCIA, DARLENE	GARCIA, ISABELLE L
PO BOX 1725	305 LUPINE LANE	PO BOX 3314
BLOOMFIELD, NM 87413	FARMINGTON, NM 87401	FARMINGTON, NM 87499
GARCIA, JANINE L 2705 WHITE OAK DR	GARCIA, WILBERT PO BOX 1658 KIRTLAND, NM 87417	GARCIA, ZELDA G #7; CR 5245 BLOOMEIELD, NM 87413

KIRTLAND, NM 87417

BLOOMFIELD, NM 87413

PLANO, TX 75074

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COMANCHE, JOHN P	COSTILLO, DORIS T	CURLEY, RITA L
20 ROAD 7588	HCR 79 BOX 3030	PO BOX 1180
BLOOMFIELD, NM 87413	CUBA, NM 87013	CHINLE, AZ 86503
CURTIS, PHOEBE ANN PO BOX 1533 KIRTLAND, NM 87417		DECKER, ROSIE F PO BOX 1352 FRUITLAND, NM 87416
DEED SIMPSON, NATHANIEL	DEED, DELORES	DEED, SAMUEL L
PO BOX 593	PO BOX 593	PO BOX 593
FARMINGTON, NM 87499	FARMINGTON, NM 87499	FARMINGTON, NM 87499
DENNISON, HELEN T	DESHEUQUTTE, CYNTHIA	DOMINGO, LILLIE W
PO BOX 1694	PO BOX 982	BOX 228
TOHATCHI, NM 87325	FRUITLAND, NM 87416	NAGEEZI, NM 87037
DUBOISE, SUSIE	DUCKEY, APRIL LARUE	EASCHIEF, AARON D
PO BOX 1674	PO BOX 942	10005 E OSBORN RD
GALLUP, NM 87305	PARKER, AZ 85344	SCOTTSDALE, AZ 85256
Easchief, Cristen Owen Louis	EDWAY, STANLEY	ELDRIDGE, LOUISE
888 E OAK ST	PO BOX 476	889 N 750 W APT 83
MESA, AZ 85203	NAGEEZI, NM 87037	PRICE, UT 84501
ELDRIDGE, REBECCA P	ERVIN, EMILIE I	ETCITTY, ADA
PO BOX 1493	P.O. BOX 1844	PO BOX 191
BLOOMFIELD, NM 87413	FARMINGTON, NM 87499	BLOOMFIELD, NM 87413
Etcitty, Anna Belle Victor	ETCITTY, ANNIE L	ETCITTY, CALVIN
PO BOX 1181	HC 79 BOX 46	PO BOX 1022
FARMINGTON, NM 87499	CUBA, NM 87013	FARMINGTON, NM 87499
ETCITTY, CAMIE	ETCITTY, CARMA	ETCITTY, COLLETTE

PO BOX 343

NAGEEZI, NM 87037

PO BOX 1394

SHIPROCK, NM 87420

PO BOX 343

NAGEEZI, NM 87037

GARNANEZ, BRENDA	GEORGE, KENNETH K	GEORGE, LUCY M
COUNTY ROAD 5364 #20	PO BOX 1216	PO BOX 323
FARMINGTON, NM 87401	DURANGO, CO 81302	NAGEEZI, NM 87037
GORDO, JAMES H (GORDO, HARRY) BOX 574 CUBA, NM 87013	HARRIS, MARY J 709 N BUENA VISTA AVE FARMINGTON, NM 87401	HARRISON ESTATE, LOUELLA P 0 BOX 95 FRUITLAND, NM 87417
HARRISON, HENDERSON H	HARRISON, JANICE T	HARRISON, JULIA
1604 HARRISON LANE	PO BOX 696	126 EAST MAIN ST
BLOOMFIELD, NM 87413	AZTEC, NM 87410	FARMINGTON, NM 87401
HARRISON, LEONA	HARRISON, LEROY	HARRISON, ROGER G
1214 RANDOLPH AV	1214 RANDOLPH RD	5561 ALDER ST
FARMINGTON, NM 87401	FARMINGTON, NM 87401	FARMINGTON, NM 87402
HARRISON, STEVE T 1077 S LAKE ST SALT LAKE CITY, UT 84105	HARRISON, TED 917 N LINCOLN AVE FARMINGTON, NM 87401	
HARRISON, TOMMY 235 2 S DUSTIN RD FARMINGTON, NM 87401	HARRISON, VIRGINIA L 115 N GODDARD AVE #29 F-2 IGNACIO, CO 81137	HARRISON, WAYNE E PO BOX 192 BLOOMFIELD, NM 87413
HARRISON, WILLIAM BOX 1031 KIRTLAND, NM 87417	HARRISON, WILLIE G 6315 N SAINT NICHOLAS CIR, UNIT 60 FLAGSTAFF, AZ 86004	HARRY, MARLENA PO BOX 4376 GALLUP, NM 87305
HASKIE, SHERALENE L	HASKIE, SHERIDAN P	HASKIE, SHERMAN
PO BOX 822	PO BOX 514	PO BOX 822
BLOOMFIELD, NM 87413	AZTEC, NM 87410	BLOOMFIELD, NM 87413
HELLER, BETTY	HENDERSON, JULIA T	HENDERSON, LILLIE M
1009 CALLE MARGARITA	4169A E, ROUTE 9 PMB 174	PO BOX 1463
SANTA FE, NM 87501	CUBA, NM 87013	CUBA, NM 87013

HENRY, VIRGINIA M 23 CR 5584 FARMINGTON, NM 87401	HERNANDEZ, LANETTE C 4515 Arrowhead Ridge Drive SE APT 820 RIO RANCHO, NM 87124	HERRERA, EFFIE PO BOX 5593 FARMINGTON, NM 87499
HERRERA, JANIE	HESUSE, CALVIN A	HESUSE, KEEVIN M
2103 N TUCKER #1	PO BOX 401	4604 HARMONY PL
FARMINGTON, NM 87401	NAGEEZI, NM 87037	ROHNERT PARK, CA 94928
HESUSE, LUCINDA J	HESUSE, MELVIN H	HESUSE, NATHANIEL
PO BOX 3940	PO BOX 3195	609 1/2 E. WILSON AVE.
GALLUP, NM 87305	CANONCITO, NM 87026	GALLUP, NM 87301
HOGUE, SANDRA	HOSEASE, ANDREA	HUBBARD, GENEVIEVE A
PO BOX 1662	PO BOX 1227	PO BOX 81123
KIRTLAND, NM 87417	FRUITLAND, NM 87416	ALBUQUERQUE, NM 87198
IGNACIO ESTATE, ANDY	IGNACIO, AMANDA R	IGNACIO, BERTHA M
2011 TROY KING ROAD 12	908 HOLLYWOOD ST A	BOX 2262
FARMINGTON, NM 87401	FARMINGTON, NM 87401	BLOOMFIELD, NM 87413
IGNACIO, BESSIE	IGNACIO, COLLEEN T	IGNACIO, DARVIN D
PO BOX 2124	PO BOX 1068	PO BOX 173
FARMINGTON, NM 87499	KAYENTA, AZ 86033	BLOOMFIELD, NM 87413
IGNACIO, DAVIS	IGNACIO, DELPHINE L	IGNACIO, ELLIS
PO BOX 829	1028 Chelwood Park Blvd NE	PO BOX 646
KIRTLAND, NM 87417	ALBUQUERQUE, NM 87112	BLOOMFIELD, NM 87413
IGNACIO, ELMER D	IGNACIO, FRANCES A	IGNACIO, HARRISON
PO BOX 253	908 HOLLYWOOD ST APT A	PO BOX 733
BLOOMFIELD, NM 87413	FARMINGTON, NM 87401	KAYENTA, AZ 86033
IGNACIO, JOANNE PO BOX 487 CROWNPOINT, NM 87313	IGNACIO, JOHNNY R 10800 COMANCHE RD NE #0223 ALBUQUERQUE, NM 87111	IGNACIO, KENNETH R PO BOX 2262 BLOOMFIELD, NM 87413

IGNACIO, KYLE R	IGNACIO, LIONEL	IGNACIO, LUCIA
908 HOLLYWOOD ST A	908 HOLLYWOOD ST A	PO BOX 363
FARMINGTON, NM 87401	FARMINGTON, NM 87401	BLOOMFIELD, NM 87413
IGNACIO, MARY	IGNACIO, MONICA R	IGNACIO, ROBERT A
PO BOX 2574	36 COUNTY RD 3935	PO BOX 1696
BLOOMFIELD, NM 87413	FARMINGTON, NM 87401	KAYENTA, AZ 86033
IGNACIO, RODNEY S	IGNACIO, ROGER	IGNACIO, STEVEN
36 COUNTY ROAD 3935	BOX 1643	PO BOX 1492
FARMINGTON, NM 87401	FARMINGTON, NM 87499	CHURCH ROCK, NM 87311
IGNACIO, SUSIE	IGNACIO, VANIA R	IRVIN, RAY
1509 MISTY GLEN TRL #916	PO BOX 1068	27705 HWY 184
ARLINGTON, TX 76011	KAYENTA, AZ 86033	DOLORES, CO 81323
JACKSON, CALVINA 14353E 1ST DRIVE UNIT 303 AURORA, CO 80011	JACQUEZ, JUANITA P BOX 514 AZTEC, NM 87410	JANSSEN, EDRIC D COUNTY RD 3950 NUMBER 50 FARMINGTON, NM 07401
JANSSEN, FAITH E	JANSSEN, HILDA	JANSSEN, KELLY B
POST OFFICE BOX 3893	PO BOX 334	126 E Main St.
FARMINGTON, NM 87499	KIRTLAND, NM 87417	FARMINGTON, NM 87401
JAQUEZ, JUANITA P	JAQUEZ, TOMMY	JIM, ALICE
BOX 514	126 E MAIN STREET	PO BOX 1946
AZTEC, NM 87410	FARMINGTON, NM 87401	BLOOMFIELD, NM 87413
JIM, BRUCE	JIM, CALVIN	JIM, CARL
PO BOX 1174	PO BOX 6487	1700 JUNIPER LN
FARMINGTON, NM 87499	FARMINGTON, NM 87499	BLOOMFIELD, NM 87413
JIM, CHERYL A	JIM, DAMIEN R	JIM, GEORGE
3330 BURSON LANE	11728 Wildhorse Trail SE	4609 SPRING MIST DR

ALBUQUERQUE, NM 87123 FARMINGTON, NM 87401

FARMINGTON, NM 87402

JIM, LORA A 908 MESA VIEJO ST SW ALBUQUERQUE, NM 87121 JIM, LORETTA 801 LOCUST PL NE APT 1248 ALBUQUERQUE, NM 87102

JIM, MARIE 1655 TRAMVIEW LANE NE RIO RANCHO, NM 87124

JIM, MIKE PO BOX 2166 BLOOMFIELD, NM 87413 JIM, RAYMOND PO BOX 1204 BLOOMFIELD, NM 87413

JIM, ROBERT 936 10TH AVE NE RIO RANCHO, NM 87124

JIM, SHIRLEY M PO BOX 1174 FARMINGTON, NM 87499

JIM, TRINNIE PO BOX 181 BLOOMFIELD, NM 87413 JIM-PINE, MARY PO BOX 2426 BLOOMFIELD, NM 87413

JOHNSON II, DONALD R PO BOX 2412 KIRTLAND, NM 87417-2412

JOHNSON, AUNDRIANA R 2504 EAST 23RD STREET FARMINGTON, NM 87401 JOHNSON, BRENDA PO BOX 2044 KIRTLAND, NM 87417

JOHNSON, CHRISHANA N 2504 EAST 23RD STREET FARMINGTON, NM 87401

JOHNSON, DANA C PO BOX 2412 KIRTLAND, NM 87417 JOHNSON, DAVID 305 E APACHE #3 FARMINGTON, NM 87401

JOHNSON, DEBORAH R 2504 EAST 23RD FARMINGTON, NM 87401

JOHNSON, DONALD R PO BOX 2412 KIRTLAND, NM 87417-2412 JOHNSON, EVANGELINE R 15365 FIRETOWER RD CONROE, TX 77306

JOHNSON, MARK 1216 WEST AZTEC BOULEVARD AZTEC, NM 87410 JOHNSON, PHIL C/O FRANK F JOHNSON 15 ROAD 6115 KIRTLAND, NM 87417

JOHNSON, RONDA J PO BOX 2412 KIRTLAND, NM 87417 JONES, MARVETTA A PO BOX 338 PINEHILL, NM 87357 JOSE, CLARIBELLE PO BOX 1392 BLOOMFIELD, NM 87413

JOSE, LORETTA L PO BOX 811 BLOOMFIELD, NM 87413 JOSE, STELLA HCR 17 BOX 415 CUBA, NM 87013 KELLYWOOD, HELENA L PO BOX 3380 SHIPROCK, NM 87420

KELLYWOOD, ROSE A	KING, MARLINA M	KINLICHEENIE, DARVA V
PO BOX 2141	PO BOX 4376	2011 TROY KING RD #444
KIRTLAND, NM 87417	GALLUP, NM 87305	FARMINGTON, NM 87401
KINLICHEENIE, JUDITH A	KINLICHEENIE, KRIS K	LARGO ESTATE, JERRY SR
2614 EAST 20TH APT F-6	370 ATRISCO DR SW APT 8	PO BOX 285
FARMINGTON, NM 87401	ALBUQUERQUE, NM 87105	NAGEEZI, NM 87037
LARGO ESTATE, JONES	LARGO ESTATE, NELLIE	LARGO SR, TEDDY R
COUNSELOR TRADING POST	P 0 BOX 141	PO BOX 904
COUNSELOR, NM 87018	CUBA, NM 87013	BLOOMFIELD, NM 87413
LARGO, CURTIS	LARGO, DENNISON F	LARGO, ERNEST
PO BOX 92	PO BOX 92	PO BOX 92
CUBA, NM 87013	CUBA, NM 87013	CUBA, NM 87013
LARGO, ESTHER A	LARGO, FREDDIE	LARGO, HAROLD
PO BOX 4203	PO BOX 2626	PO BOX 83
YAH TA HEY, NM 87375	RUIDOSO DOWNS, NM 88346	RUIDOSO DOWNS, NM 88346
LARGO, JIMMIE	LARGO, JOANNE	LARGO, PAULINE T
PO BOX 212	PO BOX 6484	PO BOX 141
CROWNPOINT, NM 87313	FARMINGTON, NM 87499	CUBA, NM 87013
LARGO, \$HEILA 1318 SAN PEDRO DRIVE SE, APT. A ALBUQUERQUE, NM 87108	LARGO, TOMMIE PO BOX 130 NAGEEZI, NM 87037	LARVINGO, EDDIE PO BOX 811 BLOOMFIELD, NM 87413
LARVINGO, LETTA J	LARVINGO, NELLIE F	LARVINGO, RAYMOND
PO BOX 1914	PO BOX 811	PO BOX 2026
BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413
LARVINGO, ROBERTA	LARVINGO, ROSETTA M	LARVINGO, ROY
1900 E 86TH ST APT 224	1900 E 86TH ST APT 224	PO BOX 1241

BLOOMINGTON, MN 55425 BLOOMINGTON, MN 55425 BLOOMFIELD, NM 87413

LARVINGO, SHEILA A	LEE, PRISCILLA	LEWIS, JONATHAN P
PO BOX 664	HCR 63 BOX 347	PO BOX 111
SAN JACINTO, CA 92581	WINSLOW, AZ 86047	SAN YSIDRO, NM 87053
LEWIS, LEONA M	LEWIS, ROSIE A	LOPEZ JR, DICK
1214 RANDOLPH AV	PO BOX 565	BOX 1014
FARMINGTON, NM 87401	SHIPROCK, NM 87420	CUBA, NM 87013
LOPEZ, ALICE M	LOPEZ, ALVIN	LOPEZ, BEN B
PO BOX 1014	16452 W BUCHANAN ST	PO BOX 307
CUBA, NM 87013-1014	GOODYEAR, AZ 85338-2564	NAGEEZI, NM 87037
LOPEZ, BESSIE	LOPEZ, BRENDA	LOPEZ, CARMELITA
PO BOX 791	PO BOX 7206	4045 S BUFFALO DR, STE A
CUBA, NM 87013	NAZLINI, AZ 86540	LAS VEGAS, NV 89147
LOPEZ, CHER L	LOPEZ, CHRIS	LOPEZ, CODY
PO BOX 1191	1212 S MONTEREY SP 27	PO BOX 2866
IGNACIO, CO 81137	FARMINGTON, NM 87401	KIRTLAND, NM 87417
LOPEZ, CORRINE	LOPEZ, CURTIS	LOPEZ, DANIEL
1212 S MONTEREY SP 427	PO BOX 127	PO BOX 6051
FARMINGTON, NM 87401	CUBA, NM 87013	FARMINGTON, NM 87499
LOPEZ, DANIEL D	LOPEZ, EDDIE	LOPEZ, FARON C
BOX 1014	P.O. BOX 1097	6317 OUTLOOK DR
CUBA, NM 87013	CUBA, NM 87013	CITRUS HEIGHTS, CA 95621
LOPEZ, GINO	LOPEZ, HARRISON	LOPEZ, HELEN C
PO BOX 1253	PO BOX 22	PO BOX 1253
TEEC NOS POS, AZ 86514	BLOOMFIELD, NM 87413	TEEC NOS POS, AZ 86514
LOPEZ, HERANDEZ PO BOX 1411	LOPEZ, HOLLY G PO BOX 1253	LOPEZ, IRENE S PO BOX 107

TEEC NOS POS, AZ 86514

NAGEEZI, NM 87037

CUBA, NM 87013

LOPEZ, JACQUELINE D PO BOX 2776 KIRTLAND, NM 87417 LOPEZ, JANIS 2011 TROY KING RD TRLR 440 FARMINGTON, NM 87401

LOPEZ, JEREMIAH PO BOX 7152 NAZLINI, AZ 86540

LOPEZ, LAURA PO BOX 332 FARMINGTON, NM 87499 LOPEZ, LENA PO BOX 1195 CUBA, NM 87013-1195 LOPEZ, LEONARD H 987 E NOLAN PL CHANDLER, AZ 85249-3346

LOPEZ, LORENZO PO BOX 1295 CUBA, NM 87013 LOPEZ, LOUISE W 2310 W APACHE ST LOT #12 FARMINGTON, NM 87401

LOPEZ, LYDIA PO BOX 81874 ALBUQUERQUE, NM 87198

LOPEZ, MARCO PO BOX 758 PLEASANT GROVE, UT 84062 LOPEZ, MARIE PO BOX 883 CUBA, NM 87013 LOPEZ, MYTTIAS PO BOX 7032 NAZLINI, AZ 86540

LOPEZ, NELSON PO BOX 107 NAGEEZI, NM 87037

LOPEZ, ODELL PO BOX 811 HOLBROOK, AZ 86025 LOPEZ, RACHEL A PO DRAWER 250 GRANTS, NM 87020

LOPEZ, RICKY PO BOX 7032 NAZLINI, AZ 86540 LOPEZ, RITA PO BOX 1544 CUBA, NM 87013 LOPEZ, ROSITA 1411 3RD ST SW APT B ALBUQUERQUE, NM 87102

LOPEZ, SHERRI L PO BOX 251 PINON, AZ 86510

LOPEZ, STELLA PO BOX 791 CUBA, NM 87013 LOPEZ, STEWART 6208 KEARNEY TRAIL NW ALBUQUERQUE, NM 87120

LOPEZ, TED PO BOX 1036 CUBA, NM 87013 LOPEZ, TEDDY PO BOX 386 NAGEEZI, NM 87037 LOPEZ, TIMOTHY PO BOX 2411 TUBA CITY, AZ 86045

LOPEZ, VICTORIA PO BOX 4412 BLUE GAP, AZ 86520 LOPEZ, WILLIAM I PO BOX 5146 GALLUP, NM 87305 LOPEZ, WILSON PO BOX 1157 CHURCH ROCK, NM 87311

LOPEZ, YAZZIE	MACE, BELVA J	MACE, EVA M
PO BOX 1057	419 GROVE ST NE	HC77 BOX 255
CUBA, NM 87013	ALBUQUERQUE, NM 87108	LAGUNA, NM 87026
MACE, JEREMY P 5313 CANDELARIA NE ALBUQUERQUE, NM 87109	MACE, JOE PO BOX 1323 CUBA, NM 87013	MACE, LENORA K BOX 1688 CUBA, NM 87013
MACE, OLIVIA S	MACE, OPHELIA G	MACE, SONJIA L
PO BOX 1323	5313 CANDELARIA NE	PO BOX 52162
CUBA, NM 87013	ALBUQUERQUE, NM 87110	ALBUQUERQUE, NM 87181
MACE, TAITUM T 313 PENNSYLVANIA ST NE APT C	MACE, TYSON C PO BOX 1952	MAGGARD, RUTH PO BOX 1251
ALBUQUERQUE, NM 87108  MAKIL, SARAH V	CUBA, NM 87013  MANUEL, LORRAINE L	BLOOMFIELD, NM 87413  MARTINEZ SR, FRED C
918 E MCDOWELL RD	PO BOX 332	4633 GILA #30
MESA, AZ 85203	FARMINGTON, NM 87499	FARMINGTON, NM 87402
MARTINEZ, CALBERT	MARTINEZ, CHANDA R	MARTINEZ, CUSTER
PO BOX 397	PO BOX 212	PO BOX 97
NAGEEZI, NM 87037	NAGEEZI, NM 87037	FINLEY, OK 74543
MARTINEZ, ELLA P	MARTINEZ, HAROLD A	MARTINEZ, LILLIE R
HCR 17 BOX 1997	PO BOX 80882	BOX 1621
CUBA, NM 87013	ALBUQUERQUE, NM 87198	ALBUQUERQUE, NM 87103
MARTINEZ, LORETTA	MARTINEZ, MAXINE A	MARTINEZ, PAULA A
CR 6402 # 31	PO BOX 56	38455 N SHERATON #774
KIRTLAND, NM 87417	NAGEEZI, NM 87037	BEACH PARK, IL 60087
MARTINEZ, STELLA	MASE, CALVIN	MASE, LARRY

PO BOX 543

CUBA, NM 87013

PO BOX 1358

CUBA, NM 87013

5328 Montgomery Blvd NE

ALBUQUERQUE, NM 87109

MCCALLISTER, CHARLENE	MOFFETT, NORMA J	MONTOYA, ELIZABETH
PO BOX 333	950 S MAGNOLIA AVE #45	PO BOX 1854
RUIDOSO DOWNS, NM 88346	LOS ANGELES, CA 90006	CUBA, NM 87013
MORGAN, ELRINA	MORGAN, NELIDA L	MORGAN, THERESA A
10 CR 6116	7121 CHANTELLE ST	PO BOX 864
KIRTLAND, NM 87417	FARMINGTON, NM 87401	CROWNPOINT, NM 87313
MOSE, ELEANOR R	MOWA, HELENE A	MURPHY, HELEN M
PO BOX 310244	29 CALLE CONTENTA	BOX 1243
MEXICAN HAT, UT 84531	FLAGSTAFF, AZ 86001	CROWNPOINT, NM 87313
MUSTACHE, SAMUEL L	NAVAJO NATION	NELSON, SARAH B
PO BOX 593	NAVAJO NATION	PO BOX 1215
FARMINGTON, NM 87499	WINDOW ROCK, AZ 86504	FRUITLAND, NM 87416
NELSON, SARAH I	NEWTON, ROSE	NEZ, ANGELIA M
PO BOX 1215	PO BOX 2643	PO BOX 778
FRUITLAND, NM 87416	BLOOMFIELD, NM 87413	CUBA, NM 87013
NEZ, AUTUMN R	NEZ, DOLLY	NEZ, EARL
PO BOX 1255	PO BOX 5701	PO BOX 584
KIRTLAND, NM 87417	FARMINGTON, NM 87499	BLANCO, NM 87412
NEZ, ELAINE	NEZ, LINDA	NEZ, MARILYN
200 FIGUEROA NE APT #112	PO BOX 1532	PO BOX 5434
ALBUQUERQUE, NM 87123	BLOOMFIELD, NM 87413	FARMINGTON, NM 87499
NEZ, MARY LOU	NEZ, PERRY	NEZ, PHILLIP
PO BOX 921	PO BOX 2842	200 FIGUEROA NE APT #112
AZTEC, NM 87410	FARMINGTON, NM 87499	ALBUQUERQUE, NM 87123
NEZ, RENA	NEZ, SHERILYN	NEZ, SHIRLEY ANN
PO BOX 1058	PO BOX 1255	PO BOX 1255

KIRTLAND, NM 87417

KIRTLAND, NM 87417

SHIPROCK, NM 87420

NEZ, STEVEN R	NEZ, TIMOTHY	NOCKAI, DEBBY
PO BOX 1255	12111 W DREYSUS DRIVE	506 WEST MAPLE
KIRTLAND, NM 87417	EL MIRAGE, AZ 85335	FARMINGTON, NM 87401
O'JOHN, VERA	OTERO, CHESTER L	OTERO, CYNTHIA
PO BOX 842	PO BOX 1712	PO BOX 642
IGNACIO, CO 81137	CUBA, NM 87013	CUBA, NM 87013
OTERO, ROY BOX 945 CUBA, NM 87013	PACHACO KENNETH, EVA M 42 ROAD 5580 FARMINGTON, NM 87407	PACHECO SR, LEO J PO BOX 281 BLOOMFIELD, NM 87413
PACHECO, HAROLD	PERRY, CAROLINE A	PETE, ANITA
PO BOX 2021	PO BOX 88	PO BOX 595
BLOOMFIELD, NM 87413	SMITH LAKE, NM 87365	CUBA, NM 87013
PINTO, BETTY	PINTO, CARLITA J	PINTO, ELVIRA
BOX 1547 HCR 79	PO BOX 723	PO BOX 803
CUBA, NM 87013	CUBA, NM 87013	GALLUP, NM 87305
PINTO, EVELYN	PINTO, HELEN O	PINTO, LOIS A
4307 TOPKE CT NE	PO BOX 1227	PO BOX 447
ALBUQUERQUE, NM 87109	CUBA, NM 87013	NAGEEZI, NM 87037
PINTO, NINA N	PINTO, TRINA	PLATERO, ANDY
PO BOX 34	PO BOX 1132	PO BOX 93
FRUITLAND, NM 87416	FRUITLAND, NM 87416	NAGEEZI, NM 87037
PLATERO, BETTY	PLATERO, BEVERLY A	PLATERO, BRIAN A
PO BOX 99	1600 CLIFFSIDE DR APT 177	PO BOX 3618
SANTA YSABEL, CA 92070	FARMINGTON, NM 87401	FARMINGTON, NM 87499
PLATERO, CHRISTINE 313 W SYCAMORE APT 2	PLATERO, DAN PO BOX 1381	PLATERO, DEANDRA PO BOX 1062

BLOOMFIELD, NM 87413

BLOOMFIELD, NM 87413

AUBURN, WA 98071

PLATERO, DIANA R	PLATERO, DIANE R	PLATERO, ERNEST J
PO BOX 43	PO BOX 43	7701 E OSBORN 271 W
BLUEWATER, NM 87005	BLUEWATER, NM 87005	SCOTTSDALE, AZ 85251
PLATERO, EVA	PLATERO, GEORGE	PLATERO, IDA M
PO BOX 93	PO BOX 93	412 E CEDAR AVE
NAGEEZI, NM 87037	NAGEEZI, NM 87037-0093	BLOOMFIELD, NM 87413
PLATERO, JESSICA L	PLATERO, LEANDER	PLATERO, LENORA J
54 RD 2598	PO BOX 1431	19 CR 7588
AZTEC, NM 87410	FARMINGTON, NM 87499	BLOOMFIELD, NM 87413
PLATERO, MARVIN L	PLATERO, MYRON	PLATERO, PHILLIP B
PO BOX 2054	PO BOX 73	PO BOX 43
BLOOMFIELD, NM 87413	ROCK POINT, AZ 86545	BLUEWATER, NM 87005
PLATERO, RAPHEAL	PLATERO, RICHARD	PLATERO, RITA R
PO BOX 1412	PO BOX 572	325 JAMES CIRCLE
FRUITLAND, NM 87416	BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413
PLATERO, RUBY A	PLATERO, STELLA	POSTOAK, SHIRLEY M
PO BOX 216	HCR 17 BOX 415	12317 E 16TH STREET
NAGEEZI, NM 87037	CUBA, NM 87013	TULSA, OK 74128
RANCK, JESSIE	RENTZ, EVA	REYOS, GLORIA M
7305 CATBRIER CT	PO BOX 1253	2908 LOS ANAYAS RD NW
FT WORTH, TX 76137	BLOOMFIELD, NM 87413	ALBUQUERQUE, NM 87104
RIVERA, ORLANDO M PO BOX 5868 FARMINGTON, NM 87499	ROANHORSE ESTATE, ARNOLD P 0 BOX 1261 NAVAJO, NM 87328	ROANHORSE JR, NELSON 1212 S MONTEREY SPACE 422 FARMINGTON, NM 87401
RODRIGUEZ, ELEICIA A	RODRIGUEZ, PRESTON V	RODRIGUEZ, RICHARD P
PO BOX 2334	PO BOX 6293	PO BOX 2334
BLOOMFIELD, NM 87413	FARMINGTON, NM 87499	BLOOMFIELD, NM 87413

ROGER, JULIA H	RUSSELL, CLARA	SAM, CINDRA T
126 EAST MAIN ST	PO BOX 24383	HCR 79 BOX 3066
FARMINGTON, NM 87401	SANTA FE, NM 87502	CUBA, NM 87013
SAM, ESTHER	SAM, FREDDIE	SAM, HARLAN
PO BOX 92	PO BOX 1822	#1 ROAD 6115
FRUITLAND, NM 87416	BLOOMFIELD, NM 87413	KIRTLAND, NM 87417
SAM, HAROLD	SAM, IRVIN	SAM, JESSIE M
506 WEST MAPLE	434 N 3RD	PO BOX 212
FARMINGTON, NM 87401	BLOOMFIELD, NM 87413	COUNSELOR, NM 87018
SAM, JULIAN	SAM, MELVIN	SAM, NASBAN
PO BOX 221	#14 COUNTY ROAD 4903	BOX 212
COUNSELOR, NM 87018	BLOOMFIELD, NM 87413	COUNSELOR, NM 87018
SAM, OSMUND	SAM, STEPHANIE	SAM, VERNA
PO BOX 234	PO BOX 1128	PO BOX 584
NAGEEZI, NM 87037	CUBA, NM 87013	BLANCO, NM 57412
SAM, VINA A PO BOX 2683 KIRTLAND, NM 87417	SAM, VIRGINIA 1200 MADEIRA DR SE APT 101 ALBUQUERQUE, NM 87108	SANCHEZ JR, BILLY PO BOX 1732 BLOOMFIELD, NM 87413
SANCHEZ, BENJAMIN L	SANCHEZ, BRIAN LEE	SANCHEZ, DANNY L
PO BOX 2062	PO BOX 1732	PO BOX 1111
BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413
SANCHEZ, HARRY	SANCHEZ, LANORIA A	SANCHEZ, MICHAEL
PO BOX 234	PO BOX 1732	PO BOX 1732
NAGEEZI, NM 87037	BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413
SANCHEZ, NORA ANN	SANCHEZ, ROSE B	SANCHEZ, ROSE MARIE

PO BOX 1732

BLOOMFIELD, NM 87413

PO BOX 2062

BLOOMFIELD, NM 87413

PO BOX 526

BLOOMFIELD, NM 87413

SANCHEZ, WALLACE PO BOX 1732 BLOOMFIELD, NM 87413	SANDOVAL ESTATE, THOMAS J C/O EASTERN NAVAJO AGENCY PO BOX 328 CROWNPOINT, NM 87313	SANDOVAL, AGNES PO BOX 62 CHURCHROCK, NM 87311
SANDOVAL, CHRISTOPHER J C/O LAWONDA SANDOVAL PO BOX 4344 DURANGO, CO 81302	SANDOVAL, JAMES PO BOX 254 TOHATCHI, NM 87325	SANDOVAL, JONATHAN PO BOX 695 CUBA, NM 87013
SANDOVAL, JULIA M	SANDOVAL, ROSE J	SANDOVAL, SYLVESTER
1420 YORK AVE #9	6808 IVY PI, SW	PO BOX 3765
FARMINGTON, NM 87401	ALBUQUERQUE, NM 87121	FARMINGTON, NM 87499
SANDOVAL, VELINDA	SANDOVAL, VIRGINIA T	SANDOVAL, VITTORIO T
PO BOX 674	HCR 79 BOX 3044	1612 31ST STREET SE
CUBA, NM 87013	CUBA, NM 87013	RIO RANCHO, NM 87124
SCOTT, EDDIE D	SCOTT, LAUREL	SCOTT, QUENBY D
PO BOX 2173	232 S 12TH AVE	PO BOX 765
BLOOMFIELD, NM 87413	PHOENIX, AZ 85007	ST MICHEALS, AZ 86511
SERAFIN, MAXINE	SHONE, CARMINIA A	SHORTY, ROSE M
PO BOX 102	PO BOX 251	PO BOX 384
DULCE, NM 87528	PINON, AZ 85510	SHIPROCK, NM 87420
SIFUENTES, IVA M	SILVER, GEORGINDA	SIMPSON, AARON D
PO BOX 45033	708 S TURNER ST	PO BOX 593
RIO RANCHO, NM 87174	BLOOMFIELD, NM 87413	FARMINGTON, NM 87499
SIMPSON, DELORES	SIMPSON, GLEN	SIMPSON, NATHANIEL
PO BOX 593	PO BOX 393	PO BOX 593
FARMINGTON, NM 87499	FRUITLAND, NM 87416	FARMINGTON, NM 87499
SIMPSON, TRACIE N	SMITH ESTATE, RUSSELL	SMITH, ALFRED
PO BOX 593	PO BOX 2535	PO BOX 1406

BLOOMFIELD, NM 87413

BLOOMFIELD, NM 87413

FARMINGTON, NM 87499

SMITH, ARNOLD C	SMITH, BERTHA M	SMITH, CHRISTINE M
1613 JUNIPER LN #789	309 N 3RD ST SP #56	PO BOX 1191
BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413	IGNACIO, CO 81137
SMITH, EDDIE L PO BOX 1987 BLOOMFIELD, NM 87413	SMITH, HAROLD PO BOX 336 NAGEEZI, NM 87037	SMITH, HOWARD C/O LEVI SMITH PO BOX 405 NAGEEZI, NM 87037
SMITH, JOANNE	SMITH, JOHNATHAN	SMITH, LEVI B
PO BOX 1851	1015 STATE AVE APT 1	PO BOX 405
FRUITLAND, NM 87416	ALAMOSA, CO 81101	NAGEEZI, NM 87037
SMITH, MAE L	SMITH, PHYLLIS	SMITH, ROLAND
PO BOX 161	153 S DEL RANCHO	PO BOX 1676
NAGEEZI, NM 87037	MESA, AZ 85208	CROWNPOINT, NM 87313
SMITH, STANLEY	SOCE, ELEANOR G	STEVENSON, LORRAINE
PO BOX 1943	818 EAST MAIN #22	42 ROAD 5297
BLOOMFIELD, NM 87413	FARMINGTON, NM 87401	FARMINGTON, NM 87401
STRUBLE, SHARON A	SUMMA, VERNA	TACHINE, ANNA ROSE
10606 TRIGGERS CRK	PO BOX 303	PO BOX 69
SAN ANTONIO, TX 78254	TOWAOC, CO 81334	CUBA, NM 87013
TAH, ISABEL R	TALAMANTE, MARILYN L	TALLWOOD, CLAUDEEN
PO BOX 186	PO BOX 921	PO BOX 944
CHURCH ROCK, NM 87311	AZTEC, NM 87410	NAVAJO, NM 87328
THOMAS, EVELYN W	THOMPSON, MAURICE	THOMPSON, PAUL
PO BOX 872	1912 PROSPECT NW	BOX 1736
CHINLE, AZ 86503	ALBUQUERQUE, NM 87104	FARMINGTON, NM 87499
TODACHEENE, LULA C 1676 HOLLYBERRY CT NE RIO RANCHO, NM 87144	TOLEDO ESTATE, DALPHINE PO BOX 831	TOLEDO, ALBERT L PO BOX 1180 CUBA, NM 87013

CUBA, NM 87013

RIO RANCHO, NM 87144

CUBA, NM 87013

TOLEDO, ANDY HCR 79 BOX 3089 CUBA, NM 87013	TOLEDO, CAROLINE 5683B ROUTE 9 CUBA, NM 87013	TOLEDO, DAVID C/O NELLIE TOLEDO POA HCR 79 BOX 3065 CUBA, NM 87013
TOLEDO, DOROTHY M	TOLEDO, EVANGELINE	TOLEDO, FREDDIE
HCR 79 BOX 8	PO BOX 1781	5683 B ROUTE 9
CUBA, NM 87013	CUBA, NM 87013	CUBA, NM 87013-6023
TOLEDO, GEORGE B	TOLEDO, GLADYS	TOLEDO, JENNIE
PO BOX 1255	HCR 79 BOX 3022	HCR 79 BOX 3011
CUBA, NM 87013	CUBA, NM 87013	CUBA, NM 87013
TOLEDO, LEO	TOLEDO, LORRAINE	TOLEDO, LYNN
PO BOX 1706	HCR 79 BOX 3021	PO BOX 1288
CUBA, NM 87013	CUBA, NM 87013	CUBA, NM 87013
TOLEDO, MARILYN	TOLEDO, MARY J	TOLEDO, MICHAEL
PO BOX 1288	PO BOX 1046	PO BOX 1706
CUBA, NM 87013	CUBA, NM 87013	CUBA, NM 87013
TOLEDO, NATASHIA R	TOLEDO, NELLIE	TOLEDO, NELSON
PO BOX 2276	HCR 79 BOX 3065	PO BOX 1706
FARMINGTON, NM 87499	CUBA, NM 87013	CUBA, NM 87013
TOLEDO, PETTERSON J	TOLEDO, RAMONA K	TOLEDO, RANDY
PO BOX 2172	PO BOX 2365	HCR 79 BOX 3010
CUBA, NM 87013	BLOOMFIELD, NM 87413	CUBA, NM 87013
TOLEDO, RUDY	TOLEDO, THEDA J	TRUJILLO JR, WILSON
BOX 1374	PO BOX 2712	506 WEST MAPLE
CUBA, NM 87013	FORT DEFIANCE, AZ 86504	FARMINGTON, NM 87401
TRUJILLO, ALVIN 45A RD 5295 FARMINGTON, NM 87401	TRUJILLO, ARNOLD C/O SUPERINTENDENT PO BOX 328 CROWNPOINT, NM 87212	TRUJILLO, ELENA 3805 S 100 W NIBLEY, UT 84321

CROWNPOINT, NM 87313

FARMINGTON, NM 87401

TRUJILLO, ELVINA B PO BOX 108 NAGEEZI, NM 87037	TRUJILLO, ELVIRA A PO BOX 108 NAGEEZI, NM 87037	TRUJILLO, ENA H PO BOX 108 NAGEEZI, NM 87037
TRUJILLO, ERNIE #18 RD 3935 FARMINGTON, NM 87401	TRUJILLO, ERVIN 2 CR 1738 FARMINGTON, NM 87401	TRUJILLO, IRENE 3704 LADERA ROAD APT 428 ALBUQUERQUE, NM 87120
TRUJILLO, KATHERINE E PO BOX 935 BLOOMFIELD, NM 87413		TSO, ANNETTE L PO BOX 1491 PENA BLANCA, NM 87041
TSO, DOROTHY 2011 TROY KING RD TRLR 200 FARMINGTON, NM 87401	TSO, LITA M PO BOX 123 GAMERCO, NM 87317	TSOSIE SR, JOE 126 EAST MAIN FARMINGTON, NM 87401
TSOSIE, BERTHA 3649 CHICAGO AVE S APT 2 MINNEAPOLIS, MN 55407	TSOSIE, BRENDA COUNTY ROAD 5364 #20 FARMINGTON, NM 87401	TSOSIE, CARLENE C/O ELVIRA P. TSOSIE PO BOX 2825 GALLUP, NM 87305
TSOSIE, ELVIRA P PO BOX 2825 GALLUP, NM 87305	TSOSIE, ERNESTINE 338 W YUMA ST PHOENIX, AZ 85003	TSOSIE, EVANGELINE PO BOX 2482 FARMINGTON, NM 87499
TSOSIE, JERIMIAH PO BOX 2825 GALLUP, NM 87305	TSOSIE, JOANNE 126 E MAIN FARMINGTON, NM 87401	TSOSIE, JODY PO BOX 2825 GALLUP, NM 87305
TSOSIE, JOE 126 EAST MAIN FARMINGTON, NM 87401	TSOSIE, KENDRICK C/O ELVIRA P. TSOSIE PO BOX 2825 GALLUP, NM 87305	TSOSIE, RACHEL J PO BOX 2825 GALLUP, NM 87305
VALDEZ, MARILYN A PO BOX 1514 FARMINGTON, NM 87400	VALDEZ, VIRGINIA 3651 S ARVILLE ST #153	VAN WINKLE, INA PO BOX 1336

LAS VEGAS, NV 89103

FRUITLAND, NM 87416

FARMINGTON, NM 87499

VICTOR SR, DAN	VICTOR, CAROLINE	VICTOR, DAN
1201 SAN PEDRO DR SE #24	600 W BLANCO BLVD #29	1201 SAN PEDRO DR SE
ALBUQUERQUE, NM 87108	BLOOMFIELD, NM 87413	ALBUQUERQUE, NM 87108
VICTOR, DANNY	VICTOR, DANNY H	VICTOR, DARLENE
126 EAST MAIN	PO BOX 5190	717 RUTH LN, APT 402
FARMINGTON, NM 87401	FARMINGTON, NM 87499	BLOOMFIELD, NM 87413
VICTOR, IRENE	VICTOR, KENNETH	VICTOR, RANDELL
99 SCORPIOS ISLAND ST	PO BOX 1072	PO BOX 291
HENDERSON, NV 89012	TEECNOSPOS, AZ 86514	BLOOMFIELD, NM 87413
VICTOR, SAMUEL	VICTOR, STANLEY	VOLKER, VERNA N
PO BOX 291	BOX 1437	6021 14TH AVE SOUTH
BLOOMFIELD, NM 87413	SHIPROCK, NM 87420	MINNEAPOLIS, MN 55417
WATSON, MARY H PO BOX 658 AZTEC, NM 87410		WAUNEKA, NELSON PO BOX 756 FORT DEFIANCE, AZ 86504
WEEDER, ALICE	WERITO, RITA A	WERO, HERBERT
PO BOX 286	809 S MESA VERDE AVE	PO BOX 66
LAGUNA, NM 87026	FARMINGTON, NM 87401	ANETH, UT 84510
WESLEY, SAM C/O EASTERN NAVAJO AGENCY PO BOX 328 CROWNPOINT, NM 87313	WHITE ESTATE, DOLLY N PO BOX 5701 FARMINGTON, NM 87499	WHITE, GERALDINE PO BOX 365 FRUITLAND, NM 87416
WHITE, OPAL L	WHITEHORSE, PEARL	WILLIAMS, DEANDRA P
912 N REVERE #101	63 CR 6480 NBU 44C	PO BOX 1062
MESA, AZ 85201	KIRTLAND, NM 87417	AUBURN, WA 98071
WILLIE, IRA M	WILSON, MARY HELEN WATSON	WOODIE, JOHN A

PO BOX 658 AZTEC, NM 87410 PO BOX 135

NAGEEZI, NM 87037

758 STAGECOACH TRL

DURANGO, CO 81301-8468

## ENCANA OIL & GAS (USA) INC. BLANCO WASH UNIT DENVER MAILING LIST

WOODY, LILLIAN PO BOX 5095 FARMINGTON, NM 87499 WOODY, LOUISE PO BOX BLL – RRTP CHINLE, AZ 86503 WOODY, MELVIN E PO BOX 228 NAGEEZI, NM 87037

YAZZIE ESTATE, NORBERT 709 N. Buena Vista Ave. FARMINGTON, NM 87401 YAZZIE, ALFRED 1505 BLUFFVIEW AVENUE FARMINGTON, NM 87401 YAZZIE, ANDREW PO BOX 1782 BLOOMFIELD, NM 87413

YAZZIE, ANGELINA W PO BOX 2261 KIRTLAND, NM 87417 YAZZIE, DAVID PO BOX 816 BLOOMFIELD, NM 87413 YAZZIE, DEION J C/O CALVINA MARTINEZ 11800 MONTGOMERY NE APT #2097 ALBUQUERQUE, NM 87111

YAZZIE, GENEVIEVE L BOX 2074 BLOOMFIELD, NM 87413 YAZZIE, HAROLD GERI-A-113 DRAWER 1328 LOS LUNAS, NM 87031 YAZZIE, THERESA A PO BOX 1371 BLOOMFIELD, NM 87413

YAZZIE, WILLIE PO BOX 194 NAGEEZI, NM 87037

U.S. Postal Service™ CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage MHF/ENCANA For delivery information vi **BLANCO WASH** m 43 Postage m Д, Certified Fee Return Receipt Fee (Endorsement Required) Restricted Dalivery Fee (Endorsement Required) 2760 AARON WERITO 2614 E 20TH ST APT C2 700F FARMINGTON, NM 87401

#5 Form 3800. August 2006 row .... See Reverse for Instructions

U.S. Postal Service TM CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Ip 70, MHF/ENCANA For delivery information visit BLANCO WASH ш Postage Ш Certified Fee 0003 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 ANDERSON, CATHERINE ANN 1585 S ASH ST DENVER, CO 80222-3740 PS Form 3800, August 2006 See Reverse for Instructions

ACE STICKER AT TOP OF ENVELOPE TO THE RIGHT	18
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addressee  D. 15 Oelivery address different from item 1?  Yes
Article Addressed to:	ener delivery address below:
AARON WERITO  2614 E 20TH ST APT C2  FARMINGTON, NM 87401	Bal service Wine
	Certified Mail  D Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.
•	4. Restricted Delivery? (Extra Fee)
2. Article Number	2760 0001 6378 3064
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS BENDER: COMPLETE THIS SENDER: COMPLETE THIS SENDER:	CUMPLE . E TION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X Jung Jun Ell Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  DOUG Thin Fl.K.
Article Addressed to:	D. Is delivery address different from item 1?
ANDERSON, CATHERINE ANN 1585 SASH.ST DENVER, CO 80222-3740	3. Service e SEP   8 75 A   1   1   1   1   1   1   1   1   1
2. Article Number	0001 6377 6707

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540 ·

U.S. Postal Service m CERTIFIED MAILIM RECEIPT (Domestic Mail Only; No MHF/ENCANA For delivery information vi **BLANCO WASH** m Postage J Certified Fee 1000 贸 Return Receipt Fee (Endorsement Required) Postmatic Here Restricted Delivery Fee (Endorsement Required) 760 'n ANDERSON, PHOEBE 700E PO BOX 1782 BLOOMFIELD, NM 87413



PHONECIE	
CACE STICKER AT TOP OF ENVELOPE TO THE RICHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	d was a second of being a
SENDER: COMPLETE THIS SECTION 14 BENDIES BOY	IIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits.	D. Is delivery address different from item 1?  Yes
1. Article Addressed to:	If YES, enter delivery address below:
ANDERSON, PHOEBE PO BOX 1782 BLOOMFIELD, NM 87413	3. Service Type  Description Mail  Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.
	4. Restricted Delivery? (Extra Fee)
PS Form 3811, February 2004  Domestic Return 3811, February 2004  Domestic Return 3811, February 2004  Domestic Return 3811, February 2004  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  AVILLE RESECTION ON DELIVERY
Article Addressed to:	D. Is delivery address different from item 1?
ARLANA R UPSHAW PO BOX 1543 FRUITLAND, NM 87416	3. Service Type  Certified Mail
2. Article Number	<del></del>
2. Article Number	
PS Form 3811, February 2004 Domestic Re	2760 0001 6378 2739 turn Receipt 102595-02-M-1540

U.S. Postal Service 74 CERTIFIED MAIL RECEIPT (Domestic Mail Only; N 77 20 MHF/ENCANA For delivery information v BLANCO WASH m Postage J Certified Fee 0001 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1922 ARMSTRONG, BARBARA J 7006 PO BOX 6171 FARMINGTON, NM 87499 :PS Form 3800, August 2006

7 5577	U.S. Postal Service Toll CERTIFIED MAILT RECEIPT (Domestic Mail Only; No For delivery information vis OFFIC			
27E	Postage	\$	· .	_
-10	Certified Fee	33,0	3	
0003	Return Receipt Fee (Endorsement Required)	270	Postmark \	
	Restricted Delivery Fee (Endorsement Required)		1.0	
2760	l	<del></del>	' <i>- 1</i>	
	ARMSTRO	NG, JERRY	· ( (	
90	25 COUNT	Y ROAD 543	3 ; 1	
7006	FARMING'	TON, NM 874	401 <sup>}</sup>	
	PS Form 3800, August 2	006	See Reverse for Instruction	กร

SENDER: COMPLETE THIS SECTION  SENDER: COMPLETE THIS SECTION  BITTOB OB ENACIONES TO THE DIGHT  BITTOB OB THIS SECTION  BITTOB	JIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Agent
ARMSTRONG, BARBARA J PO BOX 6171	If YES, enforced liver & Horses transow: No No 2014
FARMINGTON, NM 87499	3. Service Type  - Certified Mail
O Addis Number 1 1 1 455454 Te 5 1997	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7006 2760	0001 6377 6684
PS Form 3811, February 2004 Domestic Re	
ENDER: COMPLETE THIS SECTION	SECTION ON DELIVERY
item 4 if Restricted Delivery is desired. 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 mailplece, or on the front if space permits.	A. Signature  Agent  Addressee  B. Received by (Princed Name)  Addressee  C. Date of Delivery  Terry  Terry
Article Addressed to:	If YES, enter delivery address below:
ARMSTRONG, JERRY 25 COUNTY ROAD 5433	10 20 M S
	S. Service Type  Certified Mail  Registered  Reflum Beceipt for Merchandise  C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
Article Number (Transfer from service label) 7006 2760 10	007 737.
S Form 3811 February 2004 Domestic Return	

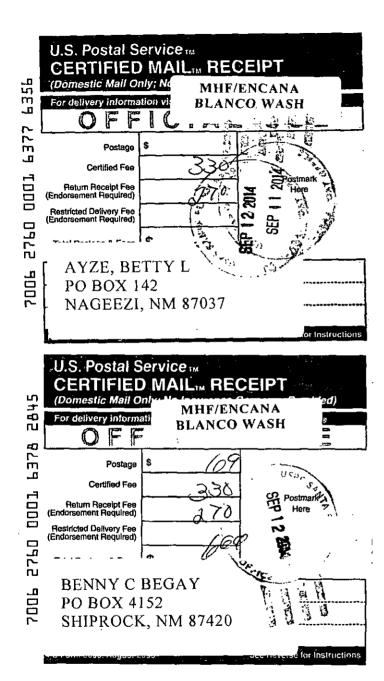
102595-02-M-1540

	SENDER: COMPLETE THIS SECTION	CTION ON DELIVERY
U.S. Postal Service TM CERTIFIED MAILTIN RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vi.  MHF/ENCANA BLANCO WASH	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  XBN (M A (MStrvm)   Addressee  B. Received by (Printed Name)   C. Date of Delivery  Brian Armstrony   9-27-14  D. Is delivery address different from Item 1?   Q-yes
Postage \$	1. Article Addressed to:	If YES, enter delivery address below:
Certified Fee 33 / Postmark Return Receipt Fee 27 / SEP 12 Here	ARMSTRONG, ROGER 2 ROAD 7776	
Restricted Delivery Fee (Endorsement Required)	BLOOMFIELD, NM 87413	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
ARMSTRONG, RUGER ———	•	4. Restricted Delivery? (Extra Fee)
岩 2 ROAD 7776 BLOOMFIELD, NM 87413	2. Article Number 7006 2760	0001 6377 6660
		eturn Receipt 102595-02-M-1540
PS Form 3800, August 2006 See Heverse for Instructions U.S. Postal Service TM	PLACE STICKER AT TOP OF ENVELORE TO THE RICHT  PLACE STICKER AT TOP OF ENVELORE ALTO TO THE PLACE  PLACE STICKER AND TABLESS, FOLD AT DOTTED LINE	
CERTIFIED MAIL RECEIPT	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
(Domestic Mail Onl For delivery informati  BLANCO WASH	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signreture  X Agent Addressee
Postage \$	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.	B. Received by (Printed Name) C. Date of Delivery
Certifled Fee 338	1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	• AUSTIN VICTOR • PO BOX 71	Austin Victor
AUSTIN VICTOR PO BOX 71	NAGEEZI, NM 87037	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise CO.D.
NAGEEZI, NM 87037		4. Restricted Delivery? (Extra Fee) Yes
lor Instructions	2. Article Number   7006 276	

PS Form 3811, February 2004

THE HEIGHW VEIDRESS FORD AT DOTTED LINE

Domestic Return Receipt



E BETURN ADDRESS, FOLD AT DOTTED LINE	HL 40 ECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X Betty Ays   B. Received by (Printed Name)  B. Printed Name)  C. Date of Delivery  Printed Name  17 Yes  If YES, enter delivery address below:
AYZE, BETTY L PO BOX 142 NAGEEZI, NM 87037	3. Service Type  Certified Mail
2. Article Number	001 6377 6356 H
PS Form 3811, February 2004 Domestic Ref	turn Receipt 102595-02-M-1540
SEINUEH: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Buy Bo Agent  Addressee  B. Received by (Phined Name)  Delivery  Delivery
Article Addressed to:	D. Is delivery address different from term 17  Yes  If YES, enter delivery address below:   No
BENNY C BEGAY PO BOX 4152	
SHIPROCK, NM 87420	3 Service Type  Certified Mail
2 Autology in the first th	4. Restricted Delivery? (Extra Fee) ☐ Yes
.2. Article Number.   11111 7006 2760	
	I UUUJ 6378 2845

U.S. Postal Service TA CERTIFIED MAIL RECEIPT (Domestic Mail Only; N MHF/ENCANA m **BLANCO WASH** For delivery information v 40 E Z Postage ı, Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  $\Box$ ۰ 27.5 BESSIE SIMPSON 7005 19 ROAD 6487 KIRTLAND, NM 87417 See Reverse for Instructions PS Form 3800, August 2006\*



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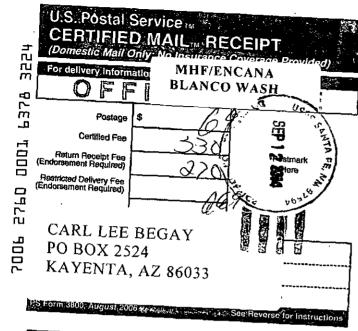
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Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  A. Signature  B. Received by (Printed Name)  C. Date of Defivery  D. Is delivery address different front Welfn 17  Yes  If YES, enter delivery address below:
BESSIE SIMPSON 19 ROAD 6487 KRILAND, NM 87417	3. Service Type  Certified Mail  Registered Return Receipt for Merchandise  Insured Mail  C.O.D.
	4. Restricted Delivery? (Extra Fee)
. Article Number	6 2760 0001 6378 2838
SENDER: LIPSK SHL OL SCOTT NEW THOSE STAND OF VALUE OF SCHOOL NEW SENDER: LIPSK SHL OL SCOTT NEW SENDER: LIPSK SENDE	A. Signature  A. Received by (Printed Name)  D. Is delivery address different from item 17  WYES, enter delivery address below:
BETONIE, ELLA M 945 N AUBURN SP #33 FARMINGTON, NM 87401	3. Service Type  Certified Mall Registered Insured Mall C.O.D.
2. Article Number	
(Transfer from service label)	1760 0001 6377 6349 ·
	Return Receipt 102595-02-M-154

U.S. Postal Service 144 **CERTIFIED MAILIM RECEIPT** (Domestic Mail Only; h MHF/ENCANA For delivery information **BLANCO WASH L37** Postage Certifled Fee 0003 Postmark Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 2760 BLACKSMITH, RACHE 7006 PO BOX 188 NAGEEZI, NM 87037 See Heverse for Instructions

ш	U.S. Postal Ser CERTIFIED I (Domestic Mail Only	MAIL REC	Covered De	
00	For delivery information	MHF/EN		
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3	Postage \$	69	,	O L
מ.	Certified Fee	330	,	SEP T
נטטט	Return Receipt Fee (Endorsement Required)	270	f Post	, m
	Restricted Delivery Fee (Endorsement Required)	1.69	1	40° 00° 00° 00° 00° 00° 00° 00° 00° 00°
2760		(De 1	A PA	a a f
	BYRON L W	/ERITO		
700F	PO BOX 26		<b>D</b> .	18 62 94
70	COUNSELO	R, NM 8701	8	
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for Instructions

AND GALLOR STORMS TO AN ENGINE STREET THIS SECTION OF THE HIGHLES STORMS OF THE SECTION OF THE S	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:
Article Addressed to:	If YES, enter delivery assured
A CHELI	
BLACKSMITH, RACHEL L	
PO BOX 188	3. Service Type
NAGEEZI, NM 87037	Certified Mail  Registered  Insured Mail  C.O.D.
	4. Restricted Delivery? (Extra Fee)
	7601000116377:6332
PS Form 3811, February 2004  Domestic In the state of the print your name and address on the reverse so that we can return the card to you.  Article Addressed to:	Return Receipt 102595-02-M-1540
BYRON L WERITO	
PO BOX 26	<u> </u>
COUNSELOR, NM 87018	3. Service Type Certified Mail
2. Article Number	
(Transfer from service label)	16 - 5760 10001 16378 3002
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-1540



.8 2852 	For delivery information  MHF/ENCANA BLANCO WASH	7)
, 7006 2760 0001 637	Postage \$  Certified Fee   330   Postmark    Return Receipt Fee (Endorsement Required)   Postmark    Restricted Delivery Fee   Postmark    Restric	C S WIT A P.E. N.A.
	Language of the first	uctions

PLACE STICKER AT TOP OF ENVELOPE TO THE BIGHT.	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.  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.	B Received by (Printed Name) C. Date of Delivery  D. is delivery address different from item 19 Yes
Article Addressed to:	If YES, enter delivery address below: Q No.3
CARL LEE BEGAY PO BOX 2524	
KAYENTA, AZ 86033	3. Service Type  Gertified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	LD DDD1 6378 3224
PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-1540
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X  Agent  Addressee
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.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:  CARLA A KAYONNIE	D. is deliver address prepared from item 1?
PO BOX 5535	2014 5
FARMINIOMON	
FARMINGTON, NM 87499	3. Service Type  Certified Mail
	Certified Mail
2. Article Number : 1 : 1:1	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.

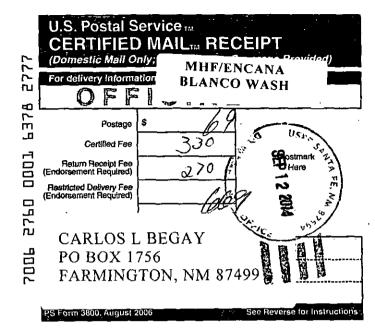
U.S. Postal Service TM CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Co. 3707 MHF/ENCANA BLANÇO WASH For delivery information v ø 37 Postage Ē Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) CARLENA JAMES (BEGAY) 2760 7006 PO BOX 1043 IGNACIO, CO 81137 See Reverse for Instructions PS Form 3800, August 2006 -

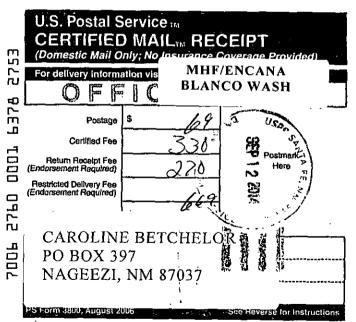
	U.S. Postal S CERTIFIED	MA	e TM ILTM REC	EIPT	rovidad)	
9 2654	(Domestic Mail Or For delivery informa		MHF/EN BLANCO			
7006 2760 0001 6378	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  CARLEST PO BOX 2  NAGEEZI	ON V 66		ITI Po	stmark	
	•				for instruction	ons:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     JA   Aucle   Agent     D. Is delivery address different from item 1?   Yes
1. Article Addressed to:	If YES, enter delivery address below:   \[ \square   \qqq \qqq
CARLENA JAMES (BEGAY) PO BOX 1043 IGNACIO, CO 81137	3. Service Type
	Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 1111 7006	2760 0001 6378 3101
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540
PLACE STICKER AT TOP OF ENVELOPE TO THE RICHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Unlestry / Late of Delivery  B. Received by (Printed Name)  C. Date of Delivery  ACCOUNTY  CALLESTON VICTOR  C. 118/14
1. Article Addressed to:  CARLESTON VICTOR PO BOX 266	D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No
NAGEEZI, NM 87037	3. Service Type  Certified Mail  Registered  Insured Mail  C.O.D.
2. Article Number ( )	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label) / / JUL 2760	0003 6378 2654
PS Form 3811, February 2004 Domestic Betur	n Donnint

Domestic Return Receipt

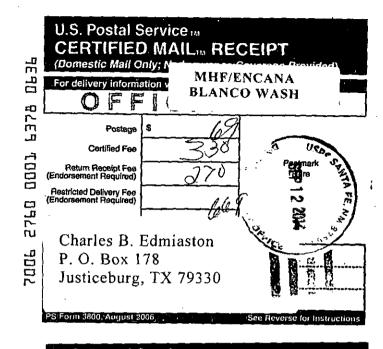
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## Return

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signistrure  Agent  Addressee  B. Received by Printed Marge)  C. Date of Delivery  One of the Company  O
1. Article Addressed to:  CAROLINE BETCHELOR PO BOX 397	D. Is delivery address different from Item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
NAGEEZI, NM 87037	3. Service Type  Certified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number	760 000 16378 2753
PS Form 3811, February 2004 Domestic Ret	um Recelpt 102595-02-M-1540



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l	CERTIFIED	MAIL REC	CEIPT	
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7000	Return Receipt Fee		Poetmark 2	
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	Restricted Delivery Fee (Endorsement Required)	1.66	b \$ 50)	_
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L455	J.S. Postal S CERTIFIED Domestic Mail O For delivery informs	MAIL REC	CEIPT /ENCANA /CO WASH	
0 0925 9005	Postage Certified Fee Return Receipt Fee Indorsement Required) Restricted Delivery Fee Indorsement Required) CHAVEZ, PO BOX 3 NAGEEZI STForm 9900, August U.S. Postal 9	73 , NM 87037	Postmar See Reverse for	200

ያከተዓ ረ	U.S. Postal Service TM CERTIFIED MAIL TO RECEIPT (Domestic Mail Only For delivery informatio OF  MHF/ENCANA BLANCO WASH
7006 2760 0001 6377	Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  CHAVEZ, VIRGIL J  508 N LINCOLN AVE 1  FARMINGTON, NM 87401
	PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE TIME  UCKER AT TOP OF EVVELOPE TO THE RIGHT  SENDER: COMPLETE SCHILL ALTER TO TOP OF THE RIGHT  TO THE TOP OF THE T	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  Agent Addressee  B. Received by (Printed Name)  Date of Delivery  D. Is delivery address different from item 12  P. Is delivery address different from item 12  P. Is delivery address different from item 12
1. Article Addressed to:  CHAVEZ, HARRY PO BOX 373	D. Is delivery address different from item 1?
NAGEEZI, NM 87037	3. Service Type  Certified Mail
2. Article Number   7006 2760 (Transfer from service label)	
PS Form 3811, February 2004 Domestic Retu	um Receipt 102595-02-M-1540

U.S. Postal Service CERTIFIED MAILIN RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 10. For delivery information visit our website at www.usps.como 8 Ę, Postage Certified Fee 0001 Return Receipt Fee (Endorsement Required) Postmark WE -Restricted Delivery Fee (Endorsement Required) SEP 1 2 2014 (<u>3)</u> r 2760 Total Postage & Fees \$ 700E CHERYL LYNN RARRICK Stree or PC 28 ROAD 3142 Ĉity. AZTEC, NM 87410-9583 tructions

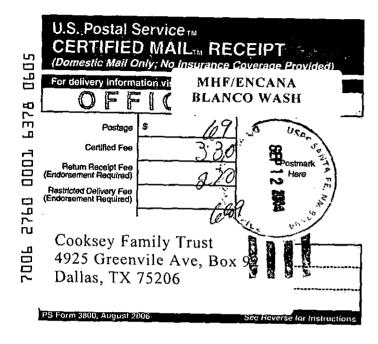
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, rude 2760 0001 63	NAGEEZI, N		SEP Postmark 2 Here	
	S Form 3800, August 200	6	See Reverse for Instructions	

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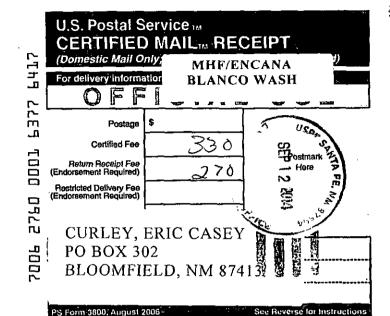
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SENDER: COMPLETE THIS SECTION NAME AND SENDER: COMPLETE THIS SECTION BENDLES:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  COMMANCHE, MARY HELEN PO BOX 37	A. Signature  **The Signature
NAGEEZI, NM 87037	3. Service Type  Certified Mail
2. Article Number	0001:6377:6431



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ŭ,	CURLEY,	ET VID V	10 m	
ממ	PO BOX 30			
ל ו	BLOOMFI	ELD, NM 874	113	
		900 ———————————————————————————————————	See Reverse for Ins	tructions

SENDER: COMPLETE THIS SECTION OF SENDER: COMPLETE THIS SECTION	S ROYTH ECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addressee  C. Date of Delivery  D. Is delivery address different from item 1?  Yes
1. Article Addressed to:  CURLEY, ELVIRA  PO BOX-302	If YES, enter delivery address below:   No
BEOOMETELD, NM 87413	3. Service Type  Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7006. 276	0 0001 6377 6424
PS Form 3811, February 2004 Domestic Retr	urn Receipt 102595-02-M-1540



CERTIFIED MAIL M RECEIPT

(Domestic Mail On MHF/ENCANA BLANCO WASH

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(Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

CURLEY, JEAN

910 S MEMORIAL DR

SPACE 11

CORTEZ, CO 81321

See Reverse for Instructions

PS Form 3811, February 2004

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PS Form 3800; August 2006

OF THE RELIGION ADDRESS, FOLD AT DOUTED LINE			
SENDER: CONVECE LE THE BIGHT STATE OF THE SENDER	DIES WIND TON ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Let Y  D. Is delivery address different from item 1? Yes		
Article Addressed to:	tf YES, enter delivery address below: ☐ No		
CURLEY, ERIC CASEY PO BOX 302 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail □ Express Mail		
	Registered Return Receipt for Merchandise Insured Mail C.O.D.		
	4. Restricted Delivery? (Extra Fee) Yes		
2. Article Number	111		
PS Form 3811, February 2004 Domestic Ref	turn Receipt 102595-02-M-1540		
SENDER: Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Received by (Printed Name)  D. Is delivery address different from item 1?   Yes		
CURLEY, JEAN 910 S MEMORIAL DR SPACE 1:1 CORTEZ, CO 81321	3. Service Type  Certified Malt Registered Insured Mail Restricted Delivery? (Extra Fee)  Yes		
2. Article Number	60 0001 6377 6400		

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail On MHF/ENCANA For delivery informat **BLANCO WASH** £3 **5259** Postage SEP 12 2001 Certified Fee Postman 1000 270 Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 2760 CURLEY, MERRIL
4918 BELLFLOWER CIRCLE
FARMINGTON, NM 87401 7006 See Heverse for Instructions PS Form 3800, August 2006

CJ	U.S. Postal Service IM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; Ma Insurance Coverage Provided)	
2562	For delivery information BLANCO WASH	
1	OFFI	
b378	Postage \$	
	Certified Fee 330	
1.000	Return Receipt Fee (Endorsement Required)	_^:
	Restricted Delivery Fee (Endorsement Required)	•
2760	Total Postage & Fees \$	
_	DAISY CHARLIE LEE	
7006	PO BOX 5452	
7	FARMINGTON, NM 87499	
		tion

THE RIGHT OF SERVELOSE TO THE RIGHT	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (France Name)  C. Date of Delivery  D. Is seffice address direct from item 1?   Yes
1. Article Addressed to:  DAISY CHARLIE LEE PO BOX 5452	D. Is effer, address directorrom item 1?  Yes If this enter delivery a dress below:  No
FARMINGTON, NM 87499	3. Service Type  Certified Mail  Registered Receipt for Merchandise  Insured Mail  C.O.D.
·	4. Restricted Delivery? (Extra Fee)
2. Article Number, 1	2760' 0001 6378 '2562
PS Form 3811, February 2004 Domestic Ret	um Receipt 102595-02-M-1540

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

( )

U.S. Postal Service 100 PLACE STICKER AT 10P OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE CERTIFIED MAIL RECEIPT COMPLETE THIS SECTION ON DELIVERY (Domestic Mail Only; N SENDER: COMPLETE THIS SECTION П A. Signature For delivery information v MHF/ENCANA Complete items 1, 2, and 3. Also complete BLANCO WASH item 4 if Restricted Delivery is desired. Print your name and address on the reverse 40 so that we can return the card to you. B. Received by ( Printed Name) m Postage Attach this card to the back of the mailpiece. DANNY WERHO J 9£P or on the front if space permits. Certified Fee D, is delivery address different from item 1? 1000 1. Article Addressed to: Return Receipt Fee (Endorsement Required) If YES, enter delivery address below: **Postmark** ... Here Restricted Delivery Fee (Endorsement Required) DANNY WERITO SR 75 PO BOX 1794 ш DANNY WERITO SR Service Type BLOOMFIELD, NM 87413 Certified Mail ☐ Express Mail PO BOX 1794 ☐ Registered Return Receipt for Merchandise BLOOMFIELD, NM 87413 .a.d.S 🗖 · Insured Mail 4. Restricted Delivery? (Extra Fee) 2. Article Number 7006 2760 0000 6378 2623 for Instructions (Transfer from service label). U.S. Postal Service IM PS Form 3811, February 2004 Domestic Return Receipt CERTIFIED MAIL RECEIPT (Domestic Mail Only; MHF/ENCANA For delivery information COMPLETE THIS SECTION ON DELIVERY ru BLANCO WASH ■ Complete items 1,2, and 3, Also complete 40 A. Signature item 4 if Restricted Delivery is desired. m Print your name and address on the reverse Postage -JI so that we can return the card to you. Certified Fea B. Received by ( Printed Name) Attach this card to the back of the mailpiece. Return Receipt Fee (Endorsement Required) or on the front if space permits. ō 1. Article Addressed to: Restricted Delivery Fee (Endorsement Required) If YES, enter delivery address below: DARLENE J CHARLIE 'n DARLENE J CHARLIE 4633 GILA ST TRLR 8 4633 GILA ST TRLR 8 FARMINGTON, NM 87402 FARMINGTON, NM 87402 Certified Mail & D Express Mail ☐ Registered Return Receipt for Merchandise Insured Mail □ c.o.d. 'S Form 3800, August 2006 See Reverse for Instructions

2. Article Number 1

(Transfer from service label) PS Form 3811, February 2004

4. Restricted Delivery? (Extra Fee) ☐ Yes . 2006, 5360, 0007 (P359, 5957) Domestic Return Receipt 102595-02-M-1540

□ Agent

C. Date of Delivery

9-15-14

☐ Yes

12 No

☐ Yes

☐ Agent

€Z□ Addressee

C. Date of Delivery

102595-02-M-1540

Addressee

U.S. Postal Service 100 CERTIFIED MAIL RECEIPT 3019 MHF/ENCANA For delivery information visi **BLANCO WASH** 40 37 Postage ┚ Certified Fee ...OOO Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 **DARRIN BEGAY** 700k 2 CR 7588 17A BLOOMFIELD, NM 87413 See Reverse for Instructions

78 0650	U.S.: Postal CERTIFIE (Domestic Mail (Comestic Mail	DMAIL RE	GEIRIF /ENCANA CO WASH
<b>6</b> 3	Postage	\$ 69	
2760 0001	Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) David allen Pic	330 270 <b>6</b> 47 erce & Maxine	Postmark Here SEP 1 2 2014
7006	Marcella Pierc u/t/a 7/16/1996 P. O. Box 2802 Farmington, N	2 M 87499	See Reverse for instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>DARRIN BEGAY</li> </ul>	A. Signature  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:
2 CR 7588 17A BLOOMFIELD, NM 87413	3. Service Type  Certified Mail  Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.  4. Restricted Delivery? (Extra Fee)
2. Article Number	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  David allen Pierce & Maxine Marcella Pierce Revocable Trust u/t/a 7/16/1996  P. O. Box 2802  Farmington, NM 87499	A. Signature  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  Service Type  Certified Mail  Received Membandise
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
<u> </u>	760,0001,6378 0650,
PS Form 3811 February 2004 Domestic Ret	urn Receipt • 102595-02-M-1540.

U.S. Postal Service™ CERTIFIED MAIL RECEIPT (Domestic Mail Only: No losurance Cov MHF/ENCANA For delivery information BLANCO WANT 378 Postage <u>.</u> Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 **DEBRA J CHAVEZ** 700F 4633 GILA ST TRLR 8 FARMINGTON, NM 87402 See Reverse for Instructions

PS Form 3800, August 2006

'	U.S. Postal CERTIFIE (Domestic Mail Control of Control	D MAIL	RE MH		ided)	
10 0001° 637	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	33 27	69	Poetmari	SE SENTA SE, NUMBER	J
7008 2260	DICK H CH PO BOX 25 BLOOMFIE	95 ELD, NM		ATH.		
				See Reverse for In	structions	

•	•
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A Signature  X
Article Addressed to:	D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No
DEBRA J CHAVEZ 4633 GILA ST TRLR 8	
FARMINGTON, NM 87402	3. Service Type  Certified Mall
- And	4. Restricted Delivery? (Extra Fee)
2. Article Number : (Transfer from service label)	35.P0 b0b1 P358 0511
PS Form 3811, February 2004 Domestic Pet	urn Receipt 3 102595-02-M-1540



8 2395	U.S. Postal Service Mail CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Control of Provided)  For delivery information BLANCO WASH	
7006 2760 0001 6378	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  Dick Holland 1801 West Wall St. Midland, TX 79702  See Reverse for Instruction	ns

Postage S Certified Fee 330 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) DONAHUE E WERITO PO BOX 2884 FARMINGTON, NM 87499	U.S. Postal S CERTIFIED (Domestic Mail C	D MAIL REC	CANA WASH	ed)
•	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  On Donahur	330 270 669 E E WERITO	Here and the second	PFE, NA

Return

U.S. Postal Service ... CERTIFIED MAIL: RECEIPT (Domestic Mail O For delivery informa E E 40 37 Postage مر २३४ Certified Fee **Postmark** 0007 Here Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 75 DONALLIA WERITO LOPEZ ĽП 2132 ALVARADO DR NE 7005 ALBUQUERQUE, NM 87110 ⊮U.S. Postal Service in. CERTIFIED MAIL RECEIPT (Domestic Mail On MHF/ENCANA 7 For delivery informat **BLANCO WASH** 'n 中 Ę Postage Ш Certified Fee 0001 Postmark-Return Receipt Fee (Endorsement Regulted) Here ." Restricted Delivery Fee (Endorsement Required) 75 DORA MAE TOM (BEGAY) ľ 7006 PO BOX 399 RED VALLEY, AZ 86544 I SHORTH SOUP HUYUSI 2000

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  On a Mac Opport  On a Mac Opport  On By January  On By Ja
1. Article Addressed to:	If YES, enter delivery address below:
DONALLIA WERITO LOPEZ 2132 ALVARADO DR NE ALBUQUERQUE, NM 871.19	3. (Service Type  Certified Mail  Registered Return Receipt for Merchandise  Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7006 2760 PS Form 3811, February 2004 Domestic Ret	0001 6378 2869 urn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  DORA MAE TOM (BEGAY) PO BOX 399 RED VALLEY, AZ 86544	A. Signature  B. Received by (Printed Name)  C. Date of Delivery  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C-22-14  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No  Service Type  Certified Mail  Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.  4. Restricted Delivery? (Extra Fee)
2. Article Number	an bandage and a bas as being the
(Transfer from service label) 7006 27	An agent designed the applications have a superment of the property of the superment of the
PS Form 3811, February 2004 Domestic Reti	urn Receipt 102595-02-M-1540.

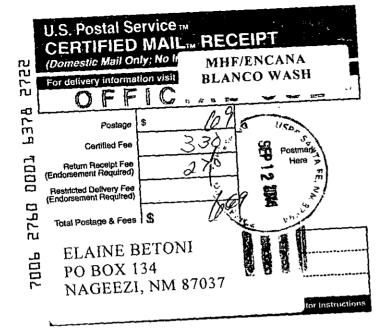
U.S. Postal Service 104 CERTIFIED MAILIM RECEIPT (Domestic Mail Only; N MHF/ENCANA For delivery information vi **BLANCO WASH** 40 37 Postage ال Certified Fee SEP 1 Pas 2014 0007 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2750 Dorl Vamjprm Reemstma 7005 P. O. Box 4140 Farmington, NM 87499

TO FORM JOBO, AUGUST 2006

U.S. Postal Service Tal. CERTIFIED MAIL RECEIPT (Domestic Mail Only; MHF/ENCANA 'n For delivery information **BLANCO WASH** 中 m Postage 6 ۰ Certified Fee Return Receipt Fee (Endorsement Required)  $\equiv$ Restricted Delivery Fee (Endorsement Regulred) 1922 Dugan Production Corp. 7005 709 East Murray Drive Farmington, NM 87401

See Reverse for Instructions

OF THE BETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X Paul Schroch
Dorl Vamjprm Reemstma P. O. Box 4140 Farmington, NM 87499	3. Service Type  Certified Mail  Express Mail
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (	<u> </u>
PS Form 3811, February 2004 Domestic Rev	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Regeived by (Printed Name)  C. Date of Delivery
1. Article Addressed to:  Dugan Production Corp. 709 East Murray Drive	D. Kolinsky address different from item 1? Yes  10 VES, enter delively address below: No
Farmington, NM 87401	3 Service 1998  Certified Mail
2. Article Number:	2760 0001 6378 2456
PS Form 3811 February 2004 Democile Bott	



U.S. Postal Service TM CERTIFIED MAIL RECEIPT (Domestic Mail Only; No MHF/ENCANA For delivery information vi **BLANCO WASH** ru 中 m Postage J Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 ELIZABETH WERO CHA 7005 314 S ASH ST **AZTEC, NM 87410** See Reverse for Instructions Partorn 3800, August 2006

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	IIS SECTION ON DELIVERY
SEN THE RIGHT OF ENVELOPE TO THE RIGHT	
<ul> <li>Complète items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Elc. Beta Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  Elg. 13 - 1 - 1 - 9115114
1. Article Addressed to:  ELAINE BETONI PO BOX 134 NAGEEZI, NM 87037	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No  ROX 13  Mag 2 2 7 7 87637  3. Gervice Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail CO.D.  4. Restricted Delivery? (Extra Fee)
2. Article Number	##
(Transfer from service label) 7006 2	260 0001 6358 5555
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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)  Circles TH Section ON DELIVERY  Addressee  B. Received by (Printed Name)  Circles TH  D. Is delivery antiques different from Name   Yes
ELIZABETH WERO CHAVEZ 314 S ASH ST AZTEC, NM 87410	SEP 16 2014  3. Service type Certified Mail Requistered Require Receipt for Merchandise Insured Mail
2. Article Number	2760: 0001 6378 2487
PS Form 3811 February 2004	

Martin Pieleisten Com

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

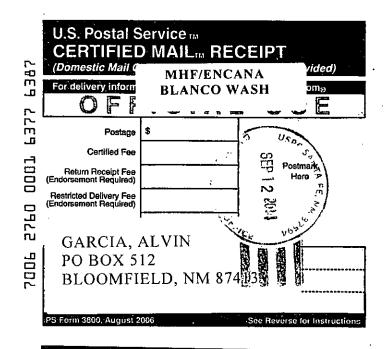
<u>-</u>	U.S. Postal S CERTIFIEI (Domestic Mail C	D MAIL RE	CEIPT
먑	For delivery inform	MHF/ENG	CANA ====
40	OFF	BLANCO	WASH
537	Postage	\$ 69	
	Certifled Fee	330	·
7007	Return Receipt Fee (Endorsement Required)	270	Postmark Here
	Restricted Delivery Fee (Endorsement Required)		
מלש	}	· les	Nog Ligar
	ERNEST V	ICTOR	
	PO BOX 11		
	NAGEEZI,	NM 87037	***************************************
Ì	OT THE GOLD AGGODING	· Strange	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN AGORESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A Signature  A Signature  A Agent  Addressee  B Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:  1. Article Address	D. Is delivery address attempt on item 1? Yes If YES, enter delivery address below: No
Dallas, TX 75206	3 Service Type
2. Article Number!	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)  PS Form 3811, February 2004  Domestic R	eturn Receipt 102595-02-M-1540
ANI DELLA OTO SERVIN WELL BY THE BIRTH AND THE BIRTH AND THE BENDER: COMPLETE THIS SECTION.	TOMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent     Addressee     B. Beceived by (Printed Name)   C. Date of Delivery   Chest   V. Chest     Addressee
1. Article Addressed to:	D. Is delivery address different from item 17
ERNEST VICTOR PO BOX 112 NAGEEZI, NM 87037	·
	3. Service Type  ☐ Certifled Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise
<u></u>	☐ Insured Mail ☐ C.O.D.
	☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
C. Author Militarian 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

U.S. Postal Service CERTIFIED MAILIN RECEIPT (Domestic Mail Only; MHF/ENCANA For delivery information BLANCO WASH 80 1~ m Postage J. Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) ـ۵ 7 ETHEL P SMITH 7006 PO BOX 1943 BLOOMFIELD, NM 87413 or Instructions

U.S. Postal Service 164 CERTIFIED MAIL RECEIPT (Domestic Mail On MHF/ENCANA 30 For delivery informati BLANCO WASH m Postage | \$ Δ. Certified Fee 0003 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 GABRIEL WERITO 7006 2614 E 20TH ST APT C2 FARMINGTON, NM 87401 for Instructions

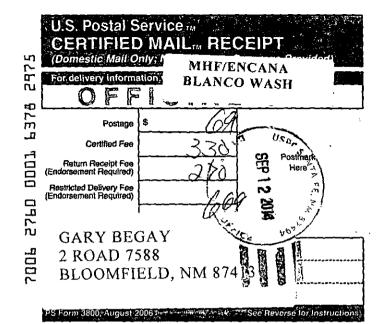
OP THE RETURN ADDRESS, FOLD AT DOTTED LINE	SA SE VER VIEDVER VE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  D. Agent  D. Agent	
Article Addressed to:	If YES, enter delivery address below:	
ETHEL P SMITH PO BOX 1943 BLOOMFIELD, NM 87413	3. Service Type  Centified Mail	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number: (Transfer from service label) 11 11 7006 2750 0001 5378 2791		
PLACE STOKER AT TOP OF ENVELOPE TO THE PICHT  OF THE RETURN ADDRESS, FOLD AT DOTTED LINE		
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  NOIL SECURITY  SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Anon Wer + 0 9/15/14	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete litem 4 if Restricted Delivery is desired.  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,	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete ltem 4 if Restricted Delivery is desired.  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:  GABRIEL WERITO	A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item v. D. Yes  If YES, enter daily in address below:  D. No	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete litem 4 if Restricted Delivery is desired.  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:  GABRIEL WERITO 2614 E 20TH ST APT C2 FARMINGTON, NM 87401	A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item v. Dyes  If YES, enter danker address below:  No  3. Service Type  Certified Mail  Registered  Return Receipt for Merchandise  Insured Mall  C.O.D.	



370	U.S. Postal S CERTIFIE[ (Domestic Mail C	O MA	AIL RE		d)	
E E	For delivery inform		BLANCO			
7	OFF	. 1			鱼皿	
637	Postage	\$				
	Certified Fee		330	/3A	mark	
0007	Return Receipt Fee (Endorsement Required)		270	Post SH		Ĺ
	Restricted Delivery Fee (Endorsement Required)			12	-	1
2760	ľ			SP		7
1	GARCIA, I	EDD	ΙE		-	<u>.                                    </u>
7006	PO BOX 14	124				
뭐	BLOOMFII	ELD,	, NM 874	13		
				·		
ŀ	PS Form 3800, August 20	006		See Reverse I	or Instruction	ยาร

MANUFIFIE	
SENDER: COMMETE TO HER HIGHT TOP OF ENVELOPE TO GOT TA BANDITION OF ENVELOPE TO GOT TO BE A COMMETED IN THE PROPERTY OF THE PR	ECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  A. Agent  A. Agent  A. Agent  A. Signature  A. Agent  Agent  A. Agent
Article Addressed to:	If YES, enter delivery address below:   No
GARCIA, ALVIN PO BOX 512	
BLOOMFIELD, NM 87413	3. Service Type Certifled Mall Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
•	4. Restricted Delivery? (Extra Fee) ☐ Yes
	60 0001 6377 6387
(Transfer from service label) PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
SENDER: COMPLETE I HIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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
1. Article Addressed to:	If YES, enter delivery address below:
GARCIA, EDDIE PO BOX 1424	
BLOOMFIEED, NM 87413	3. Service Type  Certified Mall  Express Mail  Registered  Return Receipt for Merchandise  C.O.D.
(	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number	001/6377 6370 HH
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

	THE RETURN ADDRESS, FOLD AT DOTTED LINE	
U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only: No For delivery information vis BLANCO WASH  Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  GARCIA, ELVIS PO BOX 181 BLOOMEDED, NM 87413	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Addressee  B. Received by (Printed Name)  C. Date of Delivery  9-15-14  D. Is delivery address different from item 1?  If YES, enter delivery address below:  3. Service Type  Certified Mail
GARCIA, ELVIS PO BOX 181 BLOOMFIELD, NM 87413	· · · · · · · · · · · · · · · · · · ·	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
	2. Article Number     1:	<u> </u>
PS Form 3800, August 2006 See Reverse for Instructions	PS Form 3811, February 2004 Domestic Re	a <del>and a decided a service of the se</del>
U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; Network Cavarage Provided)	SENDE COM. ENVELOPE TO THE PIGHT STICKER AT TOP OF ENVELOPE TO THE PIGHT	SECTION ON DELIVERY
For delivery information v  Postage \$  Certified Fee 330	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Color and Color and Park  D. Is delivery address different from item ?
Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) GARCIA, SEBRANA L	GARCIA, SEBRANA L 600 W BLANCO BLVD APE 40	If YES, enter delivery address below: ☐ No
B 600 W BLANCO BLVD APT 40	BEOOMFIELD, NM 87413	Service Type  Certified Mail  Registered  Return Receipt for Merchandise  Co.D.D.
BLOOMFIELD, NM 87413	2. Article Number,   7006-2760	4. Restricted Delivery? (Extra Fee)
	PS Form 3811, February 2004 Domestic Ret	





THOIR SHIT O	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 3, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature  A. Signature  Agent
Print your name and address on the reverse so that we can return the card to you.	B. Received by ( Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Gary Beg 04 9-16-14
Article Addressed to:	D. Is delivery address different from item 1?
*	
GARY BEGAY	1
2 ROAD 7588 BLOOMFIELD, NM 87413	<u>Language</u>
DECOMPTEED, NW 87415	3. Service Type  Certified Mail
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ C.O.D.
•	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	760 0001 6376 2975
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
ANTI GALLOG AN OUNTESS HOLD AT BOTTO ELINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	X here Civil Agent DAddressee
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Frene Warita 19/15/14
Article Addressed to:	D. Is delivery address different from Item 1? Yes If YES, enter delivery address below.
	A
GEORGE WERITO	SEP (0)
₹ <b>0</b> BOX 3515	A 15 A
FARMINGTON, NM 87499	3. Service Type
V	☐ Certified Mall ☐ Extre 1915 ☐ Registered ☐ Return Receipt for Merchandise
•	☐ Insured Mall ☐ C.O.D.
O Anticle Missenberg	4. Restricted Delivery? (Extra Fee) Yes
(Indialal monitodrates rapal)	1000j <sup>1</sup> ;F339 15309
PS Form 3811, February 2004 Domestic Retu	rn Receipt 102595-02-M-1540

PLACE STICKER AT TOP OF ENVELOPE TO THE PICHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION U.S. Postal Service TM CERTIFIED MAIL RECEIPT Complete items 1, 2, and 3. Also complete A. Signature coo Coverage Provided) item 4 if Restricted Delivery is desired. (Domestic Mail Only) ☐ Agent MHF/ENCANA Print your name and address on the reverse ☐ Addressee For delivery information **BLANCO WASH** so that we can return the card to you. Received by ( Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. D. Is delivery address different from item 1? " Ye **Postage** 1. Article Addressed to: m If YES, enter delive yardiress below: \_\_\_ Certified Fee **►** Postmark GLADYS STEWART, C/O Return Receipt Fee (Endorsement Regulred) 270 000 SEP 1 6 2014 AGNETHA GLOSHAY Restricted Delivery Fee (Endorsement Required) 3415 MATA ORTIZ DR SW Service Type 감 ALBUQUERQUE, NM 87121 Express Mail Certified Mail ш Perum Receipt for Metal and ise GLADYS STEWART, C 125-Registered ☐ Insured Mail 006 AGNETHA GLOSHAY 4. Restricted Delivery? (Extra Fee) ☐ Yes 3415 MATA ORTIZ DR SW 2. Article Number ALBUQUERQUE, NM 87121 111111 7006 2760 0001 6378 2555 (Transfer from service label) or Instructions PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540 OF THE RETURN ADDRESS, FOLD AT DOTTER BY GH U.S. Postal Service in COMPLETE THIS SECTION ON DELIVERY CERTIFIED MAIL RECEIPT SENDER: COMPLETE THIS SECTION (Domestic Mail Only: MHF/ENCANA A. Signatule Complete items 1, 2, and 3. Also complete ☐ Agent For delivery information item 4 if Restricted Delivery is desired. **BLANCO WASH** ☐ Addressee Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, m KNIK Postage or on the front if space permits. ي. D. Is delivery address different from item 1? /D Yes 300 Certified Fee 1. Article Addressed to: ☐ No If YES, enter delivery address below: 000 Return Receipt Fee (Endorsement Required) SEP-1-2 2014 2>0 Grover Family, LP Restricted Delivery Fee (Endorsement Required) P. O: Box 3666 7 Midland, TX 79702 'n Service Type Grover Family, LP Certified Mail □ Express Mail P. O. Box 3666 ☐ Registered Return Receipt for Merchandise □ c.o.p. ☐ Insured Mail Midland, TX 79702 4. Restricted Delivery? (Extra Fee) Yes 7006 2760 0001 6378 0551 2. Article Number P5 Form 3800, August 2000 .... See Reverse for Instructions (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service CERTIFIED MAIL RECEIPT MHF/ENCANA BLANCO WASH (Domestic Mail Only; N For delivery information v ப 377 Postage  $\sim$ \_ Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760

HACEESA, EDWARD

NAGEEZI, NM 87037

PO BOX 402

PS Form 3800, August 2000

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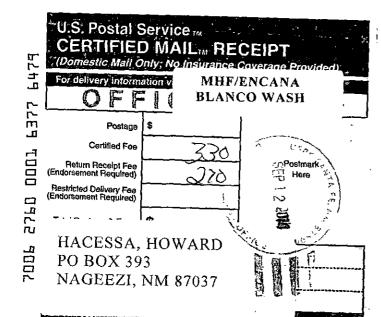
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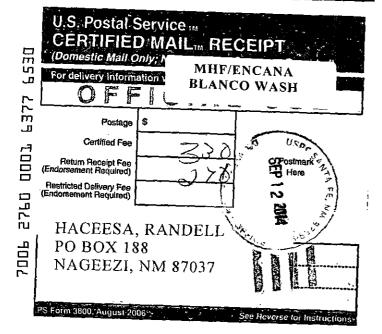
1000

U.S. Postal Service 16 CERTIFIED MAIL RECEIRT (Domestic Mail Only; MHF/ENCANA For delivery information **BLANCO WASH** Postage Certified Fee Return Receipt Fee (Endorsement Regulred) Restricted Delivery Fee (Endorsement Required) 2760 HACEESA, HARVEY 7006 **PO BOX 393** NAGEEZI, NM 87037 for Instructions

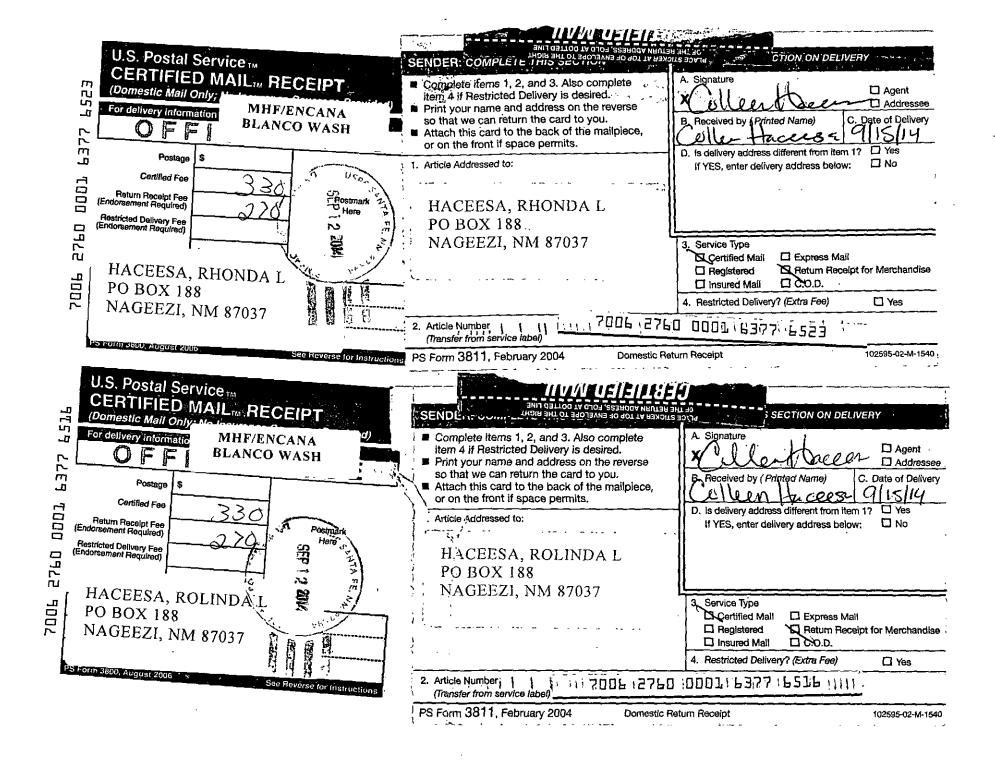
RETURN ADDRESS, FOLD AT DOTTED LINE	THE OF THE
SENDER: COMPLETE THIS SECTION	COMPLETE THE SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent     Agent     Addressee     B. Received by (Printed Name)     C. Date of Delivery     C. Date of Deliver
Article Addressed to:	If YES, enter delivery address below:
HACEESA, EDWARD PO BOX 402 NAGEEZI, NM 87037	3. Service Type Certified Mall
2. Article Number  (Transfer from service label) 7006 2760	; !
(Transfer from service label)   TUUB CTBU PS Form 3811, February 2004   Domestic Ret	<del></del>
TO THE PARTY OF TH	
ICKER AT TOP OF ENVELOPE TO THE RIGHT  PETURN ADDRESS, FOLD AT DOTTED LINE	BL 190
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signalure  X Ubul Falls   Agent Addressee  B/ Received by   Printed Name)   C. Date of Delivery  VALUE   9 16/12014
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
HACEESA, HARVEY PO BOX 393	
NAGEEZI, NM 87037	3. Service Type  C Certified Mall
	4. Restricted Delivery? (Extra Fee)
2. Article Number 11 [[ 7006 276[ (Transfer from service label)	1 00011(Fa355 P245 E
PS Form 3811, February 2004 Domestic Retu	rn Receipt 102595-02-M-1540

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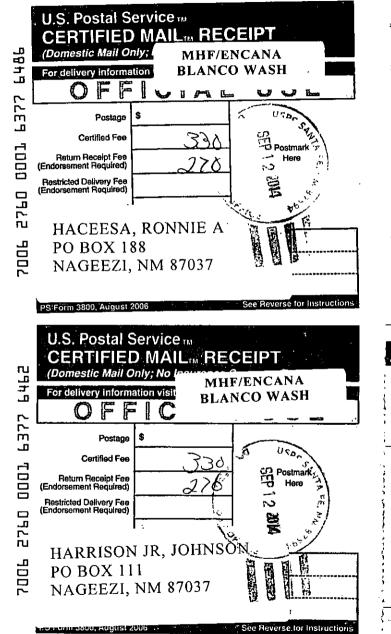
HE TUHN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	Saovid SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signstrure  X V Grinted Name)  B. Received by (Printed Name)  C. Date of Delivery  ALPLESA  D. Is delivery address different from item 1?  Yes
, 1. Article Addressed to:	If YES, enter delivery address below:
HACESSA, HOWARD PO BOX 393 NAGEEZI, NM 87037	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number       7005 2750	1000 (222 (420
(Transfer from service label)	₹0001 16377 6479; ; ;
SENDER: Communication of the mailpiece, or on the front if space permits.	A. Signature  A. Signature  A. Signature  C. Date of Delivery  D. Is delivery address different from item 1? Yes
1. Article Addressed to:  HACEESA, RANDELL PO BOX 188	If YES; enter delivery address below:   No
NAGEEZI, NM 87037	3. Service Type  Discretified Mail  Registered  Return Receipt for Merchandise  Insured Mail  CO.D.
NAGEEZI, NM 87037	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise
2. Article Number (Transfer from service label)	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ CO.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes



U.S. Postal Service IM CERTIFIED MAILT RECEIPT 6509 (Domestic Mail Only) MHF/ENCANA For delivery information **BLANCO WASH** 02.U .289 Postage 塭 Certified Fee 0007 270 Return Receipt Fee (Endorsement Required) t Hare Restricted Delivery Fee (Endorsement Required) 2760 HACEESA, ROLINDA L 700F PO BOX 188 NAGEEZI, NM 87037

	CEDTIFIE		OFIDT .	
ח	(Domestic Mail C	MAIL™ RE(	NCANA	
n	For delivery inform		O WASH	
_				<u>.</u>
1	Postage	\$	A USO	
7	Certifled Fee	330	U Son Sunark	1
7000	Return Receipt Fee (Endorsement Required)	228.	Postmark S	
	Restricted Delivery Fee (Endorsement Required)			
0				,
	HACEESA,	RONNIE A	A B B B	
	PO BOX 18			
-	NAGEEZI,	NM 87037		·i.
	PS Form 3890, August 20	106	See Reverse for Instruction	อกร

WW UFIFIUSED		
SENDER STANDARD OF ENVELOPE TO THE RIGHT STANDARD OF ENVELOPE TO THE RIGHT STANDARD OF ENVELOPE TO THE PROPERTY.	ECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Repeived by (Printer Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery  Addressee  B. Repeived by (Printer Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery	
Article Addressed to:	D. Is delivery address different from item 1?	
HACEESA, ROLINDA L PO BOX 188 NAGEEZI, NM 87037	3. Service Type  Certified Mail	
•	4. Restricted Delivery? (Extra Fee)	
2. Article Number (Transfer from service label)	] ODO1 46377 6509(**)	
SENDER: C  AND GELLOG IV GTOS SESSECTON NED.  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  HACEESA, RONNIE A  PO BOX 188  NAGEEZI, NM 87037	A. Signature    Agent   Addressee     B. Received by (Rrinted Name)   C. Date of Delivery   D. Is delivery address different from item 17   Yes     If YES, enter delivery address below:   No	
A DEPOSIT CONTRACTOR OF A STATE O		
Land American Control of the Control	3. Service Type  Certified Mail	
	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ CO.D.	



SENDL VDDHESS FOLD AT DOTTED LINE  STICKER AT TOP OF ENVELOPE TO THE RIGHT	S SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  Agent  Agent  Accept Addressee  B. Received by (Printed Name)  C. Date of Delivery  College Addressee  C. Date of Delivery  College Address different from item 1?   Yes  If YES, enter delivery address below:
HACEESA, RONNIE A PO BOX 188 NAGEEZI, NM 87037	If YES, enter delivery address below: LI No  3, Service Type
NAGDED-,	Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number ! ! !	0 0001 (6377) 6486)
PS Form 3811, February 2004  PS Form 3811, February 2004  SENDER: Court L.	A. Signature  B. Received by (Printed Name)  D. Is delivery address different from Item 1? Yes  If YES, enter delivery address below:
( NODISEL, (NIVI 8/U3/	3. Service Type  Certified Mail
2. Article Number   7006, 2760	
PS Form 3811, February 2004 Domestic Return	

U.S. Postal Service IM CERTIFIED MAIL RECEIPT 6288 (Domestic Mail Only; MHF/ENCANA For delivery information BLANCO WASH 6377 Postage 330 Certified Fee 1000 Return Receipt Fea (Endorsement Required) 270 Restricted Delivery Fee (Endorsement Required) 2760 HARRISON, JUDY 2006 **PO BOX 453** NAGEEZI, NM 87037 See Reverse for Instruction PS Form 3800, August 2006

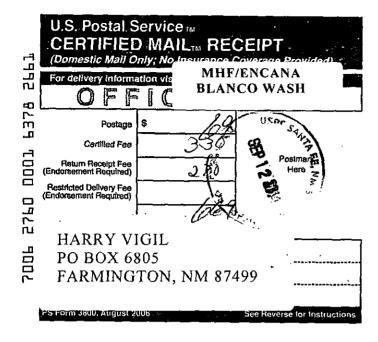
7 6646	U.S. Postal S CERTIFIED (Domestic Mail O For delivery information	MAIL REC	ICANA
- - -	Postage	\$	5 050
	Certified Fee	3>0	Postmark : Here
1000	Return Receipt Fee (Endorsement Required)	270	
	Restricted Dalivery Fee (Endorsement Required)	ار ره	2
2760	- · · -	ı. , 🎉	
	HARRISO	N, PAULINE	
7006	PO BOX 3	07 NIM 27037	,
<b>-</b>	L NAGEEZI	, NM 87037	
	-171015121	3000	See Reverse for Instructions

SENDEH: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  HARRISON, JUDY  PO BOX 453  NAGEEZI, NM 87037	A. Signature  A. Signature  A. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:	
	3. Service Type Certified Mail	
2. Article Number		
PS Form 3811, February 2004  Domestic Re  PS Form 3811, February 2004  Domestic Re  PRINT GELLOO LY GTO3 SSERGOV NE  LEGISLOO LY GTO	A. Signature  X. Aultwo f Mame)  B. Asceived by (Printed Name)  C. Date of Delivery  Aultine furrisor 9-16-14	
1. Article Addressed to:  HARRISON, PAULINE PO BOX 307 NAGEEZI, NM 87037	D. Is delivery address different from item 1?	
2. Article Number 7006 2760	4. Restricted Delivery? (Extra Fee) Yes	
DS Form 3811 Fohrman 2004 Domestic Pate		

U.S. Postal Service TM CERTIFIED MAIL RECEIPT Ē (Domestic Mail Only) MHF/ENCANA 9 For delivery information **BLANCO WASH 6377** Postage Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 HARRISON, SARAH 7006 PO BOX 111 NAGEEZI, NM 87037 PS Form 3800, August 2006

8 2692	U.S. Postal S CERTIFIED (Domestic Mail Control of Contr	O MAIL <sub>TM</sub> REC	CEIPT Coverage Provided) /ENCANA CO WASH	
<b>6</b> 37	Postage	s 69	" " " Con C	<u> </u>
	Certified Fee	330!	-Postmark	
0003	Return Receipt Fee (Endorsement Required)	270.	NHere S	
	Restricted Delivery Fee (Endorsement Required)			
2760			Buul	
	HARRY V			٦
7005	PO BOX 2		<b>B a b</b>	
1	NAGEEZI,	NM 87037	***************************************	
	<b>\_</b>		for Instruction	30

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BEINEM ADDRESS, FOLD AT DOTTED LINE INVER AT TOP OF ENVELOPE TO THE MIGHT. SENDEL: OF THE SENDERS.	ENTRO ECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X		
Article Addressed to:	If YES, enter delivery address below:		
HARRISON, SARAH PO BOX 111 NAGEEZI, NM 87037	3. Service Type  Certified Mail		
	4. Restricted Delivery? (Extra Fee)		
2. Article Number			
SENDED COMPLETE THE SECTION	COMPLETE THIS SECTION ON DELIVERY		
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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  X A CONTROL Agent  Addressee  B. Received by (Printed Nande)  C. Date of Delivery  TARRY 16  D. Is delivery address different from item 17   Yes		
HARRY VICTOR PO BOX 281	If YES, enter delivery address below:		
NAGEEZI, NM 87037			
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	3. Service Type  Certified Mail		
	Certified Mail		



ر/ حل ا ا ا	U.S. Postal S CERTIFIE (Domestic Mail O For delivery Inform	MAIL REC	CEIPT NCANA O WASH
/UUB C/BU UUU1 63/	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  HDBC Inve P. O. Box 1  Dallas, TX	<b>₽</b>	SEP 12 2015
,			for Instructions

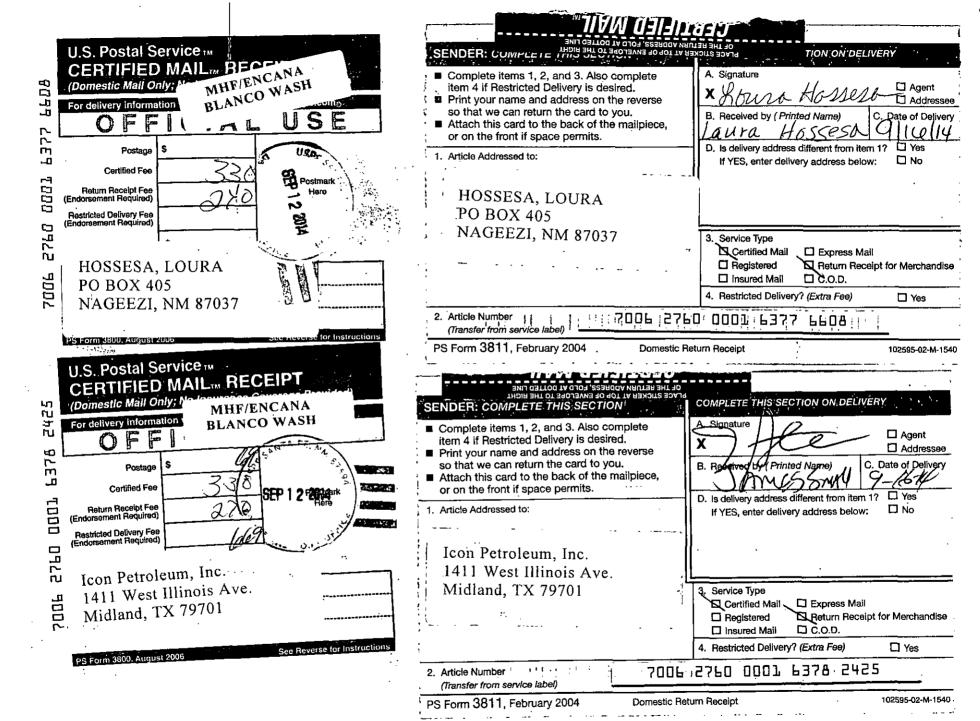
PLACE STICKER AT 10P OF ENVELOPE TO THE RIGHT	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
HDBC Investments, Limited P. O. Box 12766	
Dallas, TX 75225	3 Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number: 111111 (Transfer from service label)	760 (0001) 6378 (0575)
PS Form 3811, February 2004 Domestic Ret	turn Receipt 102595-02-M-1540
بالمتعلقة والتراوية والمتعادية والمتاكن	The second se

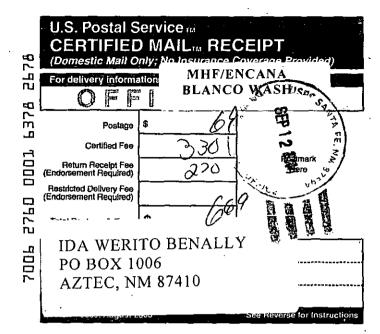
U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No. 1997) MHF/ENCANA For delivery information v **BLANCO WASH 25E**9 Postage <u>ن</u> ن Certified Fee 1000 ··· Postmark Return Receipt Fee (Endorsement Required) r → Here Restricted Delivery Fee (Endorsement Required) 2760 HERNANDEZ, SANDY M PO BOX 75 7006 BLOOMFIELD, NM 87413 PS-Form 3800, August 2006 See Reverse for Instructions

7 6615	U.S. Postal S CERTIFIED (Domestic Mail O For delivery information	D MAIL REC	NCANA 2
nnor e35	Postage Certified Fee Return Receipt Fee (Endorsement Required)	330 270/	Postmark Here
J6 2760	,	PAULINE M	777689 99 19
900/		ELD, NM 8741	

## Return

ANTI DELLO IV GTOS SSERIOV NEAL LISTED BY TO LISTED BY T	A. Signature  A.
HOUSE 4 COUNTY RD 7776 BLOOMFIELD, NM 87413	3. Service Type Certified Mail Registered Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)  Yes
2. Article Number,   700L 27L0	0001 6977 6615
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540





	U.S. Postal S CERTIFIED	MAIL. REC	CEIRT	
'A 3200	(Domestic Mail O	MHF/ENG	CANA WASH	
2760 0001 637	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	\$ 1e9 330 270 669	Us new September 19 19 19 19 19 19 19 19 19 19 19 19 19	
700F	IRA S WE PO BOX 2 BLOOMFI		113	

PLACE STICKER AT TOP OF ENVELOPE TO THE RICHT  OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  IDA WERITO BENALLY PO BOX 1006	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:  SEP 17 2014
AZTEC, NM 87410	3. Service Type  Certified Mail
2. Article Number	760 0001 6378 2678
PS Form 3811, February 2004 Domestic Re	
and the second second	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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  X. M. J. J. Werns D. Addressee  B. Received by (Printed Name)   C. Date of Delivery  I.A. S. Date of Delivery  I.A. S. Date of Delivery
Article Addressed to: ,	D. Is delivery address different from item 1?
IRA S WERITO PO BOX 2535 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail
2. Article Number 7006 276	0.0001, 6378, 3200

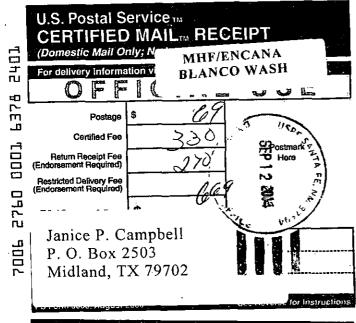
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

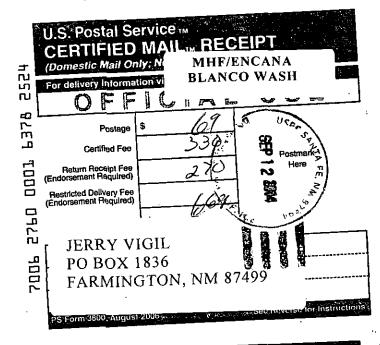
U.S. Postal Service IM CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) MHF/ENCANA 90 For delivery information **BLANCO WASH** 口 37 Postage Ĺ Certified Fee 1000 Postmark 2 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 James H. Essman 7006 P. O. Box 302 Midland, TX 79702 U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only MHF/ENCANA For delivery information **BLANCO WASH** m Postage 铝 Certified Fee ~ **Postmark** Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1975 Total Postage & Face \$ James R. Leeton, Jr. San Juan Royalty JV-90 P. O. Box 10561 Midland, TX 79702

OF IME RELIGIEW VODHESS' EGT.	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  James H. Essman  Pro Box 302	A. Signature  X  D. ts delivery address different from item 17  If YES, enter delivery address below:
Midland, TX 79702	3. Service Type  Certified Mail
2. Article Number	,5480 0007,8349,0959
PS Form 3811, February 2004 Domestic Re	sturn Receipt 102595-02-M-1540
ENIT GELLOG IV GTOJ SSENDOV NEITLER BILL OF THE BELLOG IV GTOJ SSENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  A. Agent  A. Addressee
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.	B. Received by (Printed Name) C. Date of Delivery, 1-16-14  D. Is delivery address different from item 1? Yes
James R. Leeton, Jr. San Juan Royalty JV-90 P. O. Box 10561 Midland, TX 79702	If YES, enter delivery address below: No  3. Service Type  C Certified Mail
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
	<del></del>
2. Article Number   1   1   1   1   1   1   1   1   1	760 0001 6378 0568



ъó	U.S. Postal S CERTIFIED (Domestic Mail O	MAILTA REC	Cavara - Charlet - C	
4 3118	For delivery informa		ENCANA CO WASH	Ė
7006 2760 0001 637	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  JERRY BE CR 7588 R BLOOMFI		SHOWN FE WAY THE POST OF THE P	
	PS Form 3800, August 2	006 · · · · · · · · · · · · · · · · · ·	See Reverse for Instruction	15

ACE STICKER AT TOP OF ENVELOP  OF THE RETURN ADDRESS, FOLD	<u> </u>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVE	RY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  Janice P. Campbell P.O. Box 2503  Midland, TX 79702	A. Signature  X. H. M. S. S. Sendoe Type  A. Signature  X. H. M. S.	Agent Addressee Date of Delivery Yes XINo
	Certified Mail	for Morehandise
2. Article Number	0 ( d <u>ó</u> b	<u> </u>
PS Form 3811; February 2004 Domestic Re	turn Receipt	102595-02-M-1546



	U.S. Postal Service MCERTIFIED MAIL RECEIPT	od)
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윊	For delivery informati BLANCO WASH	=
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_0	Certified Fee Pos	mark \
0007	Return Receipt Fee (Endorsement Required)	ere . <sup>M</sup>
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2760	Total Postade & Fees   \$	B
	JUDY M BEGAY	3
7006	2 ROAD 7588	
٢	BLOOMFIELD, NM 87413	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		or Instructions

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
, 1. Article Addressed to:	D. Is delivery address different from item 1?
JERRY VIGIL PO BOX 1836 FARMINGTON, NM 87499—	3 Service Type  Certified Mail Registered Return Receptator Merchandise Insured Mail
	4. Restricted Delivery? (Extra Fee)
PS Form 3811, February 2004  Domestic Ret  AND GELLOG AV GTO-1 SSERGOV NERTLES ENT. 40  LHOWER HOLD AND TO AND THE HEALTH OF THE SECTION  Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	urn Receipt 102595-02-M-1540  COMPLETE THIS SECTION ON DELIVERY  A Signature Addressee  B. Riceived by (Printed Name) C. Date of Delivery 9-15-14  D. Is delivery address different from Item 1? 124es  If YES, enter delivery address below: 11 No
JUDY M BEGAY 2 ROAD 7588 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail Registered Setum Receipt for Merchandise Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)  Yes
2. Article Number 1 1 1 1 1 7 0 (Transfer from service label)	06 5760 0001 6378 2883
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAILIM RECEIPT 54B (Domestic Mail Only: No Insurance Co MHF/ENCANA For delivery information **BLANCO WASH** ГÚ 8 Ę Postage \_ \_Rostmark Certified Fee 1000 Return Receipt Fee (Endorsement Required) Nere Restricted Delivery Fee (Endorsement Required) 2760 Total Pretare & Rose | @ KATHLEEN VICTOR 600 W BLANCO BLVD 7005 **APT 19** BLOOMFIELD, NM 87413 

5	U.S. Postal S CERTIFIED (Domestic Mail C	MAIL RECE	ided
78 3D9	For delivery inform	MHF/ENCAN BLANCO WA	Α
2760 0001 637	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	330	Spostmark THE
7006 27	KEE VIGII COUNTY F BLOOMFII	RD 5109 #8 ELD, NM 87413	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT BOTTED LINE		
SENDER: COMPLETE THIS SECTION ( ) PORTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery	
Article Addressed to:	D. Is delivery address different from item 1? □ Yes  If YES, enter delivery address below: □ No	
KATHLEEN VICTOR 600 W BLANCO BLVD	Lath ben Victor	
APT 19 L BLOOMFIELD, NM 87413	3. Service Type  Certified Mail  Express Mail  Registered  Neturn Receipt for Merchandise  Insured Mail  C.O.D.	
·	4. Restricted Delivery? (Extra Fee) Yes	
2. Article Number]	= 2760 <sup>1</sup> 0001 6378 2548	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 it space permits.  Article Addressed to:  KEE VIGIL JR COUNTY RD 5109 #8 BLOOMFIELD, NM 87413	COMPLETE THIS SECTION.ON.DELIVERY  A Signature  X	
	4. Restricted Delivery? (Extra Fee) Yes	
2. Article Number;		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAIL ... RECEIPT (Domestic Mail Only; N MHF/ENCANA **BLANCO WASH** For delivery information v 믬 中 37 Postage \_\_ Certified Fee SEP Hop 2014 0007 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) lea9 2760 Kennedy Minerals, Ltd 7006 48 Road 6050 Farmington, NM 87401 for Instructions PS FORM 3800, August 2000

	U.S. Postal Service CERTIFIED MA	(IL <sub>TM</sub> REC	DEIPT
807	(Domestic Mail Only	MHF/EN	ICANA
	For delivery information	BLANCO	, A VY VY 211
	OFFL	<del> </del>	
<u> 6378</u>	Postage \$	69	Postmark S
	Certified Fee	330	Postmark
1000	Return Receipt Fee (Endorsement Required)	9779	Here 12 2014
	Restricted Delivery Fee (Endorsement Required)		1/m
109	Character	- Oc	<b>7</b>
2760	KEVIN CHAR	LEY	
9	PO BOX 103		**************
7006	NAGEEZI, NM	87037	
	2000 August 2006.		See prevense for Instructions.

SENDER: COMPLETE THIS SECTION.	OMPLETE THIS SECTION ON DELIVERY
= ·Oompicto items 1, 2, and 0. Also compicto	. Signature
item 4 if Restricted Delivery is desired.	Agent
Print your name and address on the reverse so that we can return the card to you.	Addressee
Attach this card to the back of the mailpiece,	Beceived by (Printed Name) C. Date of Delivery
or on the front if space permits	). Is delivery address different from item 12 Wes
Article Addressed to:	If YES, enter delivery and ess bearing
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Y ad Minorala I td	(III) 2014 /A)
Kennedy Minerals, Ltd	2014
48 Road 6050	
Farmington, NM 87401	Service Type
	Certified Mail
and the second s	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2 2 2 3 2 2 3 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7	(A)Restricted Delivery? (Extra Fee)
6,000,000	Agresmoted Delivery (Extra 7 CC)
Z Article Number 7006 27L	0 0001 6378 0698
R8 Form 381. February 2004 Domestic Return	Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION  Complete item's 1, 2, and 3. Also complete item 4 if Rescicted Delivery is desired.  Print your name and address on the reverse	A) Signature
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:	B. Received by (Printed Name) C. Date of Deliver  D. Is delivery address different from Item 1? Yes  If YES, enter delivery address below:
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:	B. Received by (Printed Name) C. Date of Deliver C. Date of Deliver C. Date of Deliver D. Is delivery address different from Item 1? Yes
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  KEVIN CHARLEY	B. Received by (Printed Name) C. Date of Deliver  D. Is delivery address different from Item 1?
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  KEVIN CHARLEY PO BOX 103	B. Received by (Printed Name)  C. Date of Delivery (S   U   U
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  KEVIN CHARLEY	B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  S. L.  D. Is delivery address different from Item 1?  If YES, enter delivery address below:  No  3. Service Type
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  KEVIN CHARLEY PO BOX 103	B. Received by (Printed Name)  C. Date of Deliver   S   U    D. Is delivery address different from item 1?   Yes   Yes
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  KEVIN CHARLEY PO BOX 103	B. Received by (Printed Name)  C. Date of Deliver   S   U    D. Is delivery address different from item 1?   Yes   Yes   Yes   No
Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  KEVIN CHARLEY PO BOX 103	B. Received by (Printed Name)  C. Date of Deliver   S   U    D. Is delivery address different from item 1?   Yes   If YES, enter delivery address below:   No  3. Service Type   Certified Mail   Express Mail     Registered   Return Receipt for Merchandis

Domestic Return Receipt

PS Form 3811, February 2004

CERTIFIED (Domestic Mail O	MAIL REC	CANA
16127 Chas	emore Drive	Postmen Heren
	CERTIFIED (Domestic Mail O For delivery information of February Information of February Information of February Information of February Information of Infor	Postage \$ 900 Po

LACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  OF THE RETURN ADDRESS, FOLD AT DOTTED LINE.	1.67 to 1
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Larry leon Parish 16127 Chasemore Drive	
Spring, TX 77379	3. Service Type Certified Mail
<b>*</b>	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	6 2760 0001 6378 2494
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

321,7	U.S. Postal Service Mallonia RECEIPT  (Domestic Mail Only MHF/ENCANA BLANCO WASH	A
2760 0001 6378	Postage \$ Certifled Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	<u> </u>
7006	LAWRENCE JACQUEZ PO BOX 275 NAGEEZI, NM 87037 Sec Reverse for Instructions	

SENDER: COVILETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	AC-Signature
item 4 if Restricted Delivery is desired.	Agent
Print your name and address on the reverse so that we can return the card to you.	W Like Paress
Attach this card to the back of the mailpiece,	B. Received by (marted Name) C. Date of Delive
or on the front if space permits.	The state of the s
Article Addressed to:	D. Is class ery address divers in from item 1?  Yes
maper and the second se	YEs, enter delivery address below: D No
LAWRENCE CHARLIE	
LAWRENCE CHARGE	10 10 10 10 10 10 10 10 10 10 10 10 10 1
PO BOX 5452	
FARMINGTON, NM 87499	3 Service Type
	Certified Mali
	Registered Return Receipt for Merchand
•	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number	( 37(0,000) (378,000)
	elsseorooor eastrosse
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-1
ENDER: COMPLETE THIS SECTION	
	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signature
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	A. Signature  X. MANN — WOULZ   Addressee  B. Received by (Printed Name)  C. Date of Delivery
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  X. MAHN - WOULZ - Agent  B. Received by (Printed Name)   C. Date of Delivery  LAND - ACOUZ - C. LUI   G.
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. MAHN — WOULZ
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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  X. MAHN - WOULZ - Agent  B. Received by (Printed Name)   C. Date of Delivery  LAND - ACOUZ - C. LUI   G.
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:	A. Signature  X. MAHN — WLOULZ
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ	A. Signature  X. MAHN — WLOULZ
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ PO BOX 275	A. Signature  X. MAHN — WLOULZ
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ	A. Signature  X. MAHN — WLOULZ
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ PO BOX 275	A. Signature  X. Mulan
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ PO BOX 275	A. Signature  X. Muchan Lucule 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  S. Certified Mali  Registered  Return Receipt for Merchandise
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ PO BOX 275	A. Signature  X. MANN — LOUIC
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ PO BOX 275	A. Signature  X. MANN — LOUIC — 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  — S. Certified Mall — Express Mail  — Registered — Return Receipt for Merchandise
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LAWRENCE JACQUEZ PO BOX 275	A. Signature  X. MANN — LOUIC

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PLACE STICKER AT TOP OF ENVELOPE TO THE PIGHT	
THE STATE OF THE S	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION	
	A. Signature
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	* nelver James - Addressee
- bullet hour name and addless on the love.	B. Received by ( Printed Name) C. Date of Delivery
so that we can return the card to you.	Marian James
<ul> <li>Attach this card to the back of the mailpiece,</li> <li>or on the front if space permits.</li> </ul>	Automobile Provided All Ves
·	D. Is delivery address different from the first of the fi
1. Article Addressed to:	WELL STREET TO
)	1 (20.5 (5) (0.14) (6)
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LEONARD MASON JR	
:   PO BOX 1604	3. Service Type USP3
FRUITLAND, NM 87416	The Contract Mail To Express Mail
	Registered Return Receipt for Melchardise
A commence of the second second	Insured Mail C.9.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number	
(Transfer from service label)	Return Receipt 102595-02-M-1540 1
PS Form 3811, February 2004 Domestic	A CONTRACTOR OF THE PROPERTY O
PS Form 3811, February 2004	
PS Form 3011, February 200	1120
E RETUGN ADDRESS, FOLD AT DOTTED LINE STICKER AT TOP OF ENVELOPE TO THE RIGHT	NE SO
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3, Also complete	A. Signature
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature Agent  X Maul Jame /Addressee
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature  A. Signature  A. Received by (Printed Name)  C. Date of Delivery
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  MATAM TUMES  D. Is delivery address different from item 17   Yes
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 17  Yes  If YES, entergelivery address play: D. S. No
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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.  LEONARD MASON SR	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 17  Yes  If YES, enterdelivery address play: D. Sho
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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.  LEONARD MASON SR	A. Signature  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  LEONARD MASON SR PO BOX 1604	A. Signature  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  LEONARD MASON SR PO BOX 1604	A. Signature  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  LEONARD MASON SR PO BOX 1604	A. Signature  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  LEONARD MASON SR PO BOX 1604	A. Signature  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LEONARD MASON SR PO BOX 1604 FRUITLAND, NM 87416	A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  A. Service of Delivery  A. Signature  A. Agent  A. Signature  A. Agent  A. Agent  A. Addressee  B. Received by (Printed Name)  C. Date of Delivery  A. Signature  A. Signature  A. Agent  A.
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  LEONARD MASON SR PO BOX 1604	A. Signature  A.

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Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  LEVATO WENDELL	77 6585	For delivery information	NCANA O WASH
PS Form 3800. August 2006 See Reverse for Instruction	2006 2760	Certified Fee SSO Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  LEVATO, WENDELL II PO BOX 1191 IGNACIO, CO 81137	SEP 1 2 2014

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SENDE! ТЕМЕН ОТ ЭТОТЕ В В В В В В В В В В В В В В В В В В В	HECTION ON DELIVERY XXIIS 30VId.
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X ( Lundence Loude
Article Addressed to:	If YES, enter delivery address below:
1. C	
LEVATO, CALVIN PO BOX 1491	
IGNACIO, CO 81137	3. Service Type  Certified Mail
·	4. Restricted Delivery? (Extra Fee)
2. Article Number 7006 271	.0001 6377 6592
SENDE: SENDE: SENDE BILL OI BEODENIE BOUND HER BOUND HER BOUND BENDER BOUND HER BOUND HER BOUND BENDER BOUND	A. Signature
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	X Phiestine hours Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Pellvery  ONISTINE LEGATOR 17  D. is delivery address different from item 1? Yes
Article Addressed to:     Article Addre	If YES, enter delivery address below:
LEVATO, WENDELL L	
IGNACIO, CO 81137	3 Service Type Certified Mall
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7006 2760	0001 6377 6585
PS Form 3811, February 2004 Domestic Re	

U.S. Postal Service™ CERTIFIED MAILIM RECEIPT 6578 (Domestic Mail Only; No MHF/ENCANA For delivery information vis **BLANCO WASH** 6377 Postage Certified Fee 000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 LEWIS, JEFFERSON 2005 **PO BOX 241** NAGEEZI, NM 87037 PS Form 3800, August 2006 See Reverse for Instructions

<b>36</b> 4	(Domestic Mail O	MAIL REC	7)	
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ŋ	Postage	\$	87	١
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	Restricted Delivery Fee (Endorsement Required)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	10000	
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	PO BOX 3			-
l l	NAGEEZI,	NM 87037	1 <b>0 0 0 0 0 0 0 0 0 0</b>	
	i		<b>************</b>	
	PS Form 3800. August 20	106	See Reverse for Instructions	į

IIVW USIEILUSES			
THE RETURN ADDRESS, FOLD AT DOTTED LINE CE STICKER AT TOP OF ENVELOPE TO THE RIGHT	S SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     TETTERSON (EUTS   9-15-14     D. Is delivery address different from Item 17   Yes		
1. Article Addressed to:	If YES, enter delivery address below: No		
LEWIS, JEFFERSON PO BOX 241 NAGEEZI, NM 87037	3. Service Type  Certified Mail Registered Return Receipt for Merchandise		
	☐ Insured Mail ☐ C.O.D.		
1	4. Restricted Delivery? (Extra Fee) Yes		
2. Article Number   7006 276	0 0001 6377 6578		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			
SENDES: COLD AT DOTTED LINE TOP OF ENVELOPE TO THE RIGHT THEN ADDRESS, FOLD AT DOTTED LINE			
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Pobus Lewin Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Colonson Lewis  C. Date of Delivery		
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No		
LEWIS, ROBINSON PO BOX 31			
NAGEEZI, NM 87037	3. Service Type  Certified Mail  Registered Return Receipt for Merchandise C.O.D.		
	4. Restricted Delivery? (Extra Fee)		
2. Article Number   11			
(Transfer from service label)	3'0001'6377 6561		

U.S. Postal Service CERTIFIED MAILIM RECEIPT MHF/ENCANA 1 6110 (Domestic Mail Only; For delivery information BLANCO,WASH .259 Postage 330 Certifled Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 LEWIS, SUSAN **7006** PO BOX 785 CUBA, NM 87013 see neverse for Instructions

6103	U.S. Postal Se CERTIFIED (Domestic Mail Onl For delivery informati	MAIL: REC	NCANA
7008 2760 0001 6377	Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  LEWIS, TH	S 30 270 270 IOMAS 14 NM 87037	Si Postmark Here
		2005	See Reverse for Instructions

	<u> </u>			
SENDER: COMPLETE THIS SECTION	TE THIS SECTION ON DELIVERY			
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature  X Services Cashillo Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery			
or on the front if space permits.	D. Is delivery address different from item 1? Yes			
1. Article Addressed to:	If YES, enter delivery address below: No			
LEWIS, SUSAN				
FO BOX 785				
CUBA, NM 87013	3. Service Type ☐ Certified Mail ☐ Express Mail			
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.			
	4. Restricted Delivery? (Extra Fee) ☐ Yes			
2. Article Number				
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540				
SENDER: COIMERTE PERIOR ADDRESS, FOLD AD DEFINER AND DEFINER AND DEFINER ADDRESS, FOLD AD DOTTAGE TO THE RIGHT.  MIT DATE TO THE RETURN ADDRESS, FOLD AT DOTTAGE TO THE RELIDER ADDRESS, FOLD AT DOTTAGE TO THE RELIDER ADDRESS.				
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X Thomas on B Agent  Addressee			
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.	B. Received by (Printed Name) C. Date of Delivery Thomas Laure 9115114			
Article Addressed to:	D. Is delivery address different from Item 1? ☐ Yes If YES, enter delivery address below: ☐ No			
LEWIS, THOMAS				
PO BOX 314				
NAGEEZI, NM 87037	<u></u>			
	0.0			
	3. Service Type  Certifled Mail Express Mail Registered Return Receipt for Merchandise C.O.D.			
	Certifled Mail			
2. Article Number	Certifled Mail			

U.S. Postal Service CERTIFIED MAIL RECEIPT. (Domestic Mail Only; MHF/ENCANA For delivery information BLANCO WASH **5377** Postage Certified Fee 0007 330 Return Receipt Fee (Endorsement Required) Postmark 270 Restricted Delivery Fee (Endorsement Required) 2760 7 LONE BEAR, DANA ALINE PO BOX 1312 7005 NEW TOWN, ND 58763

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 	For delivery information MHF/ENCANA	
را 19	RIANCO WAST	
<u>1</u>	Postage \$ 69	
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000	Return Receipt Fee (Endorsement Required)	
	Restricted Delivery East	
ā	Restricted Delivery Fee (Endorsament Regulred)	
2760		
	LOUISE BEGAY HARKES	
7006	PO BOX 2166	$\neg$
7	BLOOMFIELD, NM 874	
	LECONIFIELD, NM 874 13	_
<b>S</b> .		- 1

, See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LOUISE BEGAY HARKES PO BOX 2166	A. Signature  X  D. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  9-15-14  D. Is delivery address bifferent from Item 1?  Yes  If YES, enter delivery address below:
BLOOMFIELD, NM 87413	
	3. Service Type ☐ Certified Mail ☐ Express Mall ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ So.D.
£	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number,	'5760''0001 E378 5685
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

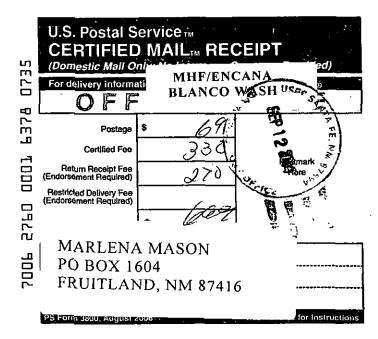
U.S. Postal Service ™ CERTIFIED MAIL, RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 070 MHF/ENCANA For delivery information v **BLANCO WASH** 40 5 Postage \$ ᆁ Certified Fee 0001 Postmark Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 LUCY A MASON 7006 PO BOX 1862 BLOOMFIELD, NM 87413 PS Form 3800, August 2006

92 O476	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail On MHF/ENCANA BLANCO WASH  (ed)
7006 2760 0001 6378	Postage \$ Certifled Fee 330 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  Marilyn F. Menasco Revocable  Trust dated 10/25/1996  7714 Stuebenway Stockton, CA 95270

ENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  W. C. Date of Delivery  D. Is delivery address different from item 1?  If YES, enter delivery address below:
LUCY A MASON PO BOX 1862 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail
2. Article Number 7006 (Transfer from service label)  Domestic Re	400505 02 M 1540
PS Form 3811, February 2004 Domestic He  OF THE BETINEN ADDRESS, FOLD AT COLLED LINE  DIACE STICKER AT TOP OF ENVELOPE TO THE RIGHT	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  Marilyn F. Menasco Revocable.  Trust dated 10/25/1996  7714 Stuebenway	A. Signature  X
:Stockton, CA 95270	3. Service Type  Certified Mail
2. Article Number 7006 (Transfer from service label)	2760 0001 6378 0476
PS Form 3811, February 2004 Domestic Ret	um Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION



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	CERTIFIED	MAIL REC	CEIPT	
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	l Off	ੂਸ 466 ਨੂੰ ਸ਼ <sub>ਾਜ</sub> ਰ ਸ਼ਿਲ੍ਹ । ।		
D D	Postage	s 69	A Vicha	_
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7009	Return Receipt Fee (Endorsement Required)	270	Postmark  Here	
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П	MARLENE	MASON		_
	PO BOX 16			
₹		ID, NM 8741 <i>6</i>	· · · · · · · · · · · · · · · · · · ·	
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery		
1. Article Addressed to:  MARLENA MASON PO BOX 1604	D. Is delivery address dive part from from 1? Mores If YES, enteroblivery address pelow. TPD No. 14		
FRUITLAND, NM 87416	3. Service Type 5  Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)		
22.5	102595-02-M-1540		
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 9: Also complete item 4 if Restricted Delivery is desired. 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.  MARLENE MASON PO BOX 1604 FRUITLAND, NM 87416  COMPLETE THIS SECTION ON DELIVERY  Addressee  B. Received by (Printed Name) C. Date of Delivery  M. M. D. Is delivery address different from item 10 Desail of Delivery  MARLENE MASON PO BOX 1604 FRUITLAND, NM 87416  3. Service Type Certified Mail Registered Insured Mail Registered Insured Mail Restricted Delivery? (Extra Fee) Print your name and addressee  Complete This SECTION ON DELIVERY  Addressee  B. Received by (Printed Name) C. Date of Delivery  M. M. D. Is delivery address different from item 10 Desail of Delivery  MARLENE MASON PO BOX 1604 FRUITLAND, NM 87416			
(Transfer from service label)	Un Beceipt 102595-02-M-1540		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540			

U.S. Postal Service 144 CERTIFIED MAIL RECEIPT **6073** (Domestic Mail Only; No MHF/ENCANA For delivery information vi **BLANCO WASH** 437 Postage 330 Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 MARTINEZ, DOREEN F PO BOX 65444 ALBUQUERQUE, NM 871933 MARTINEZ, DOREEN F 2006

m Postage \$	ENCANA CO WASH	AL <sub>M</sub> REC	Stal Servi IFIED M. Mail Only; A y Information v	CERT (Domesti	,7 5066
Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  MARTINEZ, EMMETT  1300 NEW HAMPSHIRE 63 ROCKSPRING, WY 8290  PS Form 3800, August 2006  See Roverse for Instruction	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	270 / / / / / / / / / / / / / / / / / / /	tified Fee ceipt Fee lequired) livery Fee Required)  CINEZ, EINEW HAI SPRING,	Return Re (Endorsement I Restricted Del (Endorsement I I I I I I I I I I I I I I I I I I I	2006 2760

## Return

SENDER: COMPLETE CHE BOLLED LINE STICKER AT TOP OF ENVELOPE TO THE RIGHT STICKER AT TOP OF ENVELOPE TO THE RIGHT	H1 ±0 ECTION ON DELIVERY			
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Limits III and The 2  D. Assertivery address different from Item 1?   Yes			
1. Article Addressed to:  MARTINEZ, EMMETT  1300 NEW HAMPSHIRE 63	If YES, enter deliver reddress below: No			
ROCKSPRING, WY 82901	3. Service Type  Certified Mall  Express Mail  Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.			
	4. Restricted Delivery? (Extra Fee)			
2. Article Number 7006 2760:	0001,6377 6066			
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540			

PS Form 3800. August 2006

"IIVN OHHILBE	
HE BEJURN ADDRESS FOLD AT DOTTED LINE  E STICKER AT TOP DE ENVELOPE TO THE MIGHT	30 SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. Mulul M. Agent  Addressee  B. Received by (Printad Name)  C. Date of Delivery  L. Is delivery address different from item 1?   Yes
1. Article Addressed to:  MARTINEZ ESTATE, ROSE M EASTERN NAVAJO AGENCY PO BOX 328	If YES, enter delivery address below:
GROWNPOINT, NM 87313	3 Service Type □ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number	0001: 6377 6080
PS Form 3811. February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

Return



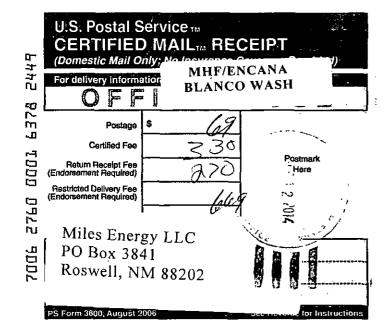
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2760	(Endorsement Required)	669	(Page )
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7005	Revocable Tru	ust dated 1/7/1992	EEHD:
7	6748 South A Tulsa, OK 74	The state of the s	
	The second of th	·	

SENDER: COIMPLETE LHIS SECTION SOBRESS, FOLD AT THORE SENDER SERVED A MEUT	DE SHE HO
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  Coate of Delivery  PMA  D. Is delivery address different from item 1?   Yes
1. Article Addressed to:  MARTINEZ, VERNA PO BOX 26	If YES, enter delivery address below:
NAGEEZI, NM 87037	3. Service Type  Certified Mall Express Mail Registered Return Receipt for Merchandise C.O.D.
2. Article Number 7006 276	4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
PS Form 3811, February 2004 Domestic Ret	turn Receipt 102595-02-M-154

U.S. Postal Service IM CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) MHF/ENCANA For delivery information LL) **BLANCO WASH** цij E E Postage <u>.</u> Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 MARY W VICTOR 2006 PO BOX 112 NAGEEZI, NM 87037 for Instructions

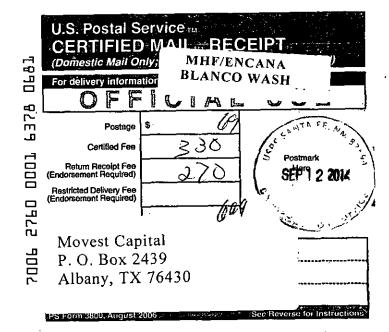
8 금531	U.S. Postal S CERTIFIEL (Domestic Mail O For delivery Information	D MAIL REC	NCANA O WASH
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2760			To a series of the series of t
'n	MAYBELL	E BEGAY	
교	PO BOX 17	732	
700E	BLOOMFIE	ELD, NM 874	13 9999
	PS Form 3800, August 2	2006	See Reverse for Instructions

PLACE STICKER AT TOP OF ENVEL OF THE RETURN ADDRESS, POLD	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  MARY W VICTOR  PO BOX 112  NAGEEZI, NM 87037	A. Signature  X. E. B. C. G. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Deli
·	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number	760 0001 6378 2371
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  Addressee  B. Received by (Pampa Name)  C. Date of Delivery  June 2 2 16.14  D. Is delivery address different from item 1?  If YES, enter delivery address below:
MAYBELLE BEGAY PO BOX 1732 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail
A ASSESSMENT OF THE RESIDENCE OF THE PARTY O	
2. Article Number	<del></del>
(Transfer from service label)	turn Receipt 102595-02-M-1540



77 630ኔ	U.S. Postal S CERTIFIED (Domestic Mail Of For delivery information)	MAIL <sub>TM</sub> REC	ENCANA O WASH
7006 2760 0001 637	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  MONTOYA PO BOX 12 DULCE, NI		Postman Step 12 20M
	PS Form 3800, August 20	006	See Reverse for Instructions

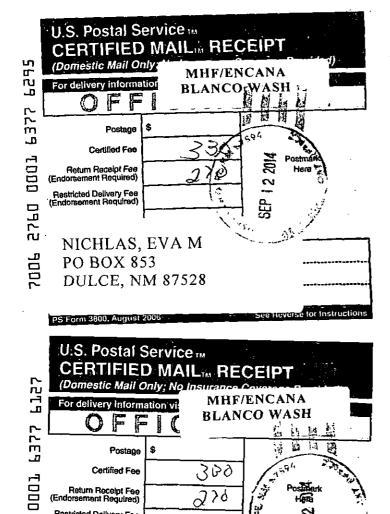
SENDER: COMPLETE THIS SHOOT NUMBER  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  MONTOYA, ADELINE GAIL  PO BOX 1248	A. Signature    A. Signature
DULCE, NM 87528	3. Service Type  Certifled Mail
2. Article Number (Transfer from service label) 1117,004,12740	U0001 6377 6301 102595-02-M-1540



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0007	Return Receipt Fee ( (Endorsement Required)	270	DELHOUS EDAN
⊒	Restricted Delivery Fee (Endorsement Required)		
ď	(Endorsement Required)	66	Y
2760			
	Nelson Min	nerals, LLC	
7006	4901 Crest	wood Drive	***********
7	Farmington	ı, NM 87401	-=
•	<b>6</b>	•	v - To - T
	PS FORM JOHN, AUGUST	2000	tor Instructions

SW TOPORESS, FOLD AT DOTTED LINE.	OF THE RETUR			
SENDER: COMPLETE THIS SECTION	and the second	COMPLETE THIS SE	CTION ON DELIVE	RY.
<ul> <li>Complete items 1/2, and 3. Also completem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reso that we can return the card to you.</li> <li>Attach this card to the back of the mail or on the front if space permits.</li> </ul>	verse	A. Signature  B. Received by (Printing SHEUY)		Agent Addressee  Date of belivery
1. Article Addressed to:		D. Is delivery address		
Movest Capital P.O. Box 2439 "Albany, TX 76430		3. Service Type  Qertified Mail  Registered  Insured Mail	Express Mail Return Receipt C.O.D.	□ No
: 		4. Restricted Delivery	/? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label)	7006, iŞ	760,0001; <u></u>	378 0681	<u>_</u>
PS Form 3811, February 2004	Domestic Retu	rn Receipt	· · · · · · · · · · · · · · · · · · ·	102595-02-M-1540
CKER AT TOP OF ENVELOPE TO THE RIGHT	RESTORTE			
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SE	ECTION ON DELIVE	RY.
Complete items 1, 2, and 3. Also complete items 1, 2, and 3. Also completem 4 if Restricted Delivery is desired.  Print your name and address on the reso that we can return the card to you.  Attach this card to the back of the main	verse	A. Signature  X  B. Received to Prin	nted Name)	☐ Agent ☐ Addressee  Date of Delivery
or on the front if space permits.  1. Article Addressed to:		[	different from item very address below:	☐ Yes ☐ No
Nelson Minerals, LLC 4901 Crestwood Drive		SEP SEP	% / <u>/                                   </u>	<b>,</b>
Farmington, NM 87401	, <b>L</b>	3. Service type  Certified Mail Registered Insured Mail	☐ Express Mail ☐ Return Receip ☐ C.O.D.	t for Merchandise
		4. Restricted Deliver	y? (Extra Fee)	. 🗆 Yes
2. Article Number 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	700	16 2760 00C	31 P34 D	567 <u> </u>
PS Form 3811, February 2004	Domestic Ret	urn Receipt		102595-02-M-1540

102595-02-M-1540



Restricted Delivery Fee (Endorsement Required)

PO BOX 8583

PS Form 3800, August 2006

OTERO, ISABELLE T

ALBUQUERQUE, NM 87198

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AND CALLOG IN CO. I Service	
SENDER: COMMENT THE BIRTH OF THE STATE OF THE PROPERTY OF THE	STILL SO STION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X Lyu // / / / / / / Agent  B. Beceived by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
NICHLAS, EVA M PO BOX 853 DULCE, NM 87528	3. Service Type
estando sente.	Certified Mail  Registered  Return Receipt for Merchandise  C.O.D.
•	4. Restricted Delivery? (Extra Fee)
2. Article Number \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0001 6377 6295 TIME
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Signature
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Beceived by (Printed Name) DON C. Date of Delivery  D. Is delivery address different from item 1? Yes
OTERO: ISABELLE T PO BOX 8583	If YES, enter delivery address below: ☐ No
ALBUQUERQUE, NM 87198	3. Service Type C.Certified Mail Registered Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number, 7006 a	760 0001 6377 6127

Domestic Return Receipt

PS Form 3811, February 2004

U.S. Postal Service 6940 (Domestic Mail Only; No MHF/ENCANA For delivery information vis **BLANCO WASH** 四) 든 Postage Ш Certified Fee 0001 Postmark Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) **SEP 1 2 2014** 2750 Patricia Louise Dorsett Trus 16127 Chasemore Drive 700F Spring, TX 77379 

	U.S. Postal S	A STORY OF THE PARTY OF THE PAR	CEIDE
8 0599	CEHITIFIED (Domestic Mail Of For delivery informa	MHF/I	ENCANA CO WASH
2760 0001 6374	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	\$ 69 338, 278	Sestmark There There
2006 2	Paul Davis, P. O. Box 8 Midland, T.	371	od disturbions

PL ACE STICKER AT TOP OF ENVELOPE TO THE RIGHT STATES LINE OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	*COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent Addressee  B. Received by (Printed Name)  Chate of Delivery
Patricia Louise Dorsett Trust 16127 Chasemore Drive Spring, TX 77379	D. Is delivery address different from item 1?
Spring, 1X 7/3/9	3. Service Type  □ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.
•	4. Restricted Delivery? (Extra Fee)
2. Article Number: 111 7006 (Transfer from service label)	52PO 0007 P358 0483
PS Form 3811, February 2004 Domestic Retr	ırn Receipt 102595-02-M-1540 <sup>f</sup>
	The state of the s
E BETJURN ADDRESS, FOLD AT DOTTED LINE STICKER AT TOP OF ENVELOPE TO THE RIGHT	H1 50
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  A. Signature  Addressee
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?
Paul Davis, Ltd	
P. O. Box 871	
# Midland, TX 79702	<u> </u>
4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	3 Service Type  Certifled Mail D Express Mall Registered D Return Receipt for Member

4. Restricted

2. Article Number (Transfer from service In)

PS Form.

U.S. Postal Service 188 CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 790 For delivery information a MHF/ENCANA **BLANCO WASH** 먑 'n Postage \_\_\_ Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 Primitive Petroleum, Inc. 7006 4514 Robin Lane Midland, TX 79707

	U.S. Postal S CERTIFIED	MAILMREC	CEIRT ***	概念的工作
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0001	Return Receipt Fee (Endorsement Required)	270	) <b>~</b> ;;}	
	Restricted Delivery Fee (Endorsement Required)		We will be a second	
2750		- Oev.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
U	RAY LOP	EZ		$\neg$
4	PO BOX 4			
7005	NAGEEZI	, NM 87037	37. C. A	
	{	_		APOC DIE
	PS Form 3800. August	2006	Sec Reverse for Instruction	

E STICKER AT 10P OF ENVELOPE TO THE RIGHT THE RETURN ADDRESS, FOLD AT DOTTED LINE	OV 4
SENDER: COMPLETE THIS SECTION:	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  Primitive Petroleum, Inc.  4514 Robin Lane  Midland, TX 79707	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No  No
	☐ Certified Mall ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ C.O.D.
a resident to the second of th	4. Restricted Delivery? (Extra Fee).
2. Article Number !!	וובנשטוופּצָבּשׁן בּסססט
PS Form 3811, February 2004 Domestic Ret	
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SELIDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X dunces hee  Agent  Addressee
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.	Baceived by (Printed Name) C. Date of Delivery Ches Chee 9/15/14
Article Addressed to:	D. Is delivery address different from item 1? Yes ' If YES, enter delivery address below: No
RAY LOPEZ PO BOX 422	
NAGEEZI, NM 87037	3. Service Type S Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)
2. Article Number 11 700612	760,0001 6378 2517
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAILTM RECEIPT (Domestic Mail Only; N 3026 MHF/ENCANA For delivery information vi **BLANCO WASH** 378 Postage ۰ Certified Fee 1000 Postmark Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 RAYLENE R UPSHAW, JENNIFER VIGIL, PARENT OF RAYLENE ROSE UPSHAW 7006 PO BOX 6805 FARMINGTON, NM 87499 . See Reverse for Instructions PS Form 3800, August 2006

J.t	(Domestic Mail O	MAIL RECEIP I  MHF/ENCANA  ed)
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1000	Return Receipt Fee (Endorsement Required)	270 Here I
	Restricted Delivery Fee (Endorsement Required)	1,64
09	(	007
2760		CHAPIEY
	RICHARD	CHARLEY
7	29909 N 6	01H S1
7005	CAVE CR	EEK, AZ 85331
	PS Form 3800, August	2006 See Reverse for Instructions

THOUGHT OF THE CANAL	A ROMAN TO THE PARTY OF THE PAR
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
RICHARD CHARLEY 29909 N 60TH ST GAVE CREEK, AZ 85331	
CALLE CREEK, AL 03331	3. Service Type Cl Certified Mail
	4. Restricted Delivery? (Extra Fee)
Article Number	7006 2760 0001 6378 2814
PS Form 3811, February 2004 Domes	tic Return Receipt 102595-02-M-1540

U.S. Postal Service™ CERTIFIED MAIL RECEIPT 2543 (Domestic Mail Only; No I MHF/ENCANA For delivery information visit BLANCO WASH 378 D 11-0 -Postage \$ \_0 Certified Fee 000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 RICHARD R UPSHAW PO BOX 1543 7006 FRUITLAND, NM 87416 for Instructions

Ф	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL RECEIP	
78 3DB	For delivery information	BLANCO WAS	H
2760 0001 63	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	330	Strank Frank Pere R. M.
7006 2·	ROBBIE J 2 ROAD 30 AZTEC, NI	053 M 87410	

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items: 4, 7, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X
RICHARD R UPSHAW PO BOX 1543 FRUITLAND, NM 87416	3. Service Type  Centified Mail
·	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7006 -2	760 0001 6378 2593
PS Form 3811, February 2004 Domestic Rete	urn Receipt 102595-02-M-1540 .
SENDER: COMPLETE THIS SECTION  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete with a fire stricted Delivery is desired.  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:  ROBBIE J WERITO  2 ROAD 3053	A. Signature  A. Signature  A. Signature  A. Received by (Rained Name)  C. Date of Delivery  Rentree on the globy  D. Is delivery address different from Item 1? Yes  If YES, enter delivery address below: No
AZTEC, NM 87410	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
1	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	LO 0001 L378 3088
PS Form 3811, February 2004 Domestic F	Return Receipt 102595-02-M-1540

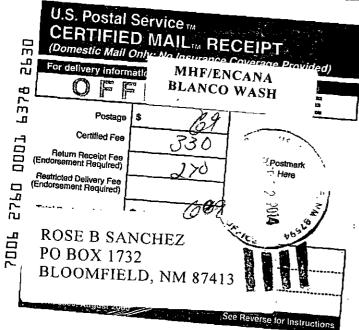
U.S. Postal Service ™ CERTIFIED MAIL RECEIPT (Domestic Mail Only; No MHF/ENCANA For delivery information vis **BLANCO WASH** 'n 40 m Postage \_\_ Certified Fee 0007 Return Receipt Fee (Endorsement Required) >0 Restricted Delivery Fee (Endorsement Required) 2760 ROBERT R UPSHAW H 7006 PO BOX 1862 BLOOMFIELD, NM 87413

U.S. Postal Service TM CERTIFIED MAIL RECEIPT (Domestic Mail Only MHF/ENCANA For delivery information **BLANCO WASH** ū 40 Postage m ۰ Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Regulred) 276 RONALD, JACQUEZ, C/O LINDA HOGUE 700F PO BOX 1051 KIRTLAND, NM 87417

for Instructions

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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 R UPSHAW  • PO BOX 1862	A. Signature  X
BLOOMFIELD, NM 87413	3. Service Type  Certified Mall
2. Article Number 11 11111 7006 2760	0001/16378 (2579)
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540





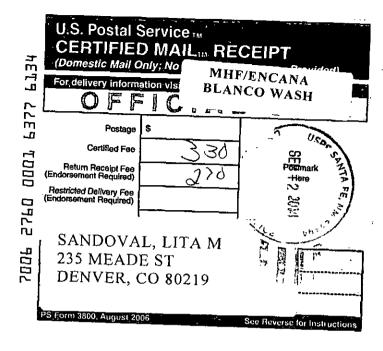
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE  OF THE RETURN ADDRESS, FOLD AT DOTTED LINE	
SENDER: COMPLETE THIS SECTION	COMPLÊTE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailplece, or on the front if space permits.  1. Article Addressed to:  RONNIE JACQUEZ, C/O	A. Signature  X Agent  Addressee  B. Received by Printed Warner  C. Date of Delivery  D. Is delivery address different from Item 1?  If YES, enter delivery address below:  Addressee  Addr
SANDY JACQUEZ	87413
BLOOMFIELD, NM 87413	3. Service Type □ Certified Mail □ Express Mail □ Registered □ Insured Mail □ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 700E PS Form 3811, February 2004 Domestic Re	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mailplece, or on the front if space permits.	A. Signature  A. Signature  B. Received by (Printed Name)  C. Date of Delivery
ROSE B SANCHEZ	1 1
PO BOX 1732 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail  Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number   7006 2	760 0007 (2349, 5630 )

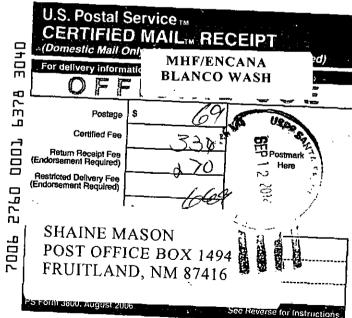
8 2463	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No For delivery information vis OFFIC
7006 2760 0001 6378	Postage \$
	PS Form 3800. August 2006 See Reverse for Instructions

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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also completem 4 if Restricted Delivery is desired.  Print your name and address on the reso that we can return the card to you.  Attach this card to the back of the main or on the front if space permits.	verse  B. Received by (Printed Name)	Agent Addressee Copate of Pelivery
1. Article Addressed to:  R&R Royalty Ltd. 500 N. Shoreline Blvd., Suite 322	D. Is delivery address different from it If YES, enter delivery address be	f —
Corpus Christi, TX 7840	Certified Mall	Mail ecelpt for Merchandise
2. Article Number	:2006.2760 0001:6378:2	463
PS Form <b>3811</b> , February 2004	Domestic Return Receipt	102595-02-M-1540

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

102595-02-M-1540





IIVW UFIELL GER			
SENDER: LOED AT DOTTED LINE	SUBSECTION ON DELIVERY		
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  A. Agent  Addressee  B. Received by Printed Name)  C. Date of Delivery  L. Iah Sandoval  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:		
SANDOVAL, LITA M 235 MEADE ST DENVER; CO 80219	3. Service Type  Certified Mail Registered Resistered Insured Mail C.O.D.		
1	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Transfer from service label) 7006 27	260 0001 6377 6134		
PS Form 3811, February 2004 Domestic F	teturn Receipt 102595-02-M-1540		
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E STICKER AT TOP OF ENVELOPE TO THE RIGHT	<b>*</b>		
SENUER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A sig		
1. Article Addressed to: SHAINE MASON POST_OFFICE_BOX 1494	D. Is delivery address different from bein 17.2. Yes  If YES, enter delivery address below:		
FRUITLAND, NM 87416	3. Service Type  Certified Mail  Registered  Return Receipt for Merchandise  Insured Mail  C.O.D.		
	4. Restricted Delivery? (Extra Fee)		
(Transfer from service label) 7006 c	760 0001 6378 3040		
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540		

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	U.S. Postal Service The Table 1	
	CERTIFIED MAIL RECEIPT	in partial.
57	(Domestic Mail Only;   MHF/ENCANA	
	For delivery information BLANCO WASH	13,
М	OFFIL	<b>.</b>
<b>6378</b>	Postage \$	LA D
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2760	Total Postage & Fees \$	N
•	SHAYLA S BEGAY, CHERYL SO,	4
7006	PARENT OF SHAYLAS BEGAT	
7.	PO BOX 48	
	NAGEEZI, NM 87037	

E STICKER AT TOP OF ENVELOPE TO THE HIGHT	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 2, and 3. Also complete item 4 If Restricted Delivery is desired. ■ 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  X. M. Algent  Agent  Addressee  B. Received by (Printeg Name)  C. Date of Delivery  Munium
SHANE MITCHELL MASON POLBOX 1604	D. Is delivery address different from its of the last
FRUITLAND, NM 87416	3. Service Type  Certified Mall  Registered  Return Receipt for Merchandise  C.O.D.
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7006 27	60 0001 6378 2746
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Р ФСЕ БУПСКЕЯ ТОР О В ТНЕ НЕГИВИ ВОДИЯ В В В В В В В В В В В В В В В В В В В	
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: SHAYLA S BEGAY, CHERYL TSO, PARENT OF SHAYLA S BEGAY PO BOX 48	A. Signature  X. Maly ( ) Agent  D. Addressee  B. Received by (Printed Name)  (C. Date of Delivery  (Navy C. T50 9 15 14
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: SHAYLA S BEGAY, CHERYL TSO, PARENT OF SHAYLA S BEGAY	A. Signature  X. Maly ( ) Agent  Addressee  B. Received by ( Printed Name)  ( ) D. Is delivery address different from item 1? Yes
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: SHAYLA S BEGAY, CHERYL TSO, PARENT OF SHAYLA S BEGAY PO BOX 48	A. Signature  X. Maly ( )
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  SHAYLA S BEGAY, CHERYL TSO, PARENT OF SHAYLA S BEGAY PO BOX 48 NAGEEZI, NM 87037	A. Signature  X. Maly ( )

U.S. Postal Service TM CERTIFIED MAIL RECEIPT (Domestic Mail Only; N MHF/ENCANA **BLANCO WASH** For delivery information vi 6378 Postage Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 SUSAN BEGAY 2006 PO BOX 1981 KIRTLAND, NM 87417 See neverse for Instructions

'n.		D MAILTM RECEIPT
8 2507	(Domestic Mail C	MHF/ENCANA BLANCO WASH
μ̈	Postage	\$ 330 E USDASE
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במטמ	Return Receipt Fee (Endorsement Required)	2*70 Postmark ** \
	Restricted Delivery Fee (Endorsement Required)	200
2760	Total Destant P Dans	0
- 1	SUSIE TRU	JILLO III
7005	PO BOX 20	574
<b>-</b> -	BLOOMFI	ELD, NM 87413
		far Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT		
SENDER: COMPLETE THIS SECTION "	COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 f Restricted Delivery is desired. ■ 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  X	
1. Article Addressed to:  SUSAN BEGAY PO BOX 1981	D. Is delivery address different from item 1? es  If YES, enter delivery address below: No  No  SUSAA  DUCS I d3S	
KIRTLAND, NM 87417	3. Service Type  Certified Mall  Registered Return Receipt for Merchandise C.O.D.  4. Restricted Delivery? (Extra Fee)	
2. Article Number i iji i i i i i i i i i i i i i i i i		
(Transfer from service label) 700L	5280 0001 6359 5616	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	COMPLETE THIS SECTION ON DELIVERY  A Signature  A Agent  Addressee  B Received by (Printed Narde)  C. Date of Delivery  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:	
PO BOX 2674 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail	
2. Article Number		
2. Article Number (Transfer from service label)	2760:0001:6378:2609	

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	U.S. Postal Service TM	
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	Return Receipt Fee (Endorsement Required)	
האלת	CANAL DECEMBER OF MARKETINAS	Ħ
i	SYLVESTER ESTATE, MARTHAS C/O THOMAS SYLVESTER	
_	PO BOX 636	
7006	DULCE, NM 87528	- 1
<u>τ</u> ~	, po202, 1	
	***************************************	
	PS Form 3800, August 2006 See Reverse for Instru	
		enons
7 6165	U.S. Postal Service TM CERTIFIED MAIL TM. RECEIPT (Domestic Mail Only; No Insurance Coverage Provided). For delivery information vis OFFIC BLANCO WASH	-tions
377 616	U.S. Postal Service TM  CERTIFIED MAIL RECEIPT  (Domestic Mail Only; No Insurance Coverage Provided).  For delivery information vis.  MHF/ENCANA	citons
6377 616	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFFIC Postage \$	and in
1 6377 616	U.S. Postal Service TM CERTIFIED MAIL MRECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFFIC  Postage  Certified Fee  330  Postage  Postage	and its
0001 6377 616	U.S. Postal Service TM CERTIFIED MAIL IN RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis  MHF/ENCANA BLANCO WASH  Postage  Certified Fee (Endorsement Required) Restricted Delivery Fee	
1000 G	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFF C MHF/ENCANA BLANCO WASH  Postage Certified Fee (Endorsoment Required)  Postage  Return Receipt Fee (Endorsoment Required)	The same of the sa
0001 6377 616	U.S. Postal Service TM CERTIFIED MAIL IN RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFFICE MHF/ENCANA BLANCO WASH  Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	1000
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2760 0001 6377 616	U.S. Postal Service TM CERTIFIED MAIL THE RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFFC MHF/ENCANA BLANCO WASH  Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) SYLVESTER, MOANA M PO BOX 2932	
1000 G	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFFC MHF/ENCANA BLANCO WASH  Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  SYLVESTER, MOANA M	1000
2760 0001 6377 616	U.S. Postal Service TM CERTIFIED MAIL THE RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information vis OFFC MHF/ENCANA BLANCO WASH  Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) SYLVESTER, MOANA M PO BOX 2932	The same of the sa

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U.S. Postal Service™ CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No I MHF/ENCA 58 MHF/ENCANA ĘŢ For delivery information visit BLANCO WASH 4377 Postage Certified Fee 330 0001 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 7005 SYLVESTER SR, CHARLES H PO BOX 6 NAGEEZI, NM 87037 - See Reverse for Instructions

77 6172	U.S. Postal Service IM CERTIFIED MAIL: RECEIPT (Domestic Mail Only; N For delivery information and BLANCO WASH	
637	Postage \$	٦
7000 0922 9001	Certified Fee 330 Return Receipt Fee 270 Restricted Delivery Fee (Endorsement Required)  SYLVESTER, THOMAS 1124 N FAIRGROUNDS RD #24	`,^
22	FARMINGTON, NM 87401	
-	See Heyers to Justines	

The survey was a state of the s	
SENDER: COMPLETE THIS SECTION AND THE REAL MAINTENANCE OF THE SENDER.	LS 30V1d CTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Croscus + S Mar Addressee  B. Received by (Printed Name)  C. Date of Delivery  Charles + Sylver 9   16   14
Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:  No
SYLVESTER SR, CHARLES H PO BOX 6	· · · · · · · · · · · · · · · · · · ·
NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	0 0001/6377 6158;
PS Form 3811, February 2004 Domestic Retr	urn Receipt 102595-02-M-1540

7 6189	For delivery information BLANC	ECEIPT ENCANA CO WASH	
7006 2760 0001 6377	Postage Certified Fee Good Pletum Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  SYLVESTER, VINCENT 1124 N FAIRGROUNDS FARMINGTON, NM 874	RD #7	
	.PS Form 3800, August 2006	s see Heverse for Instruction	າ ກີ່ຮ

7 61,96	CERTIFIEL (Domestic Mail C	D MAILTIN RECE	CANA
2760 0001 6377	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	\$ 338 278	Postmark Here
2005 z	1313 GRIF	ER, VINSTON D FIN AVE APT # TON, NM 87401	2

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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
SYLVESTER, VINSTON D 1313 GRIFFIN AVE APT #2	SEP 874 16 3014
FARMINGTON, NM 87401	3. Service Type  Certified Mail 5 PEDExpress Mail
<u> </u>	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number	0001.6377 6196
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

7006 2760 0001 437A 2500	Postage \$ Certified Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  The Ninety-Six Corporation 550 West Texace Ste 1225
7	PS Form 3800° Auguing 2000
	See Reverse for Instructions
6377 6202	U.S. Postal Service IM CERTIFIED MAIL IM RECEIPT (Domestic Mail Only; For delivery information OFF BLANCO WASH

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETHING ADDRESS, FOLD AT DOTTED LINE	
SENDER COMPLETÉ THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
The Ninety-Six Corporation  55 est Texace, Ste 1225	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No
Millind, TX 79701	3: Service Type  Certified Mail  Registered Return Receipt for Merchandise  C.O.D.
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	o dooyleake lszooy.
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

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7 5786	U.S. Postal S CERTIFIEL (Domestic Mail O For delivery information)	MAI	L <sub>m</sub> REOMHF/E	CEIPT ENCANA CO WASH	
7006 2760 0001 6377	Postage  Certifled Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  VALDEZ, J PO BOX 39 NAGEEZI,	1		Postm Hen	
	no Form Jour, August Z	906	# 1 1 No. 1	See Heverse to	Instructions

THE PARTY OF THE P	8 <b>3</b> 3
SENDER: C	TION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 17  If VES enter delivery address below:  No
THOMPSON, TAMERA A 435 JEFFERSON ST AMERICAN FALLS, 1D 83211	in red, dillet delivery desired policin
*	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
<u> </u>	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	0007 9355 9574
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
SENDER  SENDER  LIPSIE 3HJ OJ 2 drop 15 SSBEDDY NEILEN SIND GLOS IN BENDIS  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  VALDEZ, JESSIE PO BOX 391 NAGEEZI, NM 87037	A. Signature  X
	4. Restricted Delivery? (Extra Fee)
2. Article Number	
PS Form 3811, February 2004 Domestic Retu	rn Receipt 102595-02-M-1540

	U.S. Postal Service M
	CERTIFIED MAIL RECEIPT  (Domestic Mail Only; No MHE/ENCANA
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8768	(Endorsement Required)
LJ 	Virginia F. Zobeck Trust date 1
79	9/1/2008
7006	8003 Wayne Ave.
•	Lubbock, TX 79424
	Per orm 5000, August 2005 👙 y 🦠 - See Reverse for Instructions
	ILS Postal Service
	U.S. Postal Service
35	[전염병원] 이 가는 그 전에 가는 사람들은 전환 전환 기계를 보면 하는 것이 되었다. 그는 그를 보고 있는 것으로 보고 있습니다. 그 사람들이 되었다. 그 사람들이 되었다.
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<u>L</u>	CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA For delivery information vi  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA BLANCO WASH OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA BLANCO WASH OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  BLANCO WASH  OFF  CERTIFIED MAIL RECEIPT (Domestic Mail Only, N. MHF/ENCANA  CERTIFIE
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2760 0001 6377 60	CERTIFIED MAIL RECEIPT  (Domestic Mail Only, N. MHF/ENCANA  For delivery information MHF/ENCANA  BLANCO WASH  OF  Postage  Certified Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  WERITO, MABEL
2760 0001 6377 60	CERTIFIED MAIL RECEIPT (Domestic Mail Only N. MHF/ENCANA For delivery information BLANCO WASH  Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  WERITO, MABEL PO BOX 83
0001 6327 60	CERTIFIED MAIL RECEIPT  (Domestic Mail Only, N. MHF/ENCANA  For delivery information MHF/ENCANA  BLANCO WASH  OF  Postage  Certified Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  WERITO, MABEL

AT TOP OF ENVELOPE TO THE RIGHT	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?  Yes
Virginia F. Zobeck Trust dated	if YES, enter delivery address below: ☐ No
8003 Wayne Ave.	
Lubbock, TX 79424	3. Service Type  Certified Mail  Express Mail  Registered  Return Receipt for Merchandise  C.O.D.
)	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (	2760 0001 6378 0490
PS Form 3811, February 2004 Domestic Retu	m Receipt
SENDER: COMPLETE THIS SECTION AND ACCOUNTS SAUGUY NEW LINES AND COMPLETE THIS SECTION AND ACCOUNTS AND ACCOUN	A. Signature    Agent   Addressee
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  WERITO, MABEL	A. Signature    Agent   Agent   Addressee
SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  WERITO, MABEL PO BOX 83 NAGEEZI, NM 87037	A. Signature    Agent   Agent   Addressee
SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  WERITO, MABEL PO BOX 83 NAGEEZI, NM 87037	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     MAGE   With to   Signature     D. Is delivery address different from item 17   Yes     If YES, enter delivery address below:   No     No   No   No     Registered   Return Receipt for Merchandise     Insured Maii   C.O.D.

U.S. Postal Service 154 SENDER: C ION ON DELIVERY CERTIFIED MAIL RECEIPT Complete items 1, 2, and 3. Also complete MHF/ENCANA (Domestic Mail Only; No l item 4 If Restricted Delivery is desired. ☐ Agent BLANCO WASH Print your name and address on the reverse ☐ Addressee For delivery information visit so that we can return the card to you. 5 C. Date of Delivery B. Received by (Printed/Name) Attach this card to the back of the mailpiece. 17/14 or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: Postage If YES, enter delivery address below: m 330 لال Certified Fee Postmark 0007 Here 270 Return Receipt Fee (Endorsement Required) WERITO, RUBY Restricted Delivery Fee (Endorsement Required) PO BOX 42 · NAGEEZI, NM 87037 3. Service Type 垣 Express Mail
Return Receipt for Merchandise . Certified Mail WERITO, RUBY ☐ Registered 'n Insured Mail II C.O.D. 8 PO BOX 42 4. Restricted Delivery? (Extra Fee) NAGEEZI, NM 87037 ☐ Yes 2 3008 5280 0000 8322 8008 2. Article Number, or Instructions (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540 U.S. Postal Service IM CERTIFIED MAIL RECEIPT UVVI UEIFILLEFU. MHF/ENCANA SENDER: COIALLES FOURE TO THE RIGHT
OF THE RETURN ADDRESS, FOU AS TOTOTA A 100 FOR (Domestic Mail Only; No Ins ECTION ON DELIVERY **BLANCO WASH** For delivery information visit of Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 109 □ Agent Addressee . Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Postage 9-15-14 Attach this card to the back of the mailpiece, Jane M. Werd m 330 or on the front if space permits. Postmark Certified Fee □ Yes D. Is delivery address different from item 1? Here 270 PACING 1. Article Addressed to: If YES, enter delivery address below: Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) WERO, JANE M PO BOX 716. 172 WERO, JANE M BLOOMFIEED, NM 87413 3. Service Type PO BOX 716 Certified Mail ☐ Express Mail BLOOMFIELD, NM 87413 Return Receipt for Merchandise Registered ☐ Insured Mail See Heverse for Instructions 4. Restricted Delivery? (Extra Fee) ☐ Yes PS Form 3800, August 2006 !!!! \7006 2860 0001(6387(601) 2. Article Number; (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

SENDE. THE RICHT STORMES SENDE THE RICHT STORMES SENDE THE RICHT STORMES SENDE THE RICHT SENDE	SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
WILLIE ESTATE, AUDREY P 0 BOX 131 NAGEEZI, NM 87037	3. Service Type  Certified Maii
2. Article Number 11 11 7006 2760	ווון ובקבש קקפון ווין (ווין)
SENCER: COMPLETE HERE OF A TO A SHOON NEAD THOSE SENCER: COMPLETE HERE OF A SHOON NEAD THOSE AND ADD THE HERE OF A SHOON NEAD THOSE AND ADD THE HERE OF A SHOON NEAD THOSE AND A SHOON	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  J. D. is delivery laddress different from item 1?  Yes  If YES, enter delivery address below:
WILLIE, IRA M 758 STAGECOACH TRL DURANGO, CO 81301-8468	3. Service Type  Certified Mail  Express Mail Registered  Return Receipt for Merchandise Insured Mail  C.O.D.  4. Restricted Delivery? (Extra Fee)  Yes
2. Article Number   7006 2760	000016377 6264
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

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8 3033	U.S. Postal S CERTIFIED (Domestic Mail O For delivery informs	MAIL REC	CEIPT INCANA O WASH	
2760 0001 6378	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	\$ 69 330 270 609	Pesamark Here 2 2014	F. N.
7006	PARENT OF PO BOX 48 NAGEEZI, N	EGAY, CHERY XAVIER V BEO M 87037	L TSO	

SENDER: COMPLETE HIS SECTION OF THE SECULOR OF THE SECTION OF THE SECULOR OF THE	
COUNTER THIS SECTION	COMPLETE IN SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Columbia (Maddressee)  B. Rieceived by (Printed Name) // C. Date of Delivery  1000771, W.//y 9 5 14
Article Addressed to:	D. Is delivery address different from item 1? Thes If YES, enter delivery address below:
WILLIE, ROBERT J PO BOX 2233 BLOOMFIELD, NM 87413	
	3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	י מַפֿספֿי נּ בּבָּלָ בַּבָּלְיִים בּבּיל בּבַבּלָי בּבַבּים בּבּ
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Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.  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:  XAVIER V BEGAY, CHERYL TSO, PARENT OF XAVIER V BEGAY	A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  A. C. J. S. J. Y.  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
<ul> <li>item 4 if Restricted Delivery Is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A Signature  X M Augent Addressee  rB. Received by Printed Name) C. Date of Delivery  Notification of the Signature Control of Delivery  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No  Service Type  Certified Mail Express Mail  Return Receipt for Merchandise
item 4 if Restricted Delivery Is desired.  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:  XAVIER V BEGAY, CHERYL TSO, PARENT OF XAVIER V BEGAY PO BOX 48	A Signature  X M Aur
item 4 if Restricted Delivery Is desired.  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:  XAVIER V BEGAY, CHERYL TSO, PARENT OF XAVIER V BEGAY PO BOX 48	A Signature  X M Aur

U.S. Postal Service CERTIFIED MAIL RECEIPT 1 1 1 1 1 1 1 1 MHF/ENCANA For delivery information **BLANCO WASH** <u>.</u> Postage Certified Fee 0007 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2760 YAZZIE, SHARON A 7006 PO BOX 1654 BLOOMFIELD, NM 87413

7 6233		MAIL <sub>TM</sub> REC nly; No Insurance C ation visit	
2760 0001 6377	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	\$ 338 476	CPostmark Hero
700 <b>6</b> 3	PO BOX 40	ICTORIA A 112 , NM 87420	

45 FORM 3800, August 2006

SENDER: TOP OF ENVELOPE TO THE FIGHT TOP OF ENVELOPE TO THE FIGHT	DIE HE HE DE COLLERY ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X Shariff (A. Huger Daddressee)  B. Received by (Printed Name)  C. Date of Delivery  A. VOLL A. A. Z. 2 9-15-14  D. Is delivery address different from item 1?   Yes
1. Article Addressed to: YAZZIE, SHARON A PO BOX 1654	If YES, enter delivery address below:
BLOOMFIEED, NM 87413	3. Service Type    Certified Mall   Express Mail   Registered   Return Receipt for Merchandise   Insured Mail   C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number: 11 11 7006 2760 (Transfer from service label)	0001:6327 6240
PS Form 3811, February 2004 Domestic Ref	turn Receipt 102595-02-M-1540
SENDER:  BANT GELLOO BY GTOA "SSENDOV NUM.  LIPSIN BHL OF SHOTANNE FOR JOHN BETTER  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  A. Received by (Printed Name)  A. Received by (Printed Name)  A. Received by (Printed Name)
or on the front if space permits.  1. Article Addressed to:  YAZZIE, VICTORIA A PO BOX 401-2: SHIPROCK NM 87420	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No  3. Service Type
1. Article Addressed to: YAZZIE, VICTORIA A PO BOX 401-2	3. Service Type  Certified Mail
YAZZIE, VICTORIA A PO BOX 401-2 SHIPROCK NM 87420	3. Service Type Cartified Mail  Express Mall Registered Return Receipt for Merchandise Insured Mall C.O.D.  4. Restricted Delivery? (Extra Fee) Yes
1. Article Addressed to: YAZZIE, VICTORIA A PO BOX 401-2	3. Service Type Cartified Mail  Express Mall Registered Return Receipt for Merchandise Insured Mall C.O.D.  4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service

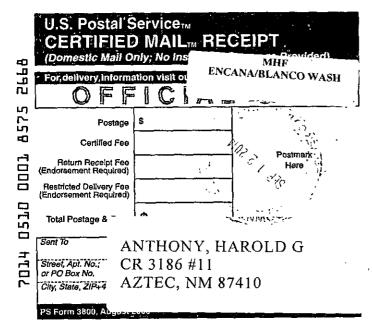
CERTIFIED MAIL

(Domestic Mail Only; No. 1997) MHF 2541 ENCANA/BLANCO WASH For delivery information v பு 57 Postage ₽ Certified Fee Postmark / 0001 Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 0510 Total Postage & Food C Sent To AGUILAR, NANCY 7014 Street, Apt. No.; or PO Box No. PO BOX 2626 RUIDOSO DOWNS, NM 88346 City, State, ZIP+4 PS Form 3800, A

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:  No
AGUILAR, NANCY PO BOX 2626	(a)
RUIDOSO DOWNS, NM-88346	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
5000 St. 1000 St. 100	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014	0510 0001 8575 2644
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-1540

<b>-</b> 7	CERTIFIED (Domestic Mail C	MAIL REC	DEIPT MHF
2651	For delivery inform	Ition visi ENCAN	A/BLANCO WASH
8575	Postage Certified Fee	\$	Sugar Sand
0007	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)		Postmark Here
0250	Total Postage & Fees		
7074	or PO Box No. 12	LLEN, NANC 16 W AZTEC ZTEC, NM 87	BLVD SP #3
	PS Form 3800, A		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete  Rem 4 if Restricted Delivery is desired.  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  X
1. Article Addressed to:	If YES, enter delivery address below:
	·
ALLEN, NANCY J	
1216 W AZTEC BLVD SP. #3 a l	
AZTEC, NM 87410	3. Service Type  /☐ Certified Mall ☐ Express Mail
	☐ Registered ☐ Return Receipt for Merchandis
	☐ insured Mall ☐ C.O.D.
:	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	0001 8575 2651
	urn Receipt 102595-02-M-19



5		D MAILTM REC	EIPT
267	For delivery informa	ation ENCANA/BI	LANCO WASH
	OFF		
575	Postage	\$	10 10 W CO
40	Certified Fee	}	11.4
0007	Return Receipt Fee (Endorsement Required)		PIOS Here
	Restricted Delivery Fee (Endorsement Required)	1	973
0270	Total Postage & Fees	\$	- Charles State of the State of
	Sent To	ANTONIO, EF	מום
7074	Street, Apt. No.; or PO Box No.	PO BOX 5593	
L~	City, State, ZIP+4	FARMINGTON	N, NM 87499
	PS Form 3800; Aug		

U.S. Postal Service™ CERTIFIED MAIL RECEIPT (Domestic Mail Only; No I ENCANA/BLANCO WASH For delivery information visit 먑 LN 52 Postage 40 Certified Fee Postmark Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 510 Total Postage & Fees \$ Sent To ANTONIO, SHIRLEY 7014 Street, Apt. No.; or PO Box No. PO BOX 1255 City, State, ZIP+4 KIRTLAND, NM 87417 PS Form 3800, A

ű	U.S. Postal S CERTIFIED (Domestic Mail O	MAILTH REC	EIPT
258	For delivery informa	tion y ENCANA/E	BLANCO WASH.
8575	Postage Certified Fee	\$	2Eb 1 5 5019
£000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	,	Postmark / Here
0270	Total Postage & Fee		
70ጌԿ	Street, Apt. No.; 27	RAGON, IRVE ROAD 5777 ARMINGTON,	

_SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent  D. Agent  Addressee  B. Received by ( Printed Name)  C. Date of Delivery
1. Article Addressed to:  ANTONIO, SHIRLEY PO BOX 1255 KIRTLAND, NM 87417	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No  3. Service Type
· · · · · - · · · · · · · · · · · · · ·	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)  PS Form 3811, February 2004  Domestic Ret  SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>ARAGON, IRVETA</li> <li>27 ROAD 5777</li> </ul>	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Liveta Hragellow  D. Is delivery address different from 17 (P) (es  If YES, enter delivery and 2014  2014
FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ; ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	0510 0001 8575 2682

Domestic Return Receipt

PS Form 3811, February 2004

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; N MHF ENCANA/BLANCO WASH For delivery Information vi 'n A 00305 135 Ľ 57 Postage Ф Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 0570 Total Postage & Fees 🔍 🕏 Sent To ARAIZA, IFAITA 7014 Street, Apt. No.; or PO Box No. 409 W RIDGEWOOD DR GARLAND, TX 75041-3022 City, State, ZIP+4 PS Form 3800, Au

2712	U.S. Postal S CERTIFIED (Domestic Mail O	MAILTM RECEIPT  MHF  ENCANA/BLANCO WASH  MAILTM RECEIPT  MHF  ENCANA/BLANCO WASH
8575	Postage Certified Fee	\$ 270%
1000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	Postmark Here
0570	Total Postage & Fees	
7014	Street, Apt. No.; or PO Box No.	ARMENTA, PAULINE PO BOX 1216 DURANGO, CO 81302
	PS Form 3800, Au	

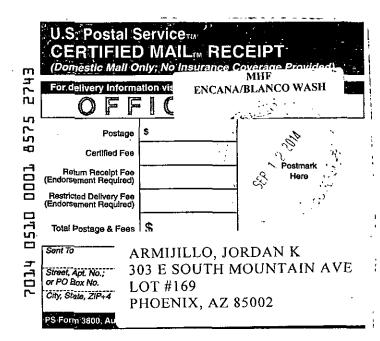
<u></u>	<u> </u>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print Your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?
Article Addressed to:	If YES, enter delivery address below:
ARAIZA, IFAITA 409 W RIDGEWOOD DR GARLAND, TX 75041-3022	3. Service Type
	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 0.	510 0001 8575 2705
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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.  ARMENTA, PAULINE PO BOX 1216	A. Signature  X A. Signature  X Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  C. Date of Delivery
DURANGO, CO 81302	3. Service Type  Certified Mail  Registered  Refurn Receipt for Merchandise  C.O.D.
O Added No.	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 0511	

. !	U.S. Postal Service  CERTIFIED MAIL  (Domestic Mail Only; No Insurance Coverage Provided)  MHF	
272	For delivery information vis ENCANA/BLANCO WASH	ı
	<u> UFFIL</u>	_
575	Postage \$	
<b>=</b> 0	Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	
	Restricted Delivery Fee (Endorsement Required)	
0570	Total Postage & Fees \$	
	Sent To The MARKET A CIE. A	
7014	Street, Apt. No.: or PO Box No. 1616 WEST GARFIELD	
7	City, State, ZIP+4 PHOENIX, AZ 87005	
	PS Form 3800, Au	

وال	U.S. Postal S CERTIFIED (Domestic Mail O	MAILTIN RECEIPT
73	For delivery informa	tion:visit ou ENCANA/BLANCO WASH
П	OFF	101
575	Postage	\$
40	Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	WOC Postmark Here
=	Restricted Delivery Fee (Endorsement Required)	
1510	Total Postage & F	e distinct
	Sent To A	RMIJO, MARCOS T
7014	Street, Apt. No.; Por PO Box No.	OST OFFICE BOX 373
۲~	City, State, ZIP+4 N	AGEEZI, NM 87037
	PS Form 3800, Au	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:         <ul> <li>ARMIJO, MARCOS T POST OFFICE BOX 373</li> </ul> </li> </ul>	A. Signature  X. Mayor Chaver
NAGEEZI, NM 87037	3. Service Type  ☐ Certifled Mall ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
) 	4. Restricted Delivery? (Extra Fee)
2. Article Number 701	.4 0510 0001 8575 2736
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540



50	(Domestic Mail O	MAILTM RECEIPT
<u></u>	For delivery informa	ENCANA/BLANCO WASH
ις	OFF	C
575	Postage	\$
ď	Certifled Fee	
0007	Return Receipt Fee (Endorsement Required)	Postmark VI G C   dHêre
	Restricted Delivery Fee (Endorsement Required)	
0.510	Total Postage & Face	•
	Sent To A	RMSTRONG, ROSE M
7034	Street, Apt. No.; P	O BOX 1715
Γ-	City, State, ZIP+4 B	LOOMFIELD, NM 87413
	PS Form 3800, Au	

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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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    Agent   Addressee
ARMSTRONG, ROSE M PO BOX 1715 BLOOMFIELD, NM 87413	If YES, enter delivery address below:
	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 05	
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

2767	U.S. Postal S CERTIFIED (Domestic Mail O	D. MAIL™ REC	MHF Sovidad
	l Vrc	. II (C	
575	Postage	\$	
=0	Certified Fee		AID L
0001	Return Receipt Fee (Endorsement Required)		Pln/Postmark Williams Here
	Restricted Delivery Fee (Endorsement Required)		•
0530	Total Postage & F	¢	There was the
	Sent To A	TCITTY, AN	NABELLE ·
7014	Street, Apt. No.; D	O BOX 1181	
7	OF FO DOX NO.		I NIN 6 07 400
•	City, State, ZiP+4 I	ARMINGTON	N, NM 87499
	per the company of the company		

<u>.</u>	U.S. Posta CERTIFIE (Domestic Mai	ED MAILTM REC	MHF
1277 <sup>4</sup>	For delivery info	rmation v ENCANA/I	BLANCO WASH
8575	Posta Certified F		Ploz Z Legat
0007	Return Receipt F (Endorsement Require Restricted Delivery F (Endorsement Require	ed)	Postmark Here
0230	Total Postage & Fa		re crepuesi
ንወጊ4	Street, Apt. No.; or PO Box No. City, State, ZIP+4	ATENCIO ESTAT EASTERN NAVA P 0 BOX 328 CROWNPOINT, 1	JO AGENCY
	PS Form 3800, Au		

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i	-
SENDER: COMPLETE THIS SECTION	- COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> ATCITTY, ANNABELLE	A. Signature  X
PO BOX 1181	
FARMINGTON, NM 87499	3. Service Type Certified Mail Registered Return Receipt for Merchandise
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 05	LD 0001 8575 2767
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  ATENCIO ESTATE, STEPHEN EASTERN NAVAJO AGENCY	A. Signature  X Justin Caudin   Agent   Addressee  B. Received by (Printed Name)   C. Date of Delivery  Lave Han Dawbon & 9   14   14  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:   No
P 0 BOX 328 CROWNPOINT, NM 87313	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 7014 05  (Transfer from service label)	10 0001 8575 2774
PS Form 3811, July 2013 Domestic Ret	urn Receipt .



SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  ATENCIO, CECIL PO BOX 522	A. Signature  X  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?
CANONCITO, NM 87026	3. Service Type  Gertified Mail® Priority Mail Express**  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 05 (Transfer from service label)	10 0001 8575 2781
PS Form 3811, July 2013 Domestic Re	turn Recelpt .**

<b>=</b> 0	U.S. Postal CERTIFIEI	D MAIL RE	CEIPT
5 279	For delivery inform	ation visit our EN	CANA/BLANCO WASH
857	Postage Certified Fee	\$	Not SIA DE
1000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee		Postmark Horo
0230	(Endorsement Required)  Total Postage & Fees	\$	10 to 20 to
7014	Street, Apt. No.; or PO Box No.	TENCIO, RO O BOX 443 EEGEEZI, NI	
	PS Form 3800, Au		!

	4	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVER	RY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  B. Received by (Printed Name)  C. AUM (COM WILL)  D. Is delivery address different from item 17	Agent Addressee Date of Delivery  My April
1. Article Addressed to: ATENCIO, ROBERT PO BOX 443	If YES, enter delivery address below:	□ No
NEEGEEZI, NM 87037	3. Service Type  Certified Mali	for Merchandise
	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label) 701.4	OS10 0001 8575 2798	·
PS Form 3811, February 2004 Domestic Ret	turn Receipt	102595-02-M-154

U.S. Postal Service... COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION CERTIFIED MAIL RECEIPT Complete items. 2, and 3. Also complete item 4 illnestricted Delivery is desired.
 Print your name and address on the reverse A. Signature (Domestic Mail Only; I ☐ Agent ☐ Addressee ENCANA/BLANCO WASH For delivery information so that we can return the card to you. C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. in D. Is delivery address different from item 1? Postage 40 1. Article Addressed to: If YES, enter delivery address below: ☐ No Certifled Fee Return Receipt Fee (Endorsement Required) ATENCIO, RUTH H 10) Restricted Delivery Fee (Endorsement Required) PO BOX 101 NAGÉÉZI, NM 87037 'n Service Type Total Postage & Fees \$ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise \_ Sent To ATENCIO, RUTH'H 707 ☐ Insured Mail ☐ Collect on Delivery Street, Apt. No.; **PO BOX 101** 4. Restricted Delivery? (Extra Fee) ☐ Yes or PO Box No. NAGEEZI, NM 87037 City, State, ZIP+4 2. Article Number 7,014 0510 0001 8571 1610 (Transfer from service (abel) PS Form 3800. A PS Form 3811, July 2013 Domestic Return Receipt U.S. Postal Service n. COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION OT. A. Signature ■ Complete items 1, 2, and 3. Also complete □ Agent item 4 if Restricted Delivery is desired. □ Addressee Print your name and address on the reverse so that we can return the card to you. C. Date of Delivery Attach this card to the back of the mailpiece,

ru eo	CERTIFIED MAILTM RECEIPT (Domestic Mail Only; N
ΞΉ	For delivery information vi
5	OFFIC
1,45	Postage \$ Certified Fee
	Certified Fee
0003	Return Receipt Fee (Endorsement Required)
	Restricted Delivery Fee (Endorsement Required)
263	(Endorsement Required)  Total Postage & Fees \$
7013	Street, Apt. No.: or PO Box No. City, States, ZiP+4  AUGUSTINE, ANITA M 2310 W APACHE SP#23  FARMINGTON, NM 87401

PS Form 3800, Au

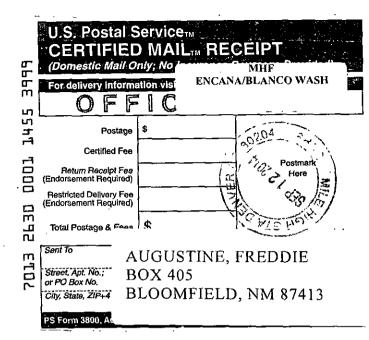
or on the front if space permits. D: Is delivery address differ Article Addressed to: □ No If YES, enter, delivery addre AUGUSTINE, ANITA M 2310 W APACHE SP#23 FARMINGTON, NM 87401 3. Service Type Certified Mail® ☐ Priority Mail Express™ ☐ Return Receipt for Merchandlse ☐ Registered Insured Mail Collect on Delivery Restricted Delivery? (Extra Fee) Yes 2. Article Number

(Transfer from service tabel)

7013 2630 0001 1455 3982

PS Form 3811, July 2013

Domestic Return Receipt



먑	U.S. Postal S CERTIFIED (Domestic Mail O	MAILTM REC	HF
401	For delivery information	ation ENCANA/BL	ANCO WASH
- -	OFF	<b>'</b> ]	
145	Postage	\$	
	Certified Fee		- 1.70
0007	Return Receipt Fee (Endorsement Required)		Postmark Here
	Restricted Delivery Fee (Endorsement Required)		
263	Total Postage & Fees	s	15 50 A
μ		JGUSTINE, JU	ANITA E HO
7013	Street, Apt. No.; PC	BOX 521	-
	City, State, ZIP+ CL	JBA, NM 87013	3
	PS Form 3800, 4		·

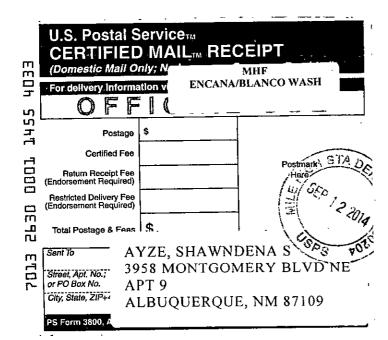
•	•
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverso that we can return the card to you.  ■ Attach this card to the back of the mailpie or on the front if space permits.  1. Article Addressed to:  AUGUSTINE, FREDDIE BOX 405.  BLOOMFIELD, NM 874	Agent  Agent  Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:  If YES, enter delivery Address below:  Augustic  Addressee  Addressee
2. Article Number	
(Transfer from service label)	7013 2630 0001 1455 3999
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also completem 4 if Restricted Delivery is desired.  Print your name and address on the revision so that we can return the card to you.  Attach this card to the back of the mails or on the front if space permits.  AUGUSTINE, JUANITA PO BOX 521	A. Signature  X Y Augent  Addressee  B. Received by (Printed Name)  D. Is delivery, address different from item 1? Yes  If YES, enter delivery address below:
CUBA, NM 87013	3. Service Type  □ Certifled Mail® □ Priority Mail Express™ □ Registered □ Return Receipt for Merchandlse □ Insured Mail □ Collect on Delivery  4. Restricted Delivery? (Extra Fee) □ Yes
Article Number     (Transfer from service label)	7017 7/70 0002
- mansier irum Service taben -	<u> </u>



■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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  A: Signature  A: Signature  A: Addressee  B. Received by (Printed Name)  C. Date of Delivery  CLANTA AYZE  D. Is delivery address different from item 1?  If YES, enter delivery address below:
AYZE, JUANITA PO BOX 1413. SFRUITLAND, NM 87416	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 701 (Transfer from service label)	3 2630 0001 1455 4019
PS Form 3811, July 2013 Domestic Ret	urn Receipt

CERTIFIED MAIL RECEIPT  (Domestic Mail Only MHF (d)	
For delivery information ENCANA/BLANCO WASH	1
Postage S Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees S	
Sincet, Apt. No.: or PO BOX 1413 City, State, ZiP+4 PS Form 3800; A  AYZE, RASHIDA G PO BOX 1413 FRUITLAND, NM 87416	

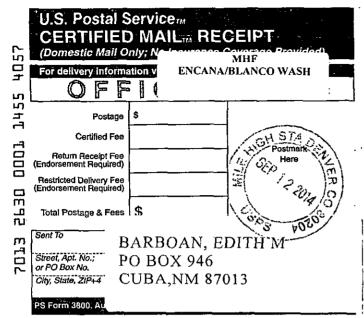
	——————————————————————————————————————
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  AYZE, RASHIDA G PO BOX 1413 FRUITLAND, NM 87416	A Signature  X
	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	13.2630 0001 1455 4026
PS Form 3811, July 2013 Domestic Ret	urn Receipt



	U.S. Postal S	Service™	
	CERTIFIED	MAIL <sub>IM</sub> RE	CEIPT
4040	(Domestic Mail C	nly; No l	MHF
⊒	For delivery informa	ation visit ENCA	NA/BLANCO WASH
L,	OFF	IC	
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	Certified Fee		Postmark
0007	Return Receipt Fee (Éndorsement Required)		Here
	Restricted Delivery Fee (Endorsement Required)		Ta sall
263	Total Postage &	<b>c</b> .	70700
m Sent To BARBE		ARBER, JOA	NNE T
707	Street, Apt. No.; 12	26 E MAIN	
<b>L</b> ~	or PO Box No. City, State, ZIP+4	ARMINGTO	N, NM 87401
	PS Form 3800, A		



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature
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.	B. Received by (Fritted Name)  C. Date of Delivery
1. Article Addressed to:	D. is delivery address different from item 1?   If YES, enter delivery address below:   No
BARBER, JOANNE T	2014
FARMINGTON, NM 87401	3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 701	3 2630 0001 1455 4040 /
PS Form 3811, July 2013 Domestic Ret	urn Receipt



SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.  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.	X Shirk Sabar Agent B. Beceived by (Printed Name) C. Date of Del C
1. Article Addressed to:  BARBOAN, EDITH M PO BOX 946	If YES, enter delivery address below:
CUBA, NMF87013	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchar ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number. (Transfer from service label)	7013 2630 0001 1455 4057
PS Form 3811, July 2013 Domestic	Return Receipt

4064	U.S. Postal Servi CERTIFIED M. (Domestic Mail Only; N	AILTM RECEIPT
무	For delivery information v	ENCANA/BLANCO WASH
		~
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145	Postage \$	
7		<del>-</del>
Н	Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	Postrilark
	Date of Barrers	Here
	Treatment Delivery Fee	197
2630		<u> </u>
4	Total Postage & Fees   \$	أسرون والمراجع المراجع
1	Sent To	•••
m	BECEN	ITI, DELENORE B
Street, Apt. No.; DO BOY 2004		
~	City, State, ZiP+ SHIPR	
	Only, State, 2174 STITE N	OCK, NM 87420
j	PS Form 3800,	1
•		

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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:  BECENTI, DELENORE B PO BOX:3004	A. Signature  A. Signature  A. Signature  Addressee  B. Redeived by (Printed Name)  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
SHIPROCK, NM 87420	3. Service Type  ☐ Certifled Mail* ☐ Priority Mall Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 701	
PS Form 3811, July 2013 Domestic Retr	urn Receipt

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; N MHF For delivery information vi ENCANA/BLANCO WASH FF LΩ Ŋ 7 Postage Certified Fee 0001 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2630 Total Postage & Food C Sent To BEGAY JR, ERNEST 7013 Street, Apt. No.; or PO Box No. PO BOX 5095 FARMINGTON, NM 87499 City, State, ZIP+-PS Form 3800, A

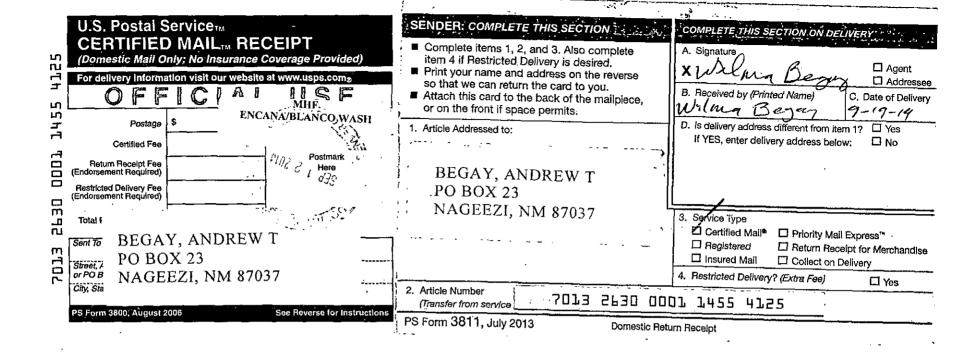
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  BEGAY JR, ERNEST PO BOX 5095	A. Signature Agent Addressee  B. Received by (Printe Name) C. Date of Delivery  D. Is delivery address different from Itamia Yes  If YES, enter delivery address below:  2014
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mall ☐ Priority Mail Express ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7013	2630 0001 1455 4071
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

	SENDER: COMPLETE THIS SECTION.	COMPLETE THIS SECTION ON DELIVERY
U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Ins For delivery information visit of OFFICE CANA/BLANCO WASH	SENDER: COMPLETE THIS SECTION  Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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. Signedure  Agent  Agent  Addressee  B. Preceived by (Printed Name)  C. Date of Delivery
Postage \$	Article Addressed to:	D. Is delivery address different from Item 1? Yes If YES, enter delivery address below:
Certified Fee		
Return Receipt Fee (Endorsement Required)	BEGAY, ALVINA	
Restricted Delivery Fee (Endorsement Required)	15310 SE STEVENSON DR	
Total Postage ?  BEGAY, ALVINA	VANCOUVER, WA 98683	3. Service Type  Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
Street Aut. No.: 15310 SE STEVENSON DR		4. Restricted Delivery? (Extra Fee)
City, State, ZiFr. VANCOUVER, WA 98683	2. Article Number   1	26301000110455 4088
PS Form 3800. A	PS Form 3811, July 2013 Domestic Ref	turn Recelpt

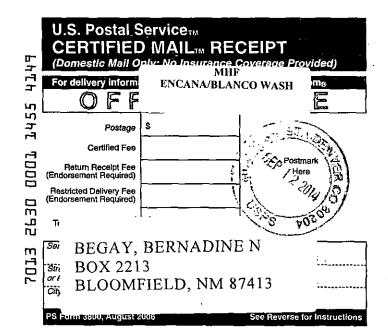
	U.S. Postal ServiceTM  CERTIFIED MAILTM RECEIPT  (Domestic Mail Only; No Insurance Coverage Provided)  MHF	SENDER: COM
55 4045	For delivery information visit o  OFFIC	item 4 if Resti
7 t	Postage \$ Certified Fee	Article Address
2013 2630 0001	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$  Sent To BEGAY, AMY L Sireet, Apt. No.: 3000 W RADCLIFF DR	BEGAY 3000 W ENGLE
<i>L</i> ~	City, State, 2174	2. Article Number (Transfer from s
	PS Form 3800, A	PS Form 3811,

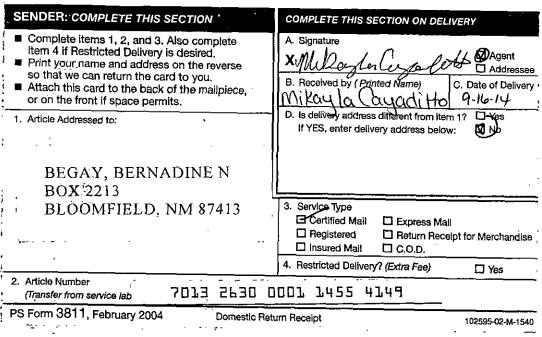
4101	U.S. Postal ServiceTM  CERTIFIED MAILTM RECEIPT  (Domestic Mail Only; No Insurance Coverage Provided)  MHF  For delivery information vi	
Ŋ		_
145	Postage \$ Ping	
	Certifled Fee Postmark	
1000	Return Receipt Fee (Endorsement Required)	
	Restricted Delivery Fee (Endorsement Required)	
2630	Total Postage & Fees   \$	
	BEGAY, ANDERSON N	
7013	Street, Apr. No.; 240 HWY 57 or PO Box No. BLOOMFIELD, NM 87413	
	PS Form 3800, A	_

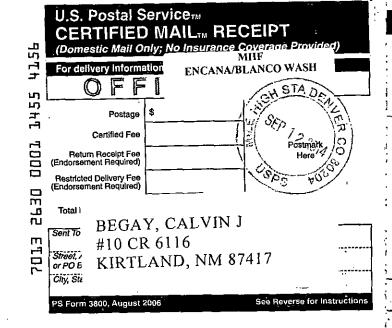
	to the late of the second second		e de la companya de		
PT <sup>·</sup>	SENDER: COMPLETE THIS SECTION	a Carana	COMPLETE THIS SEC	TION ON DELIVERY	Clade Barrier
Postmark Here	■ Complete items 1, 2, and 3. Also compitem 4 if Restricted Delivery is desired. ■ Print your name and address on the reso that we can return the card to you. ■ Attach this card to the back of the maior on the finitific sand to the back of the maior on the finitific sand to:  1. Article Addressed to:  BEGAY, AMY L 3000 W RADCLIFF DR	verse	Received by (Printer) D. Is delivery address of YES, enter delivery	different from item	☐ Agent ☐ Addressee ate of Delivery ☐ Yes ☐ No
F DR	ENGLEWOOD, CO 801	10	3. Service Type  Certified Mail  Registered  Insured Mail	☐ Priority Mail Expre ☐ Return Receipt fo	r Merchandise , y
O 80110			4. Restricted Delivery	r (Extra ree)	☐ Yes
	Article Number     (Transfer from service label)	2073	5730 0007	1455 4095	··
	PS Form 3811, July 2013	Domestic Retu	rn Receipt		`



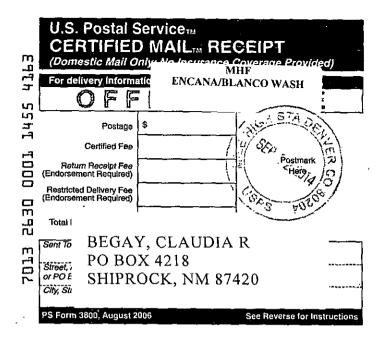
an Bu		D MAIL <sub>IM</sub> REC	Coverage Provid	ded)
7013 2630 0001 1455 413	Stree APT 515 City, GRAND	ANNIE I TARRANT RD PRAIRIE, TX	Postmar Here	WER CO.
	PS Form 3800, August :	2006	See Reverse for	nstructions





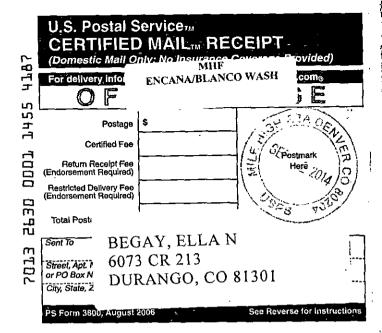


57.6	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X. Fuella Russel Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  P-/5-/4  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
BEGAY GALVIN J #10 CH 2716 KIRTLAND, NM 87417	3. Service Type  Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 4156
PS Form 3811, February 2004 Domestic Retu	orn Receipt 102595-02-M-1540



"U.S. Postal S CERTIFIED	Service:  MAIL  RECEIPT	
(Domestic Mail C	MHF ENCANA/BLANCO WASI	vided)
	ATTOM TO THE STATE OF THE STATE	ome
Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Pc	1/3/2	GH S / 2 OR C C C C C C C C C C C C C C C C C C
Street An DO BO	AY, CORDELIA F OX 3004 ROCK, NM 87420	rse for Instructions

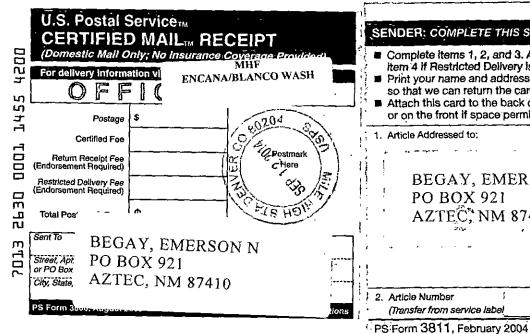
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
. Article Addressed to:	By is delivery address different from item 1?
BEGAY, CORDELIA F PO BOX 3004	Obuento
SHIPROCK, NM 87420	3. Service Type  Gertified Mail Registered Return Receipt for Merchandise C.O.D.
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 2	630 0001 1455 4170
S Form 3811, February 2004 Domestic F	Return Receipt 102595-02-M-1540

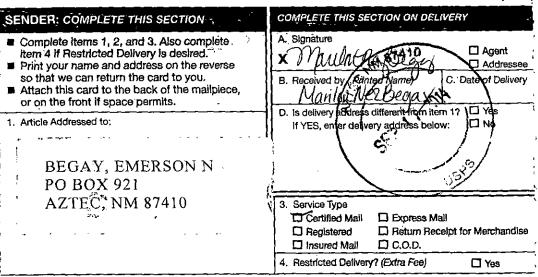


5 41.94		MAIL <sub>IM</sub> RECONSTRUCTION OF THE PROPERTY OF THE	MHF BLANCO WASH
2630 0001 145!	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Tota	\$	C Postmark Here
POLS ZE	Sent BEGAY	AND, NM 874	17

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul> BEGAY, ELLA N	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:
6073.CR 213 DURANGO, CO 81301	3. Service Type  -G-Certified Mail
2. Article Number (Transfer from service label) 7013 2530	0001 1455 4167
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540
	<u></u>

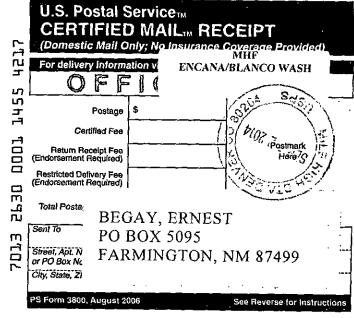
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X Fuela Russell Addresse  B. Received by (Printed Name)  C. Date of Deliver  TYPE A RUSSELL 9-15-14
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
BEGAY, ELRINA	
10 CR 6116	<u> </u>
KIRTLAND, NM 87417	3. Service Type
	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandis ☐ C.O.D.
•	
	4. Restricted Delivery? (Extra Fee)





7013 2630 0001 1455 4200

Domestic Return Receipt



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  BEGAY, ERNEST PO BOX 5095	A Signature  X
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service lab 7013 2630 0	JOO1 1455 4217
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

2. Article Number

(Transfer from service label



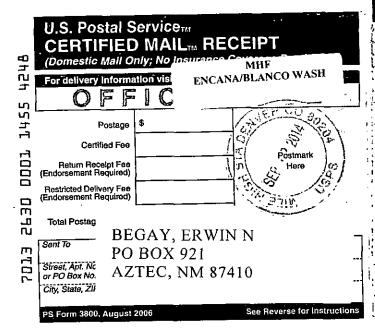
U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only: No Insurance Coverage Provided)
For delivery informatic ENCANA/BLANCO WASH
Postage \$
Certified Fee  Return Receipt Fee (Endorsement Required)  Composition of the Postmark Here 750
Restricted Delivery Fee (Endorsement Required)
Total  DECAY EDNIE
BEGAY, ERNIE 5860 TOWER RD APT 3 GREENDALE, WI 53129
Street, or PO. GREENDALE, WI 53129
PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Received by (Printed Name) N. Date of Delivery  D. Is delivery address timefent tradition 12. Yes
1. Article Addressed to: BEGAY, ERNESTINE PO BOX 5095	D. Is delivery address different from them 17 To Yes If YES, enter deliver address prow:
FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
·	4. Restricted Delivery? (Extra Fee) Yes
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY  A. Signature
item 4 if Restricted Delivery is desired.  Frint 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, of on the front if space permits.	B. Received by Printed Name) C. Date of Delivery  W. J. Yes
1." Article Addressed to:	D. (Is delivery address different from the full?
BEGAY, ERNIE 5860 TOWER RD APT 3	
GREENDALE, WI 53129	3. Service Type  ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D.
, <del>**</del> **	<del> </del>
2. Article Number	4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt

PS Form 3811, February 2004

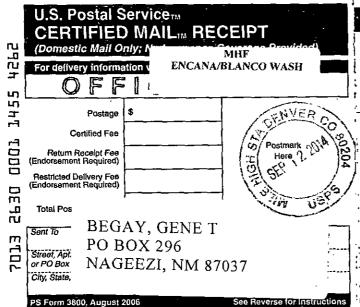
102595-02-M-154C

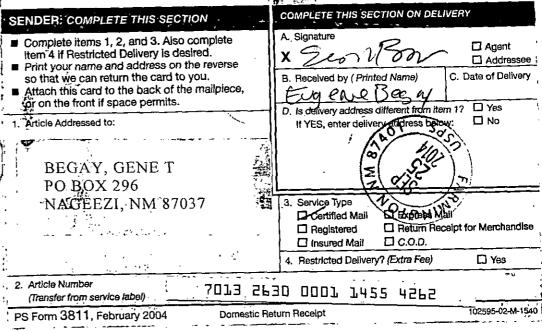


■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Received by (Print 1 Mills 2 C Pate of Delivery 1 Mills 2 C Pate of Deliv		
a Attach this card to the back of the mailpiece, or on the front if space permits.		
1. Article Addressed to:  D. Is delivery address different rom item 1?  If YES, enter delivery address below:  SEP 1 7 2014		
BEGAY, ERWIN N POBOX 921		
AZTEC, NM 87410  3. Service Type  Certified Mail  Registered  Insured Mail  C.O.D.	se	
4. Restricted Delivery? (Extra Fee)		
2. Article Number (Transfer from service labe: 701312630; 0001 1455 4248		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-15	540	

U.S. Postal Service <sub>TM</sub> CERTIFIED MAIL <sub>TM</sub> RECEIPT (Domestic Mail Only; No Insurance Course Provided)	
For delivery information v ENCANA/BLANCO WASH	4
DIFFIC	]
The Postage \$	i
Certified Fee	
Return Receipt Fee (Endorsement Required)	!
Restricted Delivery Fee (Endorsemer	
In Total Post BEGAY, EVA N	
ISout To POROX 921	7
Street, Apt. or PO Box h	-
PS Form 3800, August 2006 See Reverse for Instructions	

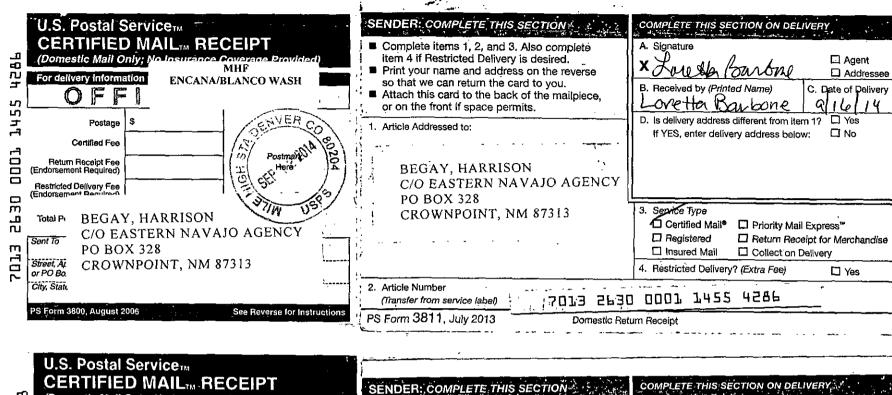
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  X. Manual Sey Agent  B. Received by (Printer Manual 10 C. Date of Delivery  Manual County Sey Agent  D. Is delivery access different from item 1?  Yes
BEGAY, EVA N PO BOX 921	If YES, enter delivery address below:
AZTEC, NM 87410	3. Seprice Type  Certified Mail  Express Mail  Registered  Return Receipt for Merchandise  C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service lat 7013 2630 0	001 1455 4255
PS Form 3811, February 2004 Domestic Ret	urn Recelpt 102595-02-M-1540
	• **





(Domestic Mail C	Service <sup>TM</sup> D MAILTM RECEIPT Only; Na Insurance Coverage Provided) MHT	
For delivery inform		
Postage	14/2	' ; \
Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	TE SEP Postmark Here	) : :
Total Pc  Ti Total Pc  Ti BEGA  M PO BO	AY, HAROLD N — OX 921 C, NM 87410	:
PS Form 3800, August 2	2006 See Reverse for manuactio	ns

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  BEGAY, HAROLD N PO BOX 921 AZTEC, NM 87410	A. Signature  X. Mulling Bland  B. Received by (Printed learner)  C. Date of Delivery  D. Is delivery address different from Item 17  Yes  If YES, enter delivery address below.  SEP 17  14  3. Service Type  Certified Mark  Priority Mail Express**  Registered  Restricted Delivery? (Extra Fee)  Yes
2. Article Number 7013 2630 [	Jool 1455 4279
PS Form 3811, July 2013 Domestic Retu	



1455 437B	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only: No Insurance Coverage Provide MHF For delivery informatio  Postage \$		A. Signature  X. A. Ade  B. Received by (Printed Name)  C. Date of D. Ade  C. Date of D. Ade  C. Date of D. Ade  D. Ade C.
430 0001	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Tota	1. Article Addressed to:  BEGAY, IRENE E	D. solivery address different from item 1? ☐ Yes enter the property address below: ☐ No
7013 2	BEGAY, IRENE E  Street 10 ROAD 5581  OF PO FARMINGTON, NM 87401	10 ROAD 5581 FARMINGTON, NM 87401	3. Service
	PS Form Savo, August 2006 See Reverse for Inc	ictions   2. Article Number 7013 2L30	0001 1455 4378

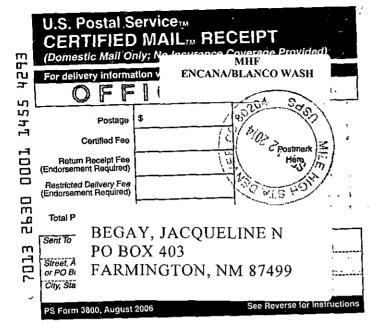
PS Form 3811, July 2013

☐ Agent ☐ Addressee C. Date of Delivery

☐ Yes

Priority Mail Express™ Return Receipt for Merchandise

Domestic Return Receipt

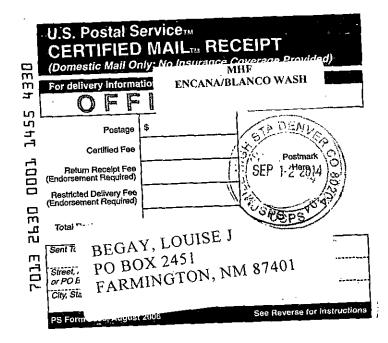


SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  ACGULIN ADDRESS  D. Is delivery address different form term 1? Yes
1. Article Addressed to:  BEGAY, JACQUELINE N PO BOX 403	If YES, enter delivery address below:
FARMINGTON, NM 87499	3. Septice Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from Service label	0001/11455  4293
PS/Form 3811, July 2013 Domestic Re	turn Receipt

U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information vi ENCANA/BLANCO WASH	
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Postage \$ 0,0204 8	_
Centitien tee l	'\
Return Receipt Fee (Endorsement Required)	<u> </u>
Restricted Delivery Fee (Endorsement Required)	1
Total Posti	
m Sent To PO BOX 1309	$\neg$
PO BOX 1309  CROWNPOINT, NM 87313	
City, State, Z	
PS Form 3800, August 2006 See Reverse for Instruction	ns .

SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  BEGAY, LEROY	A. Signature  X
PO BOX 1309 CROWNPOINT, NM 87313	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 2430 (Transfer from service label)	0001 1455 4309
PS Form 3811, July 2013 Domestic Ret	urn Receipt





4347	(Domestic Mail O	MAIL <sub>TM</sub> REC nly; No Insurance C ation v ENCANA	CEIPT Coverage Provided) MHF /BLANCO WASH	
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1455	Postage	\$	SAN DENVE	
	Certified Fee	,	3	ξ ;
נססנ	Return Receipt Fee (Endorsement Required)		Last were a word of the	) ;
	Restricted Delivery Fee (Endorsement Required)	\	18/	<i>l</i> .
263	Total Postage & Fees	\$	U3P8	
m	Street Apt.	AY, MARILY EAST MAIN		
•	City, State, FAR	MINGTON, F	OJVI O 1 40 1	ions
2630 0001 1455	Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees  Sent To  BEG  Street, Apt. or PO Box 1  City, State, FAR	s    s   AY, MARILY	Postmark Con SEP i field 14 00 00 00 00 00 00 00 00 00 00 00 00 00	ions

}	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A Signature Agent Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery addites different from item 1?
BEGAY, MARILYN	(± 16 )
126 EAST MAIN	2014
🗀 FARMINGTON, NM 87401 📑	3. Sevice Wes
, pred ( )	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 2L30 (Transfer from service label)	0001 1455 4347
PS Form 3811, July 2013 Domestic Retu	rn Receipt

U.S. Postal Service<sub>TM</sub> CERTIFIED MAIL RECEIPT
(Domestic Mall Only; No Insurance Coverage Provided)
MHF For delivery information visit of ENCANA/BLANCO WASH OFF 145! Postage Certified Fee 1000 SEPostmark 014 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 2630 Total Post BEGAY, MARVIN N Sent To 7013 **PO BOX 343** Street, Apt. or PO Box N NAGEEZI, NM 87037 City, State, PS Form 3800, August 2000

<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signeture  A. Signeture  A. Signeture  Addressee  B. Bleceived by (Printed Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery
1. Article Addressed to: BEGAY, MARVIN N PO BOX 343	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
, 1020111	
NAGEEZI, NM 87037	3. Service Type  Certified Mail  Registered  Insured Mail  Collect on Delivery  Restricted Delivery? (Extra Fee)
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
NAGEEZI, NM 87037	☐ Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
NAGEEZI, NM 87037	☐ Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
NAGEEZI, NM 87037  2. Article Number (Transfer from service label) 7013	☐ Certified Mall® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes

4367	(Domestic Mail O	MAIL <sub>TM</sub> REC	MHF	
	For delivery informa	RION VIS ENCANA	A/BLANCO WASH	,
2013 2630 0001 145 <u>5</u>	BO	GAY, MARY X 1048 UITLAND, N	ETTA	T CR CO SON
• .	City, State, Zif PS Form 3800, August		See Reverse for Instruction	ons

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:	A. Signature  X. Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  D. Is delivery address different from Rem 17 If YES, enter delivery address below:
BOX 1048 FRUITLAND, NM 87416	3. Septice Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 1 1 7013 263	0 0001 11455114361 1

Domestic Return Receipt

Article Number 1 1 1 1 (Transfer from service label)

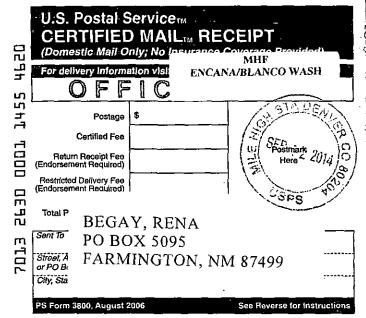
PS Form 3811, July 2013



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Multin Dec
1. Article Addressed to:  BEGAY, MARY LOU N PO BOX 921	If YES, enter delivery address below: No
AZTEC M 87410	3. Service Type  Certified Mail Priority Mall Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  Restricted Delivery? (Extra Fee)
2. Article Number 7033 2630 (Transfer from service label)	4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ ☐☐☐ ☐☐☐ ☐ ☐455 4385
PS Form 3811, July 2013 Domestic Reti	urn Receipt

급	U.S. Postal ServiceTIM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Incurance Chair and Provided)	¥.
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145	Postage \$ STA OFA	<u>.</u>
	Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	
	(Endorsement Required)	
26.30	Total Post	:
m	Sent To BEGAY, PAULINE W -	٦
703	Street, Apr.: PO BOX 218	
12	or PO Box N City, State, 2 NAGEEZI, NM 87037	
	PS Form 3800, August 2006 See Reverse for Instruction:	s !

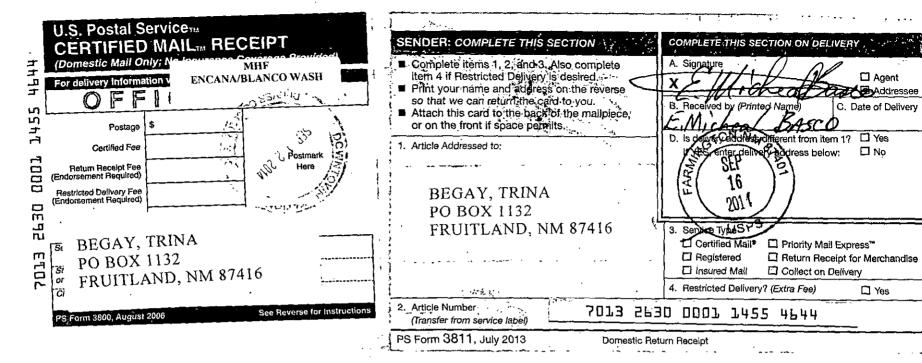
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  BEGAY, PAULINE W PO BOX 218	A. Signature  X. Marice Much   Agent   Addressee  B. Received by (Printed Name)   C. Date of Delivery  M. C. 17 u   W. 11 c   D   C   14  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:   No
NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ↑ ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 263	0 0001 1455 4392
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

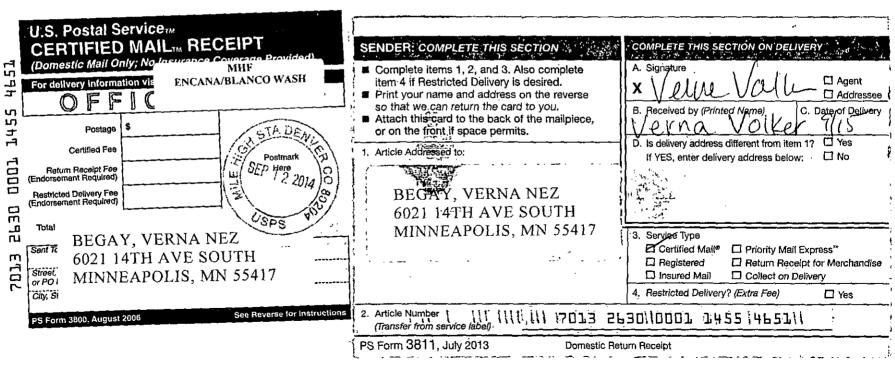


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Adgent  Addressee  B. Received by (Printed Nertis)  Addressee
Article Addressed to:	D. is delivery address different from 13m 1? Les If YES, enter delivery address below:
	2014
BEGAY, RENA PO BOX 5095	U.S.P.S.
FARMINGTON, NM 87499	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 2630   (Transfer from service label)	0001 1455 4620
PS Form 3811, July 2013 Domestic Re	turn Receipt
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U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage P	
For delivery information visit  OFFIC	
Postage \$ Certified Fee	1
Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee	60
E I	\$°/
BEGAY, RUTH N  Sire PO BOX 2213  BLOOMFIELD, NM 87413	
PS Form 3800, August 2006 See Reverse for Instruct	ons

ENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:	A. Signature  A. A. A. Signature  A. A. A. Signature  A. A. A. A. Signature  A. A. Signature  A. A. A. A. Signature  A. A. Signature  A. A. Signature  A. A. A. Signature  A. A. A. Signature  A. A. A. A. Signature  A. A. A. A. Signature  A. A. A. Signature  A. A
BEGAY, RUTH N PO BOX 2213 PLOOMETELD NM 87413	3. Service-Type
BLOOMFIELD, NM 87413	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes





☐ Agent

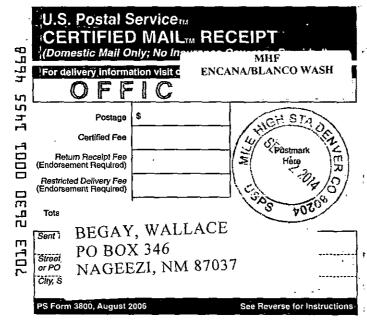
C. Date of Delivery

☐ Yes

☐ No

☐ Yes

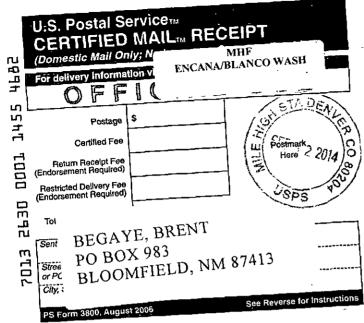
Addressee



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  XULLINITY MILLION GREAT  B. Received by (Printed Name)  C. Date of Delivery  WINGHOLD GO Y  P. Is delivery address different from item 1?  Yes
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
BEGAY, WALLACE PO BOX 346	
NAGEEZI, NM 87037	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 263	0 0001 1455 4668
PS Form 3811, July 2013 Domestic Ret	urn Receipt
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\_ <del></del>	MHF
For delivery information ENCANA/I	BLANCO WASH
Postage \$ Certified Fee   Cendorsement Required   Restricted Delivery Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)  To the strict of the stri	Postmark Here 2014 CO
PS Form 3800, August 2006	See Reverse for Instructions

Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  BEGAY, WILMA PO BOX 25	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
NAGEEZI, NM 87037	3. Service Type  Certified Mail® Priority Mail Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes



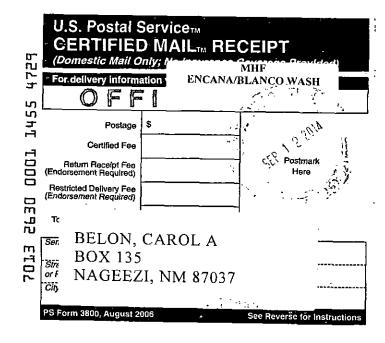
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	or PC	NGTON, NM	87499
L~	City, FARMI	NOTON, THE	**************************************
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	SENDER! COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
- 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X
	1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
<i>)</i>	BEGAYE, BRENT PO BOX 983	
\ \	BLOOMFIELD, NM 87413	3. Service-Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
1	1	4. Restricted Delivery? (Extra Fee) ☐ Yes
	2. Article Number 7013 243	0 0001 1455 4682
	PS Form 3811, July 2013 Domestic Ret	



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	City,		•			
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SENDER: COMPLETE THIS SECTION	N	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also concluded item 4 if Restricted Delivery is desirned.  Print your name and address on the so that we can return the card to you attach this card to the back of the form on the front if space permits.  1. Article Addressed to:  BELING HAZEL I PO BOX 2803	ed. + e reverse ou	A. Signature  D. Agent  B. Resolved by (Printe) Agrin  D. Is delivery address different from item 1?   If YES, enter delivery address below:  87.4
KIRTLAND, NM 8741	7	3. Service-Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	_	4. Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label)	7013 263	0 0001 1455 4712
PS Form 3811, July 2013	Domestic Reti	urn Receipt

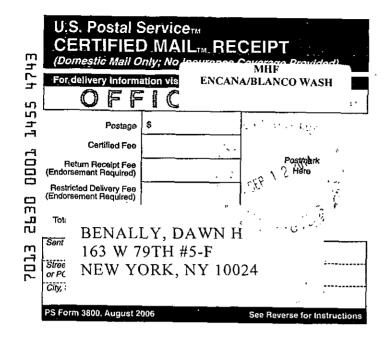


36	U.S. Postal Service <sub>TM</sub> CERTIFIED MAIL <sub>TM</sub> RECEIPT (Domestic Mail Only; No Insurance Coverage Prov.	ided)
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0001	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	k√. <u>C</u> Ĵ
30 0	Restricted Delivery Fee (Endorsement Required)	
263	Tot Tot	, r
_	Sent BENALLY, CAROLYN S	
13	****** #3 RD 6438, NBU 40	
701	or PC KIRTLAND, NM 87417	
	PS Form 3800, August 2006 - See Reverse for	<u>'</u>
	PS Form 3800, August 2006 See Reverse for I	nstructions

Means and the second se	li .
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X. Carol Bulor Addressee  B. Received by (Printed Name) C. Date of Delivery  Carol Belon 9-17-14  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No
BELON, CAROL A BOX 135 NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail <sup>3</sup> ☐ Priority Mail Express <sup>™</sup> ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 2630	0001 1455 4729
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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:  BENALLY, CAROLYN S #3 RD 6438, NBU 40	A. Signature  X. A. Olymbourge (Addressee)  B. Received by Printed Name (C. Date of Delivery)  C. O. M. D. Manually  D. Is delivery address different from item (B. No.)  If YES, enter delivery address below: P. No.
101000	
KIRTLAND, NM 87417	3. Service Type Certified Mail* Priority Mail Express** Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes

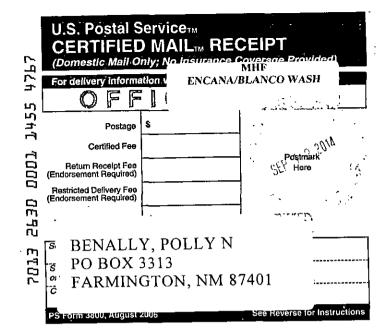
Domestic Return Receipt

PS Form 3811, July 2013



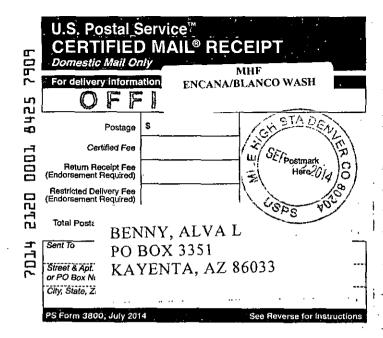
50		MAILT REC	overage Broylded)
5 47	For delivery informa		MHF LANCO WASH
7013 2630 0001 145	Postage  Certifled Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  BENALLY PO BOX 52	, NORA A	Postmark Here
17.	BLOOMFII	ELD, NM 874	13

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  BENALLY, NORA A PO BOX 526	A. Signature  X  B. Regeived by (Printed Name)  C. Date of Delivery  C. Date of Delivery  G. 17. IL.)  D. Is delivery address different from Item 17 Yes  If YES, enter delivery address below:
BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number,     {   {   {   Y   1   3     2   }   }	30,000,1455 4750
PS Form 3811, July 2013 Domestic Retu	urn Receipt



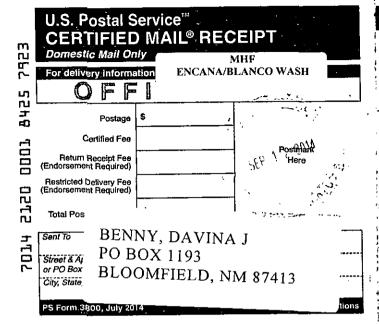
년 년	U.S. Postal S CERTIFIEL  Domestic Mail O	D MAIL® REC	EIPT
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7014		Y, RODGER ALON ST UN AZ 85205	
	PS Form 3800, July 20	14.	See Reverse for Instructions

· t	•	
SENDER: COMPLETE THIS SECTION	. COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Polly Benall Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery	
1. Article Addressed to:	D. Is delivery address different from item/lar Yes If YES, enter delivery address below:	
BENAELY, POLLY N PO BOX 3313	NINE SEP 2014 SEP	
FARMINGTON, NM 87401	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
<u>i</u>	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7013 2430	0001 1455 4767	
PS Form 3811, July 2013 Domestic Return Receipt		



25 7916	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only  For delivery information,  ENCANA/BLANCO WAS	
7 8	Postage \$	TA DEATH
2120 001	Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  T  BENNY ALVINA A	ark 2 2014
7014	PS Form 3800, July 2014  PS Form 3800, July 2014  PS Form 3800, July 2014  See Reverse to	

	<u> </u>
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X  A. Signature  X  Adjusted by (Partied Name)  D. Is delivery address different from item.1?  Yes  If YES, enter delivery address below: Yes
BENNY, ALVA L PO BOX 3351 KAYENTA, AZ 86033	3. Sepice Type ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2: Article Number (Transfer from service label) 7014 21	20 000 8425 7909
PS Form 3811, July 2013 Domestic Retu	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  BENNY, ALVINA A PO BOX 5033 MOHAVE VALLEY, AZ 86446	A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 12 □ Yes  If YES, enter delivery address below:  No  3. Sewice Type  □ Certified Mail® □ Priority Mail Express™
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
70 Autolo Murobar 7771 777	
2. Article Number 7014 212 (Transfer from service label)	0 0001 8425 7916
PS Form 3811, July 2013 Domestic Re	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1,2; and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X Darria Bo Agent  Addressee
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.	Received by (Brinted Name)  C. Date of Delivery  P. Is delivery address different from item 12  Yes
Article Addressed to:	D. is delivery address different from item 1?  If YES, enter delivery address below:
	_
BENNY, DAVINA J PO BOX 1193	
BLOOMFIELD, NM 87413	□ 3. Septide Type □ Certifled Mail* □ Priority Mail Express* □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number, 1 1 11 11 17 111 17 114 (Transfer from service label)	2120, 0001/6425 /7923
PS Form 3811, July 2013 Domestic R	eturn Receipt
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18.32	Was a second
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. S. Wh. De wy Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  F. (7 - 1 4)
Article Addressed to:	D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:  No
BENNY, ELVIN	
PO BOX 2726	2 Consisting
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise `☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes

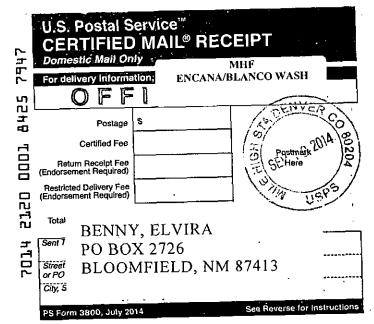
7014 2120 0001 8425 7930

Domestic Return Receipt

2. Article Number

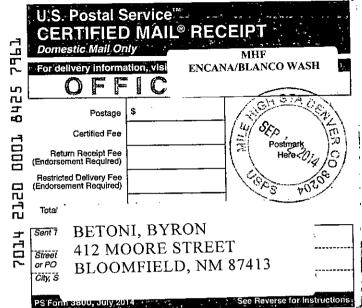
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PS Form 3811, July 2013

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X L Agent  Addressee  B. Received by (Printed Name)  ELVIRY  SEMM  9-17-14.
Article Addressed to:	D. is delivery address different from item 1? Yes  If YES, enter delivery address below:
BENNY, ELVIRA PO BOX 2726	
BLOOMFIELD, NM 87413	3. Septice Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (111117014 12120)	ווֹלְץְיףלְוֹפֹבאַם בנססם
PS Form 3811, July 2013 Domestic Retu	urn Receipt



■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  BETONI, BYRON 412 MOORE STREET	A. Signature  A. Signature  X  Agent  Addressee  B. Regeived by (Printed Name)  D. Is delivery address different from item 1?  If Yes  If YES, enter delivery address below:  No
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 17014,212[	0001 8425 7961
PS Form 3811, July 2013 Domestic Re	turn Receipt

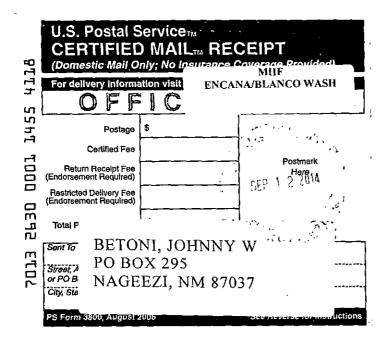
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A STATE OF THE STA	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete Items 1, 2, and 3. Also complete  item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  Agent  Addressee  Received by (Panted Name)  C. Date of Delivery  Addressee  Received by (Panted Name)  Agent  Addressee
1. Article Addressed to:  PO BOX 283	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
NAGEEZI, NM 87037	3. Sepuce Type   ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
•	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 21	20 0001 8425 7978
PS Form 3811, July 2013 Domestic Retu	urn Receipt



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23,20	Tot		VS VS
	rseni BETONI	, JOHN	
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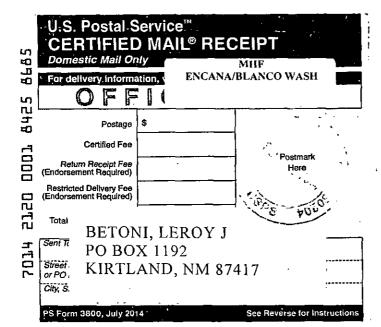
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Elin Boto Agent Addressee  B. Received by (Printed Name)  Elain Botoni  C. Date of Delivery  Oliving
1. Article Addressed to:  BETONI, JOHN PO BOX 134	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number 7014 212 (Transfer from service label)	4. Restricted Delivery? (Extra Fee)





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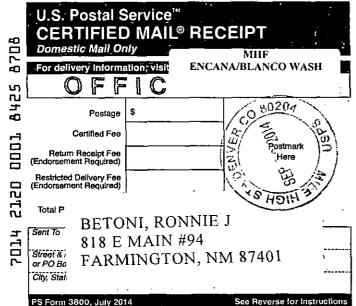
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Profed Name)  C. Date of Delivery  D. Is delivery address different from item 12  Yes
Article Addressed to:	☐ D. Is delivery address different from item 1? ☐ Yes ☐ If YES, enter delivery address below: ☐ No
BETONI, JUAN E PO BOX 38	
NAGEEZI, NM 87037	3. Septice Type  Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	2120 0001 8425 8678
PS Form 38.11, July 2013 Domestic	Return Receipt



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	PS Form 3800, July 2014	See Reverse for Instructions

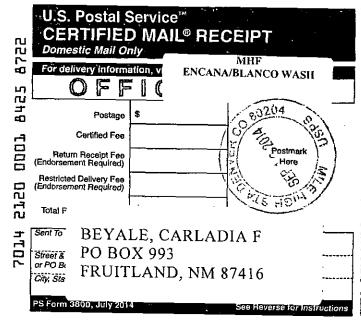
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SENDER: COMPLETE THIS SECTION : :	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  D. Agent D. Addressee  B. Received by (Printed Name) C. Date of Delivery  Lesoy Beton 1
1. Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:  If No
BETONI, LEROY J PO BOX 1192 KIRTLAND, NM 87417	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Recelpt for Merchandise
-	☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120	0001 8425 8685
PS Form 3811, July 2013 Domestic Retu	urn Receipt

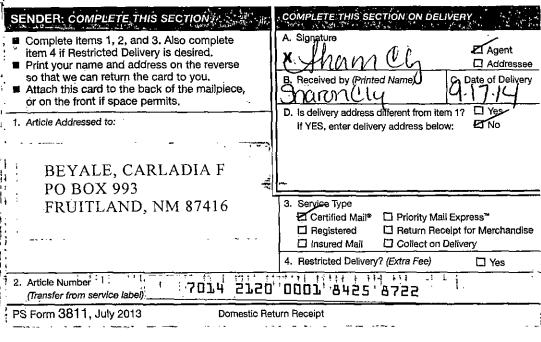
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<ul> <li>Complete items.1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>BETONI, RANDALL L</li> </ul>	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  Mayleke Belonie  C. Date of Delivery  G. 17-14  D. Is delivery address different from item 17  If YES, enter delivery address below:
14 ROAD 5150, NBU 1003 34 L BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 212 (Transfer from service label)	0 0001 8425 8692
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



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SENDER: COMPLETE THIS SECTION.  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY  A. Signature
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	X Cheric Belon Agent Addressee
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.	B. Received by (Printed Name) C. Date of Delivery  Cherice Beton: 9-15
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
BETONI, RONNIE J 818 E MAIN #94	(2) SEP 387401 2014
FARMINGTON, NM 87401	3. Service Type S PS  ☐ Certified Mail <sup>2</sup> ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
) †	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 212 (Transfer from service label)	0 0001 8425 8708
PS Form 3811, July 2013 Domestic Reti	urn Receipt





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7014	Street &	PO BO				
Γ~	or PO Bc City, Stat	FRUIT	LAND,	NM 8	7416	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	Signature X
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.	B. Received by (Printed Name)  C. Did of Delivery  LYNT (A D. P. C. Did of Delivery
Article Addressed to:	DI is delivery address different from ten 1?  Yes  If YES, enter delivery address below:
BEYALE, DURWIN I PO.BOX 982	9/17/14
FRUITLAND, NM 87416	3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
1	4. Restricted Delivery? (Extra Fee)
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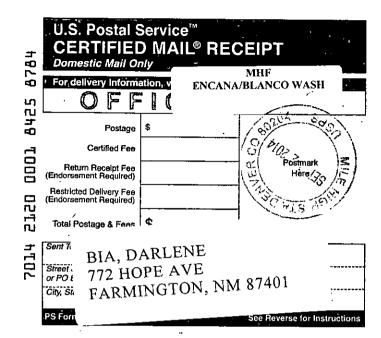
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) (1. Date of Delivery Lieu B. Harding (1.1)
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
BEYALE, IRENE PO BOX 1643	
FRUITLAND, NM 87416	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120 (Transfer from service label) PS Form 3811, July 2013 Domestic Ret	0001 8425 8746
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SENDER: COMPLETE THIS SECTION  Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	COMPLETE THIS SECTION ON DELIVERY  A Signature  A Agent  Addressee
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	X Signature  ☐ Agent ☐ Addressee  B. Received by (Printed Name)  C. Date of Delivery
<ul> <li>Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	X Signature ☐ Agent ☐ Addressee
Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  BEYALE, IRVIN R 27705 FWY 184	A Signature  X
Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  BEYALE, IRVIN R	Signature  X
Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  BEYALE, IRVIN R 27705 FWY 184	Signature  X
■ Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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:  BEYALE, IRVIN R 27705 FWY 184 DOLORES, CO 81323	Signature  X



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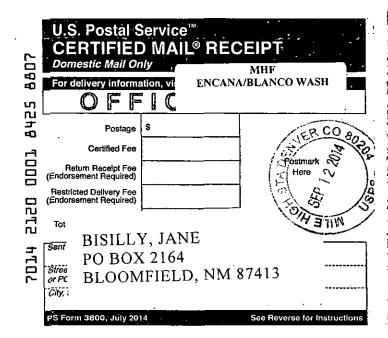
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
BEYALE, VALVEN D POST OFFICE BOX 3685 FARMINGTON, NM 87499	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No  3. Service type ☐ Certified Mail ☐ Right Mail Express™ ☐ Register ☐ Defurr Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number 7014, 21, (Transfer from service label)	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Ret	turn Receipt



8791	U.S. Postal S CERTIFIEI Domestic Mail O		
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⋳	Certified Fee	S/40> \	`\
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	Restricted Delivery Fee (Endorsement Required)		
2120	Total -	VIST.	•
<b>#</b>	Sent 7 BINALL	I, DOROTHY HARRISON	
7014	Street 2011 TR	OY KING RD	
~	TRIR 20	00	
	chy, si FARMII	NGTON, NM 87401	
	PS Form	See Heverse far Instru	ctions

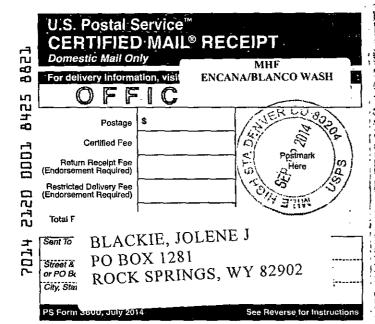
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
BINALLI, DOROTHY HARRISON 2011:TROY KING RD TRER 200 FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail ☐ Registered ☐ Return Receipt for Merchandise
	Unsured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 2	120 0001 8425 8791
PS Form 3811, July 2013 Domestic Ret	urn Receipt



9814	U.S. Postal CERTIFIE Domestic Mail C	D MAIL® RECEIPT	
9	. For delivery inform	MHF nation, v ENCANA/BLANCO WA	CTT
7.5	OF	E I ( CQ 80	<b>、</b>
4	Postage	, ' '(st	Ex
0007	Certified Fee Return Receipt Fee (Endorsement Required)	Postma	k SPS
2750	Restricted Delivery Fee (Endorsement Required)	(a) 33	The last
Ω	Total BLACE	KIE ESTATE, JOE	
	Sent To PO BO	X 68	
7014	0,,0.	EZI, NM 87037	
	City, Si	,	
İ	PS Form 3800, July 201	See Reverse for I	nstructions

SENDER COMPLETE THE SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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:  BISILLY, JANE PO BOX 2164	A. Signature  X. Janu Bitsuly Agent  B. Received by (Printed Name)  C. Date of Delivery  Janu Bissilly  D. Is delivery address different from item 1?  If YES, enter delivery address below:
BLOOM FELD, NM 87413	3. Septce Type  Certifled Mail
2. Article Number 7014 2121	3 0001 8425 8807
PS Form 3811, February 2004 Domestic Retu	ırn Receipt 102595-02-M-1540





25 8838	U.S. Postal Service <sup>TM</sup> CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visi  OFFIC	
B 4	Postage \$ Fee Score	2
1000 o	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	\ \
7014 2120	BLACKIE, LEONARD  SE C/0 JOLENE BLACKIE  SE 206 PLAINVIEW DR  Orl ROCK SPRINGS, WY 82901	
	PS Form 3800, July 2014 See Reverse for Ir	nstructions

· · · · · · · · · · · · · · · · · · ·	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name) C. Daniel Delivery  D. Is delivery address different from item V Yes
1. Article Addressed to:  BLACKIE, JOLENE J PO BOX 1281	If YES, enter delivery address below:
ROCK SPRINGS, WY 82902	3. Sepuce Type
.,	4. Restricted Delivery? (Extra Fee)
(Transfer Horit Service label)	2120 0001 8425 8821
PS Form 3811, February 2004 Domestic Ret	
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  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  X. A. Algent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Le delivery address different from item 1?
BLACKIE, LEONARD C/0 JOLENE BLACKIE	If YES, enter the livery address below: No
206 PLAINVIEW DR ROCK SPRINGS, WY 82901	3. Service-Type  1 Certified Mall

PS Form 3811, February 2004

Domestic Return Receipt

7.014

☐ Insured Mail

2120;0001 8425;8638

4. Restricted Delivery? (Extra Fee)

□ C.O.D.

102595-02-M-1540

☐ Yes



52	U.S. Postal Service™  CERTIFIED MAIL® RECEIPT  Domestic Mail Only  MHF
<b>6</b>	For delivery information, v ENCANA/BLANCO WASH
LΩ	
545	Postage \$
	Certified Fee Postpark
נטטט	(Endorsement Required)
	Restricted Delivery Fee (Endorsement Required)
23.20	ATIM S
	Sent BLACKIE, SAMUEL Street 201 MOUNTAIN VIEW DR Street 201 MOUNTAIN WY 82901
ን ቤት	Street 201 MOUNTAIN VID. ar PO. ROCK SPRINGS, WY 82901
	See Reverse for Instructions

<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>BLACKIE, LEROY</li> <li>PO BOX 2457</li> <li>KIRTLAND, NM 87417</li> </ul>	A Signature  X
2. Article Number 7014 2120 PS Form 3811, February 2004 Domestic Ret	Urn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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: BLACKIE, SAMUEL 201 MOUNTAIN VIEW DR ROCK SPRINGS, WY 82901	A. Signature  X. Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery  D. Learning address different from item 1?  C. Date of Delivery  D. Learning address delivery address below:  No  Registered Return Receipt for Merchandise  Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee)
2. Article Number	E-11-11-111-111-11-1-1-1-1
(Transfer from service label) 7014 2	120'0001'8425'8852

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY





9876	Domestic Mail O	D MAIL® RECEIPT	
70	For delivery Inform	ation, ENCANA/BLANCO WASH	
Ω 5	_ O F F	•   (	
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1000	Return Receipt Fee (Endorsement Required)	Postmark	
2750	Restricted Delivery Fee (Endorsement Required)		
디	Total Pos	MEH STA	
	I Sant To	EEYES, GLORIA A	:
7.	PO B	OX 2127	
7034	Street & Ap FRUI	TLAND, NM 87416	
	City, State,	•	i
İ	PS Form 3800, July 2014	See Reverse for Instru	ctions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items-1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>BLUEEYES, GLORIA A PO BOX 2127 FRUITLAND, NM 87416</li> </ul>	A. Signature  X. Jor Agent Addressee  B. Received by (Printed Name)  Corra Beyor  D. Is delivery address different from item 1?
2. Article Number 701	4 2120 0001 8425 8876

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only 7 MHF ENCANA/BLANCO WASH For delivery information **a**0 S N 40 Postage Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 27,20 Total F BLUEEYES, LYDIA H 1600 HARRISON ST 7074 Sent To BLOOMFIELD, NM 87413 Street & or PO Bc City, Stat See Reverse for Instructions PS Form 3000, July 2014

5 6906	U.S. Postal S CERTIFIED Domestic Mail On For delivery informs	MAIL® REC	EIPT MHF PLANCO WASH	
0001 842	Postage Certified Fee Return Receipt Fee (Endorsement Required)	\$	85)204 G Péstmark Here	sden.
7014 2120 [	BOX 14	CYES, SADIE 462 LAND, NM 8	7416	
	PS Form 3800, July 20	14	See Reverse for Ins	tructions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Kaydu Z. Blue B. Agent  B. Received by (Printed Name)  C. Date of Delivery  USINH Blue Fy 85  D. Is delivery address different from item 17  Ses
Article Addressed to:	If YES, enter delivery address below:
-	_
BLUEEYES, LYDIA H	
1600 HARRISON ST	<u> </u>
BLOOMFIELD, NM 87413	3. Sepvice Type
e e e e e e e e e e e e e e e e e e e	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014	120 0001 8425 8913
PS Form 3811, February 2004 Domestic Ref	turn Receipt 102595-02-M-1540
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And the second s	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature  X Several Burns Addressee  B. Received by (Printed Name)  C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery Sooul Swlly G. I.
Article Addressed to:	D. Is delivery address different from item 1? U yes  If YES, enter delivery address below: U No
BLUEEYES, SADIE BOX 1462	
FRUITLAND, NM 87416	3. Service Type Certified Mall Express Mail Registered Return Receipt for Merchandise
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number Transfer from service labi 7014 2120 (	3001 8452 890F

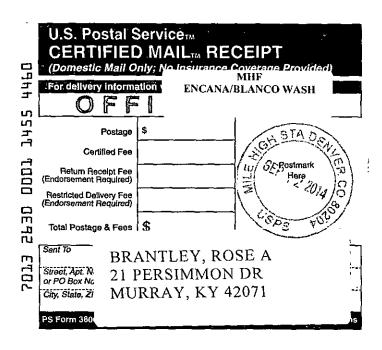
PS Form 3811, February 2004

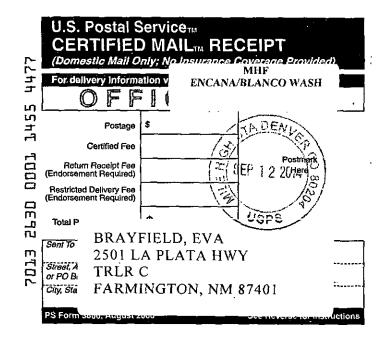


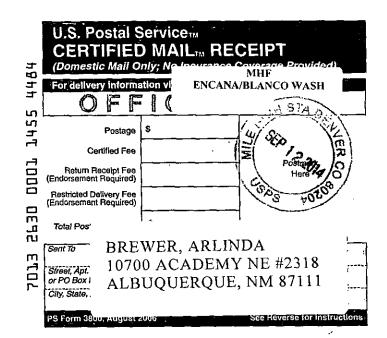
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■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  X. A. Algent  A. Algent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  9-18-14  D. Is delivery address different from Item 12. Yes
1. Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:  No
BOO, RUTH I PO BOX 156	
MONTEZUMA CREEK, UT 845	3. Service-Type  Certified Mail Priority Mall Express** Registered Receipt for Merchandise Insured Mail Collect on Delivery
*****	4. Restricted Delivery? (Extra Fee)
2. Article Number	30,0001 1452 4446
PS Form 3811, July 2013 Domestic Ret	urn Receipt

CERTIFIED MAILTH RECEIPT  (Domestic Mail Only; No Insurance Coverage Brovided)
For delivery information ENCANA/BLANCO WASH
Postage \$ GT STA DEN
Certified Fee ]
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
n Total Post
Sent To BUID, STEERER
m Sent to 2132 ALVARADO NE
Street, Apt. or PO Box A ALBUQUERQUE, NM 87110
PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>BOYD, SHERRY L</li> <li>2132 ALVARADO NE</li> </ul>	A. Signature  X
ALBUQUERQUE, NM 87110	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number 7013 263 (Transfer from service label)	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Ret	urn Receipt



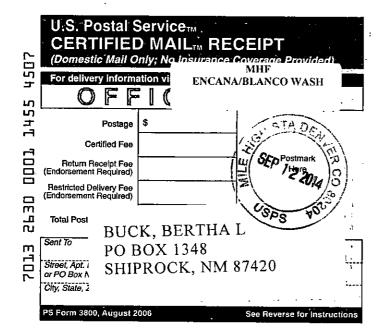






449l	U.S. Postal CERTIFIE (Domestic Mail For delivery infor	D MAILTM RECEIPT Only; No Control of the Provided Description of the Provided Descript	
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2630	Total Pr	0	٠
m	Sent To BRI	GHT, JESSIE	
701	Street, 2 5660	POST RD	
Γ-	City, Sti	STON, GA 30187	
,	PS Form 3800, Augus	uction	S

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
BRIGHT, JESSIE 5660 POST RD	
WINSTON, GA 30187	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 21	-30 0001 1455 4491 · ·
PS Form 3811, July 2013 Domestic Retu	um Receipt



4514	U.S. Postal Service MAILTM RECEIPT  (Domestic Mail Only; No Insurance Coverage Provided MHF)	
5	For delivery information v ENCANA/BLANCO WASH	
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	Restricted Delivery Fee (Endorsement Required)	(1°)
263	Total Posta	
	Sent To BURNS, CHRISTIAN	
m	POST OFFICE BOX 3893	
7073	Street, Apt. N or PO Box Ni FARMINGTON, NM 87499	
	City, State, Zı	- ;
	PS Form 3800, August 2006 See Reverse for Inst	ructions

••	i
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes ☐ Yes ☐ No
BUCK, BERTHA L PO BOX 1348 SHIPROCK, NM 87420	3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number 7013 263! (Transfer from service label)	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Ret	urn Receipt



SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature Agent
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.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delices different from item 1?
CANUTO ESTATE, ALICE J 5502 W COMMANCHE	
FARMINGTON, NM 87401	Service ype  Certified Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 4521
PS Form 3811, July 2013 Domestic Ret	urn Receipt

38		MAIL REC	CEIPT Coverage Provided
5 45	For delivery informs	ation visit ENCA	.NA/BLANCO WASH
7013 2630 0001 145!	Sent To 142	SUTO JR, STO YORK AVERMINGTON,	ESP 9 👸
	PS Form 3800, August 2	300	See Reverse for Instructions

		_
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  A. Signature  Adjust  Addresse	
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.	B. Received by (Printed Name) C. Date of Deliver	-
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No	_
CANUTO JR, STEVEN 1420, YORK AVE SP 9		1
FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandis ☐ Insured Mail ☐ Collect on Delivery	= e
	4. Restricted Delivery? (Extra Fee) ☐ Yes	;
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 4536	
PS Form 3811, July 2013 Domestic Retu	urn Receipt	<del>-</del> -

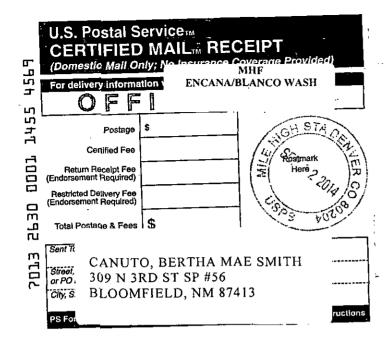


/ASH	<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature Addressee  B. Received by (Printed Name)  C. Date of Delivery  Q.17-14
OF WER CO	1. Article Addressed to:  CANUTO JR, WILBUR PO BOX 541 BLOOMFIELD, NM 87413	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:  3. Service Type  ☐ Certified Mail ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
		4. Restricted Delivery? (Extra Fee) ☐ Yes
· 1	2. Article Number ; 7013 2630 (Transfer from service labe)	0001 1455 4545
structions	PS Form 3811, July 2013 Domestic Re	turn Receipt

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52		Service <sup>™</sup> D MAIL™ RECEIPT Only: No Insurance Coverage Provided)	:
<b>4</b> 5	For delivery informa	ation ENCANA/BLANCO WASH	<u>.</u>
	OFF	<b>5 1</b>	l
1.45	Postage	\$ HIGH STA O	
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	Return Receipt Fee (Endorsement Required)	1 1 7/ 4525	1=1
30	Restricted Delivery Fee (Endorsement Required)	Tere 2	(8/
7 19	Total Postana & Fees	\$ 6000 7020	
m		JTO, ANGEL E	
701	Street, Ap. or PO Bo 105 T	EXAS SE	·
•	City, State ALBU	JQUERQUE, NM 87108	
	PS Form		tions

SENDER: COMPLETE THIS SECTION:	COMPLETE THIS SECTION ON DELIVERY.  A. Signature	
item 4 if Restricted Delivery is desired.  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.	Agent Addressee  Received by (Printed Name)  C. Date of Delivery	
1. Article Addressed to: CANUTO, ANGEL E 105 TEXAS SE	If YES, enter delivery address below:    The content of the c	
ALBUQUERQUE, NM 87108	3. Service Type  ☐ Certified Mail ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
4. Restricted Delivery? (Extra Fee)		
PS Form 3811, July 2013 Domestic Retu	ırn Receipt	



	U.S. Postal Service <sub>TM</sub> CERTIFIED MAIL <sub>TM</sub> RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
ן ב	For delivery informa	atlon vi ENCANA	/BLANCO WASH
,	OFF		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Sent to DOR	UTO, CALVII OX 1773 OMFIELD, N	i
	PS Form 3800, August :	2006	See Reverse for Instructions

<b>7</b>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  Agent  Addressee  B. Meceived by (Printed Name)  C. Date of Delivery  G-18-14
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes  'If YES, enter delivery address below:
CANUTO, BERTHA MAE SMITH 309 N.3RD ST SP #56	· 
BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
1	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 4569
PS Form 3811, July 2013 Domestic Rete	urn Receipt

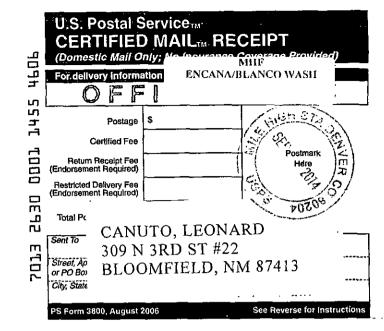
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•	;
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to: CANUTO, CURTIS	D. Is delivery address different from item 1? Yes  Yes enter delivery address below: No
126 EAST MAIN ST FARMINGTON, NM 87401	3. Service VPE o 3 ☐ Certified Melt ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 2630	0001 1455 4583
PS Form 3811, July 2013 Domestic Ret	urn Receipt

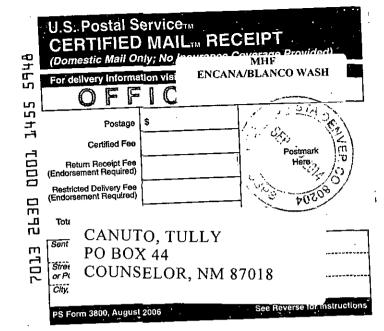
70		BerviceTM  D MAILTM RECEIPT  Oly: No Insurance Coverage Prov	ided)
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	Restricted Delivery Fee (Endorsement Required)		18/8/
2630	Total Postage & Fees	\$	1050g
	Sent To		
7013	Street, Canuto,	Julia Mae Sandoval	
분	OF POE 1420 YC	ORK AVE #9	;
	City, St. FARMII	NGTON, NM 87401	
	PS Forn		uctions

<del>(1)                                    </del>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Julia Sandval Agent Addressee  B. Regeived by (Printed Name)  C. Date of Delivery  9 -1 (-14)
1. Article Addressed to:  Canuto, Julia Mae Sandoval 1420 YORK AVE #9	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
FARMINGTON, NM 87401	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 2630 (Transfer from service label)	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



13		Service <sub>TM</sub> D.MAIL <sub>TM</sub> RECEIPT  nly; No Insurance Coverage Provided	
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145	Postage	s GIGH STA	
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د000	Return Receipt Fee (Endorsement Required)	Here	)
	Restricted Delivery Fee (Endorsement Required)	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	/
2630	Total P	90304	
		TO, MABEL C	
7013		X 3185	
<b>L</b> ~	or PO Bc City, Stat SHIPR	ROCK, NM 87420	
	PS Form 3000; August 2	out See Reverse for Instru	ictions

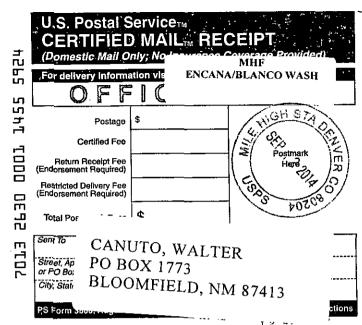
COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  CANUTO, LEONARD 30.9 N.3RD SiT.#22  BLOOMFIEED, NM 87413  CANUTO, LEONARD 30.9 N.3RD SiT.#22  BLOOMFIEED, NM 87413  CANUTO, LEONARD 30.9 N.3RD SiT.#22  BLOOMFIEED, NM 87413  Article Number (Transfer from service label)  SENDER: COMPLETE THIS SECTION  COMPLETE THIS SECTION ON DELIVERY  A Signature  COMPLETE THIS SECTION ON DELIVERY  A Signature  COMPLETE THIS SECTION ON DELIVERY  A Signature  A Sig		· · · · · · · · · · · · · · · · · · ·
3. Septic Type    Certified Mail*   Priority Mail Express*     Registered   Return Receipt for Merchandise     Insured Mail   Collect on Delivery     Restricted Delivery? (Extra Fee)   Yes     Yes     Article Number	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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  A Signature  A Agent  M Addressee  B. Received by (Printed Name)  C. Date of Delivery  Q-24-14  D. Is delivery address different from item 1?   Yes
Article Number (Transfer from service label)  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  CANUTO, MABEL C PO BOX 3185 SHIPROCK, NM-87,420  Service Type  Gertified Mail® Priority Mail Express*  Registered Return Receipt  3. Service Type  Gertified Mail® Priority Mail Express*  Registered Return Receipt  A. Signature  A. Signat	309 N 3RD ŞT #22	☐ Certified Mail® ☐ Priority Mail Express" ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  CANUTO, MABEL C PO BOX 31.85 SHIPROCK, NM-87.420  3. Service Type Certified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes  7013 2630 0001 1455 4613	Triansier from service labely	0:0001 2455 4606
D. Is delivery address different from item 1?	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature  A. Signature  Adjust  Addressee
2. Article Number  (Transfer from service label)	1. Article Addressed to:  CANUTO, MABEL C PO BOX 3185	11 3
(Transfer from service label)		☐ Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
	(Transfer from service label)	173 4613



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U.S. Postal Service

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4'if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Local Cost 10 Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Q - 17 - 14		
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No		
CANUTO, TULLY PO BOX 44			
COUNSELOR, NM 87018	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery		
:	4. Restricted Delivery? (Extra Fee) ☐ Yes		
SENDER: COMPLETE THIS SECTION  COMPLETE THIS SECTION ON DELIVERY  A. Signature  item 4 if Restricted Delivery is desired.			
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B, Received by (Printed Name)  C. Date of Delivery		
1. Article Addressed to:  CANUTO, VIRGIL 126 EAST MAIN	D. Is defined and the sufferent from item 1?		
FARMINGTON, NM 87401	3. Se ice Type P3  ☐ Certified Mail ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery		
O Addid Number	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 5931		
PS Form 3811, July 2013 Domestic Return Receipt			



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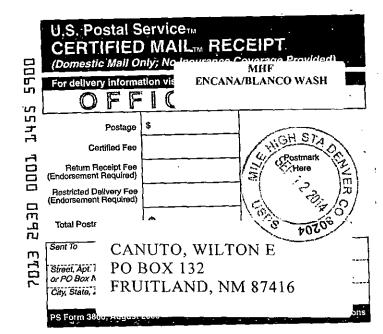
PS Form 3800, August 2006

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See Reverse for Instructions

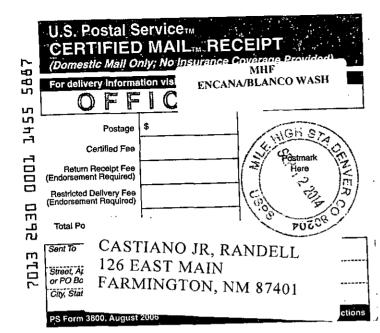
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  Will ARD CAN. UTO  C. Date of Delivery  G-17-1U
1, Article Addressed to:	D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
CANUTO, WILLARD	
PO BOX 541	3. Service Type
BLOOMFIELD, NM 87413	☐ Certified Mail® ☐ Priority Mail Express™
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 5917
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

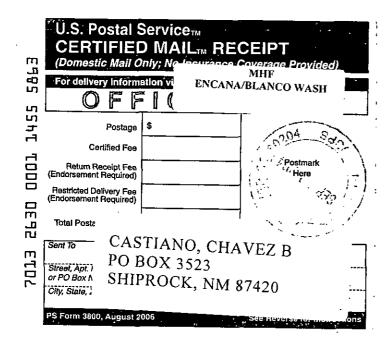


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7013 2630 0001 1455	5502	AUS, BERNICE P W COMANCHE MINGTON, NM 87401	
	PS Form 3800, August 2	906 See Reverse for Instruction	ns'

The second secon	*****
ENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:	A. Signature  X. M. M. M. Agent  B. Received by (Printed Name)  D. Is delivery address different from item 1?  O Yes  If YES, enter delivery address below:
CANUTO, WILTON E	
PO BOX 132 FRUITLAND, NM 87416	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
- <del>**</del>	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number, 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	10001 1455 5900
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. Agent  B. Received by (Printed Name)  A. Signature  C. Date of Delivery
CASAUS, BERNICE P 5502: W COMANCHE FARMINGTON, NM 87401	D. Is delivery address of ferent from item 1?
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 5894
PS Form 3811, July 2013 Domestic Retu	rn Receipt



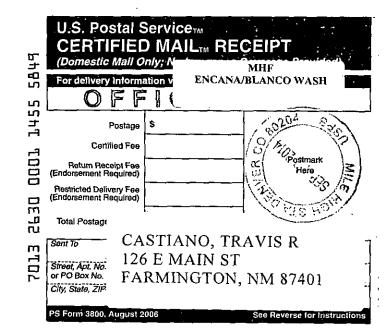
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Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.	A. Signature  A. Agent  Addressee
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:  CASTIANO JR, RANDELL	D. Is delivery address printed on from item 1?
126 EAST MAIN FARMINGTON, NM 87401	3. Service Tupe PS  ☐ Certified Mail ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 26	30 0001 1455 5887
PS Form 3811, July 2013 Domestic Re	sturn Receipt
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	¿COMPLETE THIS SECTION ON DELIVERY
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	Agent ☐ Addressee  B. Received by (Printed Name)  C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Marthaishr
Article Addressed to:	D. Is defined before solving the from item 1?  Yes  If (25) enter delivery address below:  No
CASTIANO, ALLISON	2014
126 E MAIN ST	3. Sepide Noe'S
FARMINGTON, NM 87401	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number	1 0001 1455 5870
PS Form 3811 July 2013	I'm Bosoint



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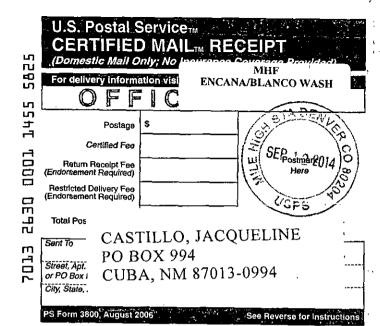
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A Signature  A Received by (Printed Name)  A Signature  Addressee  A Date of Delivery
1. Article Addressed to:  CASTIANO, CHAVEZ B PO BOX 3523.	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
SHIPROCK, NM 87420	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 26	30 0001 1455 5863
PS Form 3811, July 2013 Domestic Re	turn Receipt

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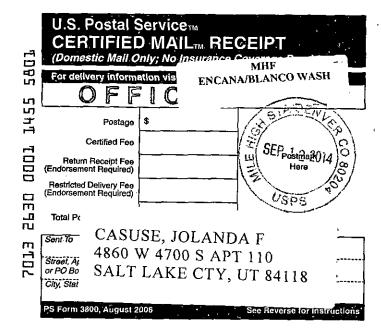
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~	or PO Box ! ALB	UQUERQUE,	NM 87112 .	
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· · · · · · · · · · · · · · · · · · ·	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	X Agent
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name)  C. Date of Delivery  D. Is pelive () abidiness different from Item 1?
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CASTIANO, TRAVIS R	(2 16 ) )
126 E MAIN ST [] FARMINGTON, NM 87401	3. Service Type P.  Z Certified Mail® Priority Mail Express*
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 2630 (Transfer from service label)	0001 1455 5849
PS Form 3811, July 2013 Domestic Retu	urn Receipt



1.6	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL THE RECEIPT
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	Restricted Delivery Fee (Endorsement Required)	USPS VO
2630		TILLO, SARAH S
m	Sent To PO B	OX 4894
<b>E107</b>		ASO, TX 79914
	PS Form 3800, August	See Reverse for Instructions.

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
item 4 if Restricted Delivery is desired.	1 Anent
Print your name and address on the reverse	X/huss ustto - Addressee
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
<ul> <li>Attach this card to the back of the mailpiece,</li> <li>or on the front if space permits.</li> </ul>	9-15-14
·	D. Is delivery address different from item 1? ☐ Yes
Article Addressed to:	If YES, enter delivery address below:   No
	· · · · · · · · · · · · · · · · · · ·
,	
CASTILLO, JAGQUELINE	
PO BOX 994	
CUBA, NM 87013-0994	3. Service Type
CODA, INM 67043-0334	☐ Certified Mail® ☐ Priority Mail Express™
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the second of th	☐ Insured Mail ☐ Collect on Delivery
· •	4. Restricted Delivery? (Extra Fee)
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SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.	A. Signature
SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature Agent
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature
SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery
SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mailplece, or on the front if space permits.	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Marrie)  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mailplece,	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery
SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mailplece, or on the front if space permits.	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S PO BOX 4894	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?   If YES, enter delivery address below:
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S PO BOX 4894	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?   If YES, enter delivery address below:  No  Service Type
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S PO BOX 4894	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?   If YES, enter delivery address below:  No  3. Service Type  Certified Mail® Priority Mail Express™
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S PO BOX 4894	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?   If YES, enter delivery address below:  No  3. Service Type  Certified Mail®  Registered  Registered  Return Receipt for Merchandise
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  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:  CASTILLO, SARAH S PO BOX 4894	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Pripted Marrie)  C. Date of Delivery  D. Is delivery address different from item 1?

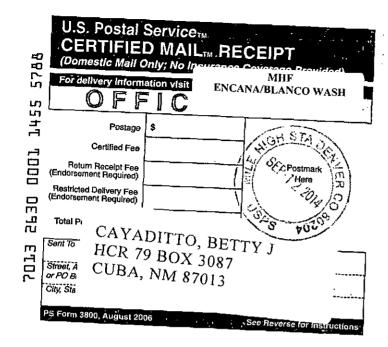


5-6	CERTIFIED MAILTM RECEIPT  (Domestic Mail Only; No Insurance Coverage Provided)
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ETOZ	Street, Apt. N. APT H
7	or PO Box No ST GEORGE, UT 84770
	PS Form 3800, August 2006 See Reverse for Instructions

ILS Poetal Carvica

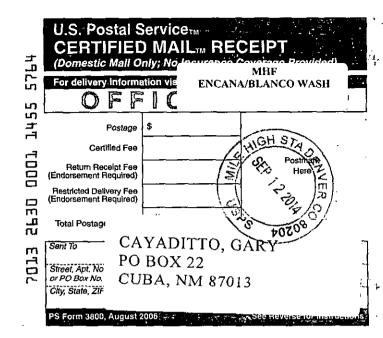


. **	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete litem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X MAN Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 12 Yes
Article Addressed to:	D. Is delivery address different from item 1? U Yes  If YES, enter delivery address below: U No
CASUSE, ROGER L 1676 WEST 1190 NORTH CIR APT H	Jean Simpson
ST GEORGE, UT 84770	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
•	4. Restricted Delivery? (Extra Fee) \[ \square \text{Yes} \]
2. Article Number	10 (0001) A.4(55) (579,5 ) (
PS Form 3811, July 2013 Domestic Re	turn Receipt



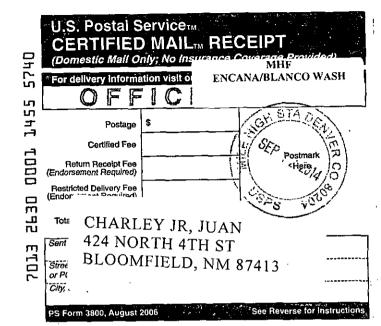
77,	U.S. Postal Service To CERTIFIED MAIL (Domestic Mail Only; No Institute of Company)	™ RECEIPT
r C	For delivery information visit of	ENCANA/BLANCO WASH
7		
- - - -	Postage \$	OF REMVER CO
1000		Postmark Heren 2014 80
26.30	Total Post:	- W. 1803
7013	CAYADITTO 1928 BUENA Street Apt. or PO Box t  ALBUQUER	A VISTA SE #C QUE, NM 87106
	City, State, . PS Form 3800, August 2006	See Reverse for Instructions

	· · · · · · · · · · · · · · · · · · ·
SENDER COMPLETE THIS SECTION 3.	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. A. A. A. A. A. A. A. A. A. A. A. A. A
. 1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
CAYADITTO, BETTY J HCR 79 BOX 3087	
CUBA, NM 87013	3. Sepide Type  Certified Mail® Priority Mail Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
, , , , , , , , , , , , , , , , , , , ,	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 (Transfer from service label)	2630 0001 1455 5788 ×
PS Form 3811, July 2013 Domestic	Return Receipt



57	(Domestic Mail O	MAIL <sub>TM</sub> REC	CEIPT Coverage Provided)	
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7013 2630 0001 145!	PO B	ADITTO, RIC OX 237 A, NM 87013		181
	PS Form 3800, August	2006	See Reverse for Instru	ctions

Agent Addressee  Addr
Agent  Cacal Jalul
ed by (Printed Name)  C. Date of Delivery  1/05 Tolso 9/15/14  ery address different from item 1?  Yes enter delivery address below:  No  Reppe  ified Mail*  Priority Mail Express** istered  Return Receipt for Merchandise
ed by (Printed Name)  C. Date of Delivery  9//5/14  ery address different from item 1?  Yes enter delivery address below:  No  Priority Mail Express** istered  Return Receipt for Merchandise
ery address different from item 1?  Yes enter delivery address below:  No  Pype iffed Mail®  Priority Mail Express™ istered  Return Receipt for Merchandise
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enter delivery address below: ☐ No  Type  ified Mail® ☐ Priority Mail Express™ istered ☐ Return Receipt for Merchandise
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	Restricted Delivery Fee (Endorsement Required)	\$ \$
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ГЦ	Sent To CHAF	RLIE, CORA L
щ	1496	E 8 N RD
7013	Street, Api or PO Box MON	TE VISTA, CO 81144
	City, State,	
	PS Form 3800, August 2	006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent  Addressee  B. Received by (Printed Name)  Character  Apple of Delivery
Article Addressed to:	D. Is delivery address different from item 1?
CHARLEY JR, JUAN 424 NORTH 4TH ST BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
· .	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7013, 25	30 0001 1455 5740
PS Form 3811, July 2013 Domestic Re	eturn Receipt

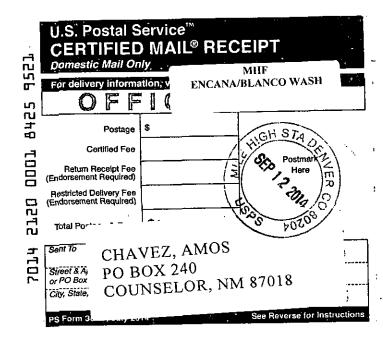
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  CHARLIE, CORA L 1496 E 8 N RD	A. Signature,  X. Manual Claudia Agent  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 17   Yes  If YES, enter delivery address below:
MONTE VISTA, CO 81144	3. Service Type TO Certified Mail* Priority Mail Express* Priority Mail Express* Registered Return Receipt for Merchandise Clinsured Mail Collect on Delivery A. Restricted Delivery? (Extra Fee) Priority Mail Express* The priority Mail Ex
(Transfer from service label) PS Form 3811, July 2013 Domestic Retu	



38	U.S. Postal S CERTIFIED Domestic Mail Of	D MAIL® RECEIPT
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	Restricted Delivery Fee (Endorsement Required)	
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<b>=</b>	Sent To	
7014	Street & A DODO	EZ, ALICE OX 23 CAN SPRINGS, NM 87320
	PS Form 3	See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X D. Grand Lamber Addressee  Received by (Printed Name)  C. Date of Delivery  9-18-19
, 1. Article Addressed to:	D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:
CHAVEZ JR, AMOS PO BOX 240 COUNSELOR, NM 87018	3. Service Type  Certified Mail Priority Mail Express™  Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery
701.4	4 Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label)	2120 0001 8425 9545
	oturn Receipt

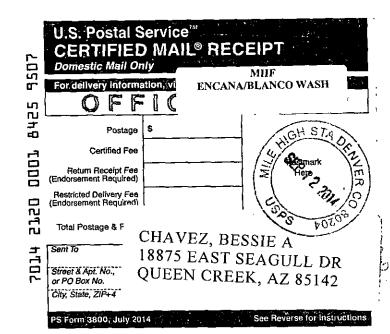
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	Restricted Delivery Fee (Endorsement Required)		
2120	Total Postage		
——— CILAVEZ ANDREW		1	
707	Street & Apt. No. of PO BOX 1512 BLOOMFIELD, NM 87413		
	PS Form 3800, July 2014 See Reverse for Instruct	tions	

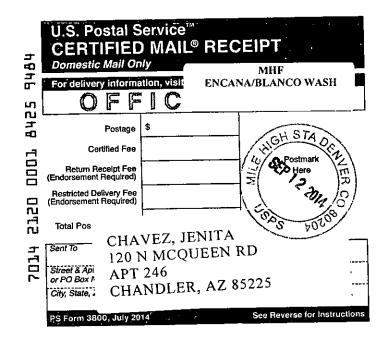
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:	A. Signature  X HOW Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:	
CHAVEZ, AMOS PO BOX 240 COUNSELOR, NM 87018	3. Service Type  Certified Mail® Priority Mall Express™  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes	
2. Article Number ? 114 (Transfer from service label)	2120 0001 8425 9521	
PS Form 3811, July 2013 Domestic Return Receipt		

ETHIS SECTION ON DELIVE	RΥ
	Agent Addressee Date of Delivery
y address different from field from temperature delivery address below:	No les
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d Delivery? (Extra Fee)	☐ Yes
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U.S. Postal Service CERTIFIED MAIL® RECEIPT		
무부무고	For delivery information ENCANA/BLANCO WASH	
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2750	(Endorsement Required) Total Postag	
7014	Sent To CHAVEZ, FANNIE R  Street & Apt. N 1119 JAMES CIRCLE or PO Box No. City, State, 2112  PS Form 3800, July 2014 N. See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A Signature A Signature Agent A Addressee	
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.	B. Received by (Printed Name) C. Date of Delivery	
Article Addressed to:	D. Is delivery addless different from item 1? Yes  If YES, enter delivery address below:	
CHAVEZ, BESSIE A 18875 EAST SEAGULE DR		
QUEEN CREEK, AZ 85142	3. Service Type	
QUEEN CREDIT,	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
Control of the Contro	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7014 2120 0001 8425 9507		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X  Addressee	
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.	B. Received by (Printed Name)  C. Date of Delivery  16-14	
Article Addressed to:     Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:	
CHAVEZ FANNIE D		
CHAVEZ, FANNIE R 1119 JAMES CIRCLE		
BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™	
روار موسرون کا دو کا کا کا کا کا کا کا کا کا کا کا کا کا	☐ Certified Mail* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	- Thought and the second	
	4. Restricted Delivery? (Extra Fee) ☐ Yes	



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<b>#</b> i	For delivery information, visi ENCANA/BLANCO WASH	
ഹ	7 450	
50 T L	Postage \$ Certified Fee	
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	Restricted Delivery Fee (Endorsement Required)	
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<b>±</b>	Sent To CHAVEZ, MARQUEZ A	.
7014	POST OFFICE BOX 373 Street & Apt or PO Box A NAGEEZI, NM 87037	
-ر1	or PO Box A NAGEEZI, NIVI 6 / 03 / Oily, State,	
	PS Form 3800, July 2014 See Reverse for Instruction	ons



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X MQLLV02 CLCv22
1. Article Addressed to:  CHAVEZ, MARQUEZ A	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
POST OFFICE BOX 373	
NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7014 2120 (Transfer from service label	0001 8425 9477
PS Form 3811, July 2013 . Domestic Retu	urn Receipt



153	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT  Domestic Mail Only  MHF	
£.	For delivery information, visit ENCANA/BLANCO WASH	
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- <del>-</del>	Postage \$ Certified Fee	
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0007	Return Receipt Fee (Endorsement Required)	
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<b>_</b>	CHAVEZ, NITA	٦
	PO BOX 1342	_
7014	Street & Api. N or PO Box No. BLOOMFIELD, NM 87413	
	City, State, ZIP	
	PS Form 3800, July 2014 See Reverse for Instruction	กธ

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. M.X.— Clary  B. Received by (Printed Name)  Vita Chavez  C. Date of Delivery  Photographics  Only
1. Article Addressed to:  CHAVEZ, NITA L  PO'BOX 1342	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mail* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120 (Transfer from service label)	0001 8425 9453
PS Form 3811, July 2013 Domestic Ret	urn Recelpt



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<b></b> -	Sent To CH	evarillo, i	ELUUISE
7	255	0 EAST 16TH	18-203
7014	Street & Apt. A or PO Box No. FA	RMINGTON,	NM 87401
	City, State, ZIF		
			3 40 40 -
	PS Form 3800, July 201	4	See Reverse for Instructions

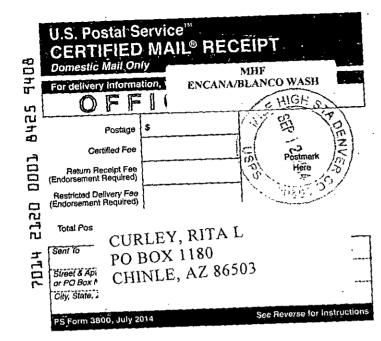
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date or Delication A CGAY 02 9-16-14  D. Is delivery address different from item 17 12 12 12 12 12 12 12 12 12 12 12 12 12
Article Addressed to:	If YES, enter delivery address below:
CHAVEZ, ROSIE A PO BOX 1512	
BLOOMFIELD, NM 87413	3. Service Type  Certified Mail* Priority Mail Express**  Registered Receipt for Merchandise  I insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)   Yes
2. Article Number 7014 212	0 0001 8425 9446
PS Form 3811, July 2013 Damestic Rei	turn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece.</li> </ul>	A. Signatule  Agent  L. Addressee  B. Received by (Printed Name)  C. Date of Delivery
or on the front if space permits.	Mauricanha eva:14
Article Addressed to:	D. is denvery address different from item 1? If Yes in Tes, entit palively entress below: If No A 2014
CHEVARILLO, ELOUISE	
2550 EAST 16TH 8-203	3. Service Type
FARMINGTON, NM 87401	Gentified Mail® Priority Mail Express®  ☐ Registered ☐ Return Receipt for Merchandise
•	☐ Insured Mail ☐ Collect on Delivery
2 Article Number 7014 2120	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X John P (ann concl. D) Agent D) Addressee  B. Received by (Printed Name) C. Date of Delivery  John P (congress) C-16-11
1. Article Addressed to:  COMANCHE, JOHN P 20 ROAD 7588	D. Is delivery address different from item 1?   If YES, enter delivery address below:   I No
BLOOMFIEED, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120 [	1001 8425 9422
PS Form 3811, July 2013 Domestic Ret	urn Receipt

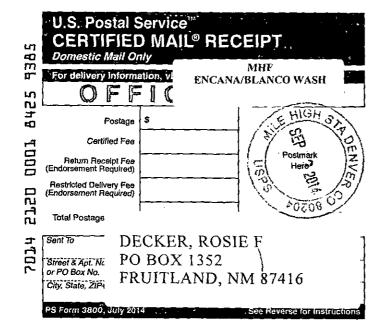
U.S. Postal Service"  CERTIFIED MAIL® RECEIPT  Domestic Mail Only  For delivery information, visit  ENCANA/BLANCO WAS	3,10
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or PO Box A CUBA, NM 87013	
PS Form 3800, July 2014 See Reverse for Ins	tructions

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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  X. Long Standard Agent  B. Received by (Printed Name)  C. Date of Delivery  C. Male Survey  C. Date of Delivery  D. Is delivery address different from item 1? Yes
COSTILLO, DORIS T HCR 79 BOX 3030	If YES, enter delivery address below: 디 No
CUBA, NM 87013	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 2120 (Transfer from service label)	0001 8425 9415!
PS Form 3811, July 2013 Domestic Retu	urn Receipt



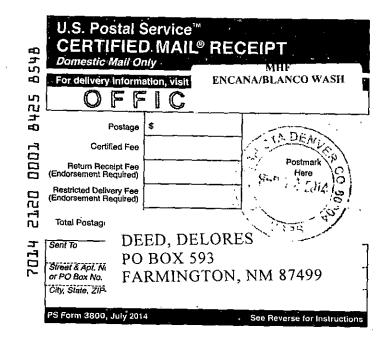
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	City, State, ZIP4	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signativre
Item 4 if Restricted Delivery is desired.	X License Addressee
■ Print your name and address on the reverse so that we can return the card to you.	B. Received by (Printed Name)   C. Date of Delivery .
Attach this card to the back of the mailpiece,	B. Hedelved by (riminal trains)
or on the front if space permits.	D. Is delivery address different from item 1?  Yes
Article Addressed to:	If YES, enter delivery address below:   No
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*	<b>{</b>
CURLEY, RITA L	·
PO BOX 1180	<u> </u>
CHINLE, AZ 86503	3. Service Type
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· · · · · · · · · · · · · · · · · · ·	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
7/11.u	• • • • • • • •
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 mailplece, or on the front if space permits.  Article Addressed to:  CURTIS, PHOEBE ANN PO BOX 1533	A. Signature  A. Signature  Cutty   Addressee  B. Regelved by (Printed Name)   C. Date of Delivery r  D. Is delivery address different from item ?  If YES, enter delivery address below:
KIRTLAND, NM 87417 🚗 '	3. Service Type
	☑ Certified Mall® ☐ Priority Mail Express™
	Registered Receipt for Merchandise .
	☐ Insured Mail ☐ Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (1997) (Transfer from service label)	20 0001 8425 9392
PS Form 3811, July 2013 Domestic Ref	turn Receipt



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	City, State, ZIP+		
	BC Favm 3800 July 20	14	See Reverse for Instructions

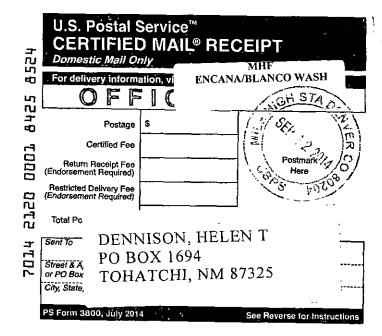
A STATE OF THE STA	AT 1 (4) を表現する。
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name)  Data of Delivery
Article Addressed to:	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No
and the same of th	
DECKER, ROSIE F PO BOX 1352	
FRUITLAND; NM 87416	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013  Domestic Reserved.  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	COMPLETE THIS SECTION ON DELIVERY.  A. Signature  X
DEED SIMPSON, NATHANIEL PO BOX 593	D. Is delivery address different from item (** ** ** ** ** ** ** ** ** ** ** ** **
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	0001.8425 8555



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,-a	Certified Fee	121
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	Restricted Delivery Fee	
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<b>-</b>	DEED, SAMUE	LL
7024	Sireel & Apt. I PO BOX 593	
7	or PO Box No. FARMINGTON.	, NM 87499
	PS Form 3800, July 2014	See Reverse for Instructions

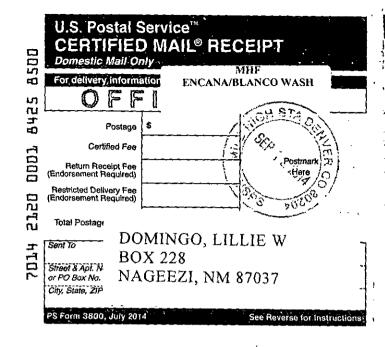
SENDER: COMPLETE THIS SECTION FOR	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee     B. Received by (Printed Native)   O N   S. Date of Delivery     Agent	Article Addressed to:	D. Is delivery address different from tem (A) Yes If YES, enter delivery address below:
DEED, DELORES PO BOX 593	2014 S.P.S.		
FARMINGTON, NM 87499	3. Service Type  Certified Mail Priority Mall Express"  Registered Return Receipt for Merchandise Insured Mail		
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee)		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	X		
Attach this card to the back of the mailpiece, or on the front if space permits.	Havon Sing & GLON		
Article Addressed to:	D. Is delivery address different from term 22 Yes If YES, enter delivery address below: No		
ا ا	2014		
-DEED, SAMUEL L PO BOX 593	2014 S		
	3. Service Type  Certified Mail® Priority Mail Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery		
PO BOX 593 FARMINGTON, NM 87499	3. Service Type  Certified Mail® Priority Mail Express**  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)		
PO BOX 593 FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery		

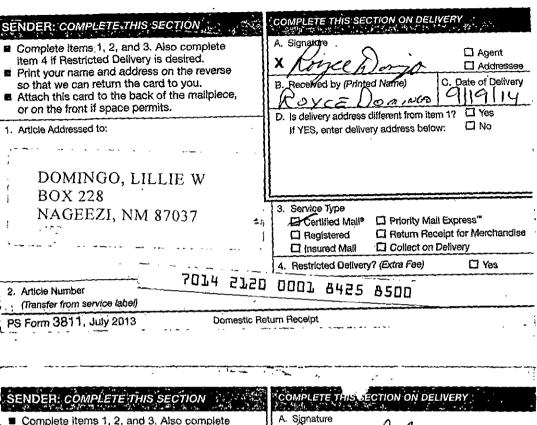




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7	DESHEUQUTTE, CYNTHIA
7034	Street & Apt. No., POROY 092
. –	or PO Box No. FRUITLAND, NM 87416
	PS Form 3800; J

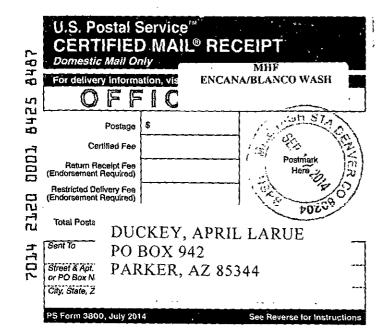
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  DENNISON, HELEN T PO BOX*1694 TOHATCHI, NM 87325	A. Signature  X
	☐ Certified Mail® ☐ Priority Mail Express™☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, July 2013 Domestic Re	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  DESHE QUTTE, CYNTHIA PO BOX 982	A. Signature  A. Signature  A. Signature  B. Received/by (Printed Name)  C. Date of Delbuggo  D. Is delivery address different from item for the printed signature of the p
FRUITLAÑD, NM 87416	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number 7014 [7014 ] (Transfer from service label) PS Form 3811, July 2013 Domestic Retu	4. Restricted Delivery? (Extra Fee)





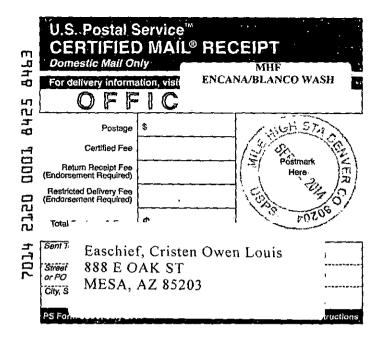
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l.		LLUP, NM 8	7305	
Ì	S Form 3800, July 2014	tree of signer of their	See Reverse for Inst	ructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. Use C. Barri Agent  Addressee  B. Becelved by (Printed Name)  C. Date of Delivery
1. Article Addressed to: DUBOISE, SUSIE PO BOX 1674	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No
GALLUP, NM 87305	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 2120	0001 8425 8494



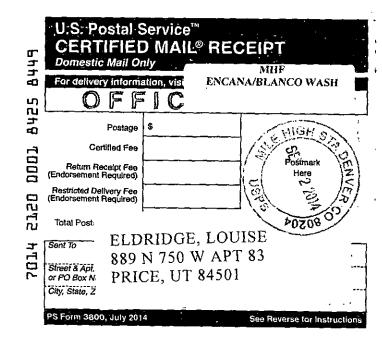
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	Restricted Delivery Fee (Endorsement Required)		
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7034	Sireal & Ab.	5 E OSBORN RD TTSDALE, AZ 85256	
	PS Form 3800; July 201	4 See Reverse for Instruc	tions :

SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mallpiece, or on the front if space permits.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  D. 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:	
DUCKEY, APRIL LARUE PO BOX 942 PARKER, AZ 85344	3. Service Type  Certified Mail® Priority Mail Express"  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes	
12. Article Number	2150 0001 9452 9482	
SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  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  X Auru Vau for a Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  G-15-14  D. Is delivery address different from Item 1? Yes  If YES, enter delivery address below:  No  EASCHIEF, AARON D  10005 E OSBORN RD		
SCOTTSDALE, AZ 85256	3. Servige Type  ☐ Certifled Mail* ☐ Priority Mall Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. 'Article Number		
PS Form 3811, July 2013 Domestic Ret		



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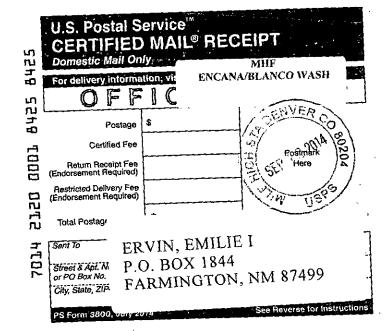
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SENDER COMPLETE THIS SECTION	COMPLETE, THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Manufay Educay
1. Article Addressed to:  EDWAY, STANLEY PO BOX 476	D. Is delivery address different from item 1?  If YES, enter delivery address below:  No
NAGEEZI, NM 87037	3. Service Type  Certified Mail Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 212	D 0001 8425 8456
PS Form 3811, July 2013 Domestic Retu	ım Receipt



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  X A CULL COLLEGE Addressee
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.	B. Received by (Printed Name) Date of Delivery
1. Article Addressed to:	D. Is delivery address different from them 1? \ \Bullet \text{Yes} \\ If YES, enter delivery address below: \ \Bullet \text{D} \text{No}
ELDRIDGE, LOUISE	LOUISE Eldridge
889 N 750 W APT 83	
PRICE, UT 84501	3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express®☐ Registered ☐ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery
1	4. Restricted Delivery? (Extra Fee)   Yes
2. Article Number (Transfer from service label)	20 0001 8425 8449
PS Form 3811, July 2013 Domestic Re	turn Receipt

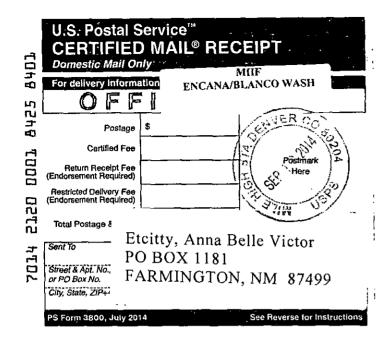
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ELDRIDGE, REBECCA P PO BOX 1493 BLOOMFIELD NM 87412	7
= 1225, 1414 6/413	],
City, State,	
PS Form 3800, July 2014 See Reverse for Instruction	ns

STICKER AT TOP	PLACE
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Hobeca J. L. Jacob D. Agent  B. Becelved by (Printed Name)  C. Date of Delivery  4.15.14
1. Article Addressed to:	D. Is delivery address different from item 1?
ELDRIDGE, REBECCA P PO BOX 1493	
BLOOMFIELD, NM 87413	3. Service Type  □ Certified Mail® □ Priority Mail Express™ □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
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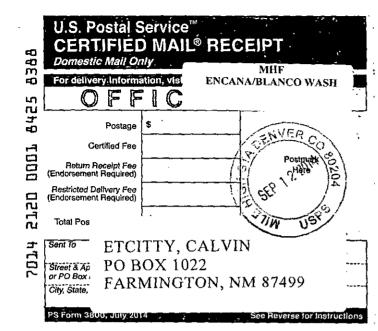
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	PS Form 3800, July 20	See Reverse for Instruc	tions

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  ERVIN, EMILIE I	A. Signature  A. Signature  A. Signature  Addressee  B. Reserved by (Printed Name)  C. Date of Delivery
P.O. BOX 1844 FARMINGTON, NM 87499	3. Service Troe  ☐ Certified Mell <sup>2</sup> Priority Mall Express <sup>™</sup> ☐ Registered U.S. Priority Mall Express <sup>™</sup> ☐ Registered U.S. Priority Mall Express <sup>™</sup> ☐ Insured Mall ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 2120	0001 8425 8425
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  ETCITTY, ADA	A Signature  A Signature  A Complete this Section on Delivery  Addressee  D. Received by Printed Name)  C. Date of Delivery  Q-16-14  D. Is delivery address different from item 1?  If YES, enter delivery address below:
PO BOX:191 BLOOMFIELD, NM 87413	3. Service Type  Gertified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
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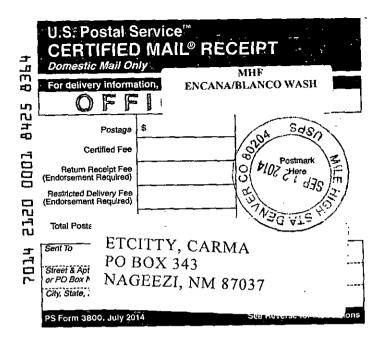
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X
1. Article Addressed to:  Etcitty, Anna Belle Victor PO BOX 1181	D. Is delivery address different from item 1? 口 Yes If YES, enter delivery address below: 区价
FARMINGTON, NM 87499	3. Service Type  Certified Mall*
2. Article Number (Transfer from service label); 7014 2120	1001 8452 84D1
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY  A. Signature
item 4 if Restricted Delivery is desired.  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.	B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?   Yes
1. Article Addressed to:  ETCITTY, ANNIE L  HC 79 BOX 46	If YES, enter delivery address below: No 4 (69 A E Rt 9 PMB 132 Cuba, NM 8 7013
CUBA, NM 87013	3. Service-Type  Certified Mail*
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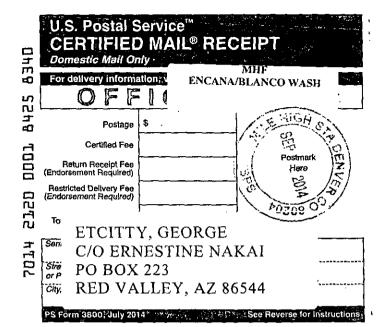
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SENDER: COMPLETE THIS SECTION:	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  A. Signature  Agent  Addressee
so that we can return the card to you.  Attach this card to the back of the mailplece, or on the front if space permits.	B. Boothed W. (Printed Name) C. Date of Delivery .
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PTOITTY CALVIN	2014
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FARMINGTON, NM 87499	3. Septice Type  ☐ Certified Mali® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
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2. Article Number (Transfer from service label) PS Form 3811, July 2013 Domestic Ref	014 5150 0001 8452 8388 -,
- And - And	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X.C. arma Ebatte
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
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ETCITTY, CAMIE PO BOX 343	<b>)</b>
NAGEEZI, NM 87037	3. Service Type
TVAGELZI, IVIVI 87037	☐ Certified Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
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· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)





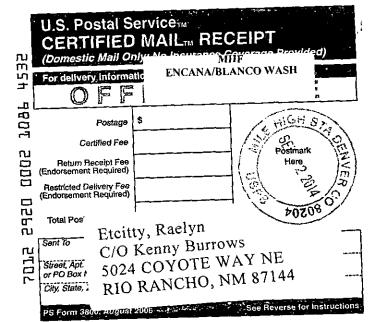
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Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  ETCITEY, COLLETTE PO BOX 1394	A. Signature  X. Active Morror Agent  Addressee  B. IReceived by Rrinted Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:
SHIPROCK, NM 87420	3. Service Type  ∠ Certified Mail* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
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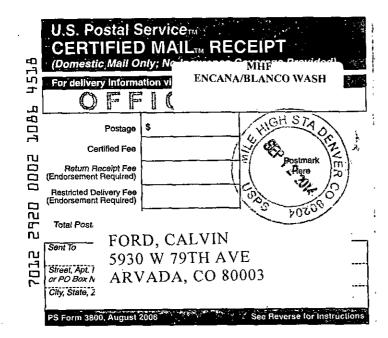
به مدار و	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  X. Lamax Nation   Agent Addressee
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery  C1 - 24 - 14
Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
ETCITTY, GEORGE C/O ERNESTINE NAKAI PO BOX 223	
RED VALLEY, AZ 86544	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 215 (Transfer from service label)	20 0001 8425 8340
PS Form 3811, July 2013 Domestic Ret	um Receipt
SENDER: COMPLETE THIS SECTION : 1	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	A. Signature  X. Manual Control Agent  B. Received by (Printed Name)  C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Maylene Horthy 9-16-19
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
ETCHTTA MADLENE	STON, NZ
ETCITTY, MARLENE PO BOX 5531	SEP 67
FARMINGTON, NM 87499	3. Septe Npe 2014 S Priority Mail Express*  Gregistered 5 P St Beturn Receipt for Merchandise
	☐ Insured Mall ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7012 2921 (Transfer from service label)	0002 1086 4549
PS Form 3811, July 2013 Domestic Ret	urn Receipt



SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
or on the front if space permits.  1. Article Addressed to:  Etcitty, Raelyn C/O Kenny Burrows	D. is delivery address different from item To These if YES, enter delivery address below.
5024 COYOTE WAY NE RIO RANCHO, NM 87144	3. Service-Type  Certified Mail® Priority Mall Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
(Transfer II OTT Service Tabel)	0002 1086 4532
PS Form 3811, July 2013 Domestic Re	turn Receipt

ம் (Domestic Mail O	MAÎL <sub>TM</sub> REC	MHF	,
For delivery informa	ation ENCANA/I	BLANCO WASH	
, OFF		<u> </u>	
Postage	\$	JAGH GE	
Certified Fee		13/02	
Return Receipt Fee (Endorsement Required)		Postmark Here	ZV
Restricted Delivery Fee (Endorsement Required)		1 3/	o/
Tu Total Pc		90204 S	
Etcitty	y-Stevenson, s	Samantha	
및 38m 75 42 RO	AD 5297		
Street, A FARM	IINGTON, NI	М 87335	
City, Sta PS Form 3800, August	2006	See Reverse or	tlons:

SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also camplete item 4 if Restricted Delivery is desired.  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:  Etcitty-Stevenson, Samantha 42 ROAD 5297	A. Signature  X. Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  L. L. L. L. L. L. L. L. L. L. L. L. L. L	
FARMINGTON, NM 87335	3. Service Type  Certifled Mail <sup>®</sup> Priority Mail Express    Registered  Receipt for Merchandise   Collect on Delivery	
2. Article Number	4. Restricted Delivery? (Extra Fee) Yes	
(Transfer from service tabet) 2920	0002 1086 4525	
PS Form 3811, July 2013 Domestic Return Receipt		



0.1	U.S. Postal Servi CERTIFIED MA Comestic Mail Only, N	ALL <sub>TM</sub> RECEIPT of Insurance Coverage Provided) MHF
4.5	For delivery information	ENCANA/BLANCO WASH
	OFFI	
1086	Postage \$	WIGH STA
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5000	Return Receipt Fee (Endorsement Required)	Postmark Here
	Restricted Delivery Fee (Endorsement Required)	80204
2920	Total Posts FORD, (	THRISTINE
пJ	Sept To	LE ROCK VILLAGE
7012	Street, Apr. N BUDD I	_AKE, NJ 07828
	City, State, Zi	See Reverse for Instructions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Para Agent  Addressee  B. Received by (Printed Name)  C Date of Delivery  C Date of Delivery
, 1. Article Addressed to:	D' is delivery address different from item 1?   Yes  If YES, enter delivery address below:   No
FORD, CALVIN	
1 5930 W 79TH AVE	
ARVADA, CO 80003	3. Service Type Certified Mall* Priority Mall Express** Registered Return Receipt for Merchandise I insured Mail
,	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	2 2720 0002 1086 4518
PS Form 3811, July 2013 Domestic Ret	urn Receipt
	· · · · · · · · · · · · · · · · · · ·

ARVADA, CO 80003	3. Sendee Type  ☐ Certifled Mall® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)		
PS Form 3811, July 2013 Domestic Retu	ırn Receipt	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired: 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: FORD, CHRISTINE 27 EAGLE ROCK VILLAGE	A. Signature  X  A. Signature  X  Addiessee  B. Received by (Printed Name)  C. L. of Delivery  D. is delivery address different from Jum 17  If YES, enter delivery address believ:	
BUDD LAKE, NJ 07828	3. Service Type  Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes	
2. Article Number (Transfer from service label) 17012 2720 0002 1085 4501 PS Form 3811, July 2013 Domestic Return Receipt		



448B	U.S. Postal Services CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Incurance Mile Provided)			
<u> </u>	For delivery informa	tion ENCANA/B	LANCO WASH	
	OFF			
1086	Postage	\$	CHON	
	Certifled Fee		HIGH STA	
0000	Return Receipt Fee (Endorsement Required)		Postmark Here	
	Restricted Delivery Fee (Endorsement Required)	ļ	1 3 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	
292	Total Pos FOR	D, ROXANA	E 600 +0208 C	
П	Sent To 5930	W 79TH AV	003-2516	
7012	or PO Box N .	ADA, CO 80		
	City, State, 2	zione :	See Reverse for Instructions	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	If YES, enter delivery address below:   No
FORD, COLLEEN 5930 W 79TH AVE ARVADA, CO 80003	3. Sepice Type  Certified Mail*  Registered  Recum Receipt for Merchandise  Collect on Delivery
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7012 2920 (Transfer from service label)	0002 1086 4495
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  FORD,-ROXANA E  5930 W 79TH AVE	If YES, enter delivery address below: ☐ No
ARVADA, CO 80003-2516	3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 11 11 11 11 11 17 12 292 (Transfer from service label)	0 0005 7096 6489
PS Form 3811, July 2013 Domestic Return Receipt	



0002 1086 4464	U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only: No Insurance Coverage Providest) For delivery information  Postage Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	/6 <sup>7</sup> /-
7012 2920	Total Posta FRANK, DARLENE	
	PS Form 3800, August 2006	

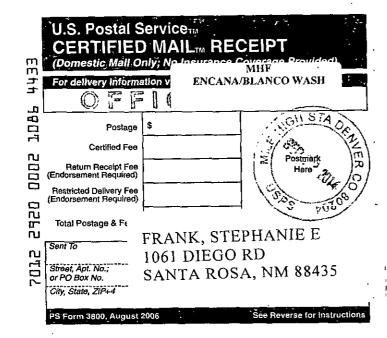
•	; -
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  RANK-JR, STEVEN PO BOX. 2015	A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Varne)  D. Is delivery address different from ftem 1?  If YES, enter delivery address below:  No
SHIPROCK, NM 87420	3. Sende Type  ☐ Certified Mall* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7012 2920	0002 1086 4471
PS Form 3811, July 2013 Domestic Retu	

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  FRANK, DARLENE PO BOX 1251	A. Signature  X
SHIPROCK, NM 87420	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7012 2920 0002 1086 4464	
PS Form 3811, July 2013 Domestic Retu	ırn Receipt
	······································



U.S. Postal Service  CERTIFIED MAIL  (Domestic Mail Only; No MHF  For delivery information vice ENCANA/BLANCO WASH  (Domestic Mail Only; No MHF  For delivery information vice ENCANA/BLANCO WASH	
Postage \$ Certified Fee   STADE   Return Receipt Fee   Endorsement Required   Restricted Delivery Fee   Endorsement Remark   Total Postage   ERANK   ERNEST   Total P	
PS Form 3800, August 2006  Sent To PO BOX 5435  FARMINGTON, NM 87499  PS Form 3800, August 2006  See Reverse for instruction	15:

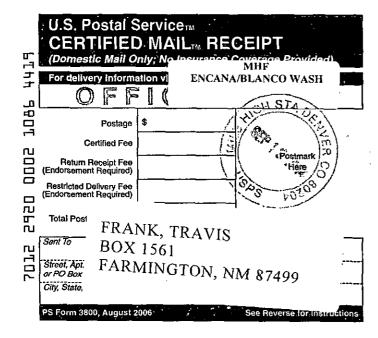
	The state of the s	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  FRANK, ERNEST PO BOX 5435	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 P. Addressee	
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number 7012 2920 0002 1086 4440 PS Form 3811, July 2013 Domestic Return Receipt		



	Physical Company of the Company of t
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item; ?   If YES, enter delivery accress below:  D No
FRANK, STEPHANIE E 1061 DIEGO RD SANTA POSA NIM 88425	SETABLE SETABL
SANTA ROSA, NM 88435	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7012 292[ (Transfer from service label)	0 0002 J086 4433
PS Form 3811, July 2013 Domestic Ret	urn Receipt
. ———	Annual of the state of the species of the state of the st

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)			
For delivery information	ation ENCANA/	BLANCO WASH	* *
	* <u>}</u>		
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(Endorsement Required)		(100 50)	[6] [6]
Tul I Total Post	'	The same of the same	ios)
FRA	NK, SUSAN I	M	<del></del>
131 POB	3OX 1551		
or PO Box FAR	MINGTON, N	M 87499	
PS Form 3800, August 2	006		lions

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mailplece, or on the front if space permits.  Article Addressed to:  FRANK, SUSAN M  PO BOX 1551  FARMINGTON, NM 87499	A. Signature  X
TARMINGTON, NM 87499	3. Service Type  ☐ Certified Mall® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7012 2920	0005 7086 4456
PS Form 3811, July 2013 Domestic Retu	ırn Recelpt



H H D 2	U.S. Postal ( CERTIFIE) (Domestic Mail C	D MAIL RE	CEIPT
۰	For delivery inform	ation vi ENCANA	/BLANCO WASH
2920 0002 108	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Pot	\$	Postingrik Here
7012	Street Ant POB	NK, TRISHA OX 1561 MINGTON, N	M 87499

	· · · · · · · · · · · · · · · · · · ·	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  FRANK, TRAVIS BOX 1561 FARMINGTON, NM 87499	A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Princo-Marne)  C. Date of Delivery  D. Is delivery address different from item 1?   Yes  If YES, affer delivery address   below:   No  No  2014  3. Service Type  Certified Mail®  Priority Mail Express**	
· · · · · · · · · · · · · · · · · · ·	Registered Return Receipt for Merchandise	
)	☐ Insured Mail ☐ Collect on Delivery	
· .	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label) 7012 2920 0002 1085 4419 PS Form 3811, July 2013 Domestic Return Receipt		
وهای الفاقه است. ۱۹ همانه و با شامه و توسط است. از است و استانه به و با با با با با با با با با با با با با		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY  A. Signature	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece,</li> </ul>	B. Becelved by (Printed Name)  C. Date of Delivery	
or on the front if space permits.	D. Is delivery address different from item 1? Yes	
1. Article Addressed to:  FRANK, TRISHA PO BOX 1561	If YES affer delivery address below: □ No    No     No	
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7012 292	0 0005 7086 4405	
PS Form 3811, July 2013 Domestic Reti	urn Receipt	



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	For delivery Informa	in n	<del>-</del> }	
ام		<u> </u>	,	
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	Restricted Delivery Fee (Endorsement Required)		CON VOLOR	
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7012	Street, Ap POB	OX 2276		
₽-	or PO Box FO D	OMFIELD, N	M 87413	1
	PS Form 1	-	tions	

and the British to the same	<b>%</b>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. freeland  B. Received by (Printed Name)  C. Date of Delivery,  Anno e Free and
Article Addressed to:	D. Is delivery address different from term 155 🗆 Yes If YES, enter delivery address below:
FREELAND, JANICE J PO BOX 2323	
.GALLUP, NM 87305	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7012	2920 0002 1086 4396
PS Form 3811, July 2013 Domestic Re	eturn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY."
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. Andressee  B. Received by (Printed Name)  C. Date of Delivery  Andresse  D. Is delivery address different from item 1?   Yes
Article Addressed to:	If YES, enter delivery address below:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY."
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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 mailplece, or on the front if space permits.  1. Article Addressed to:  GARCIA, AMBROSE PO BOX 276	A. Signature  X. Andressee  B. Received by (Printed Name)  C. pate of Delivery  D. is delivery address different from item 1?  If YES, enter delivery address below:
BLOOM FIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 701	14 Hesticied Delivery (Extra 765 5 2 1es
. (Transfer from service label)	
PS Form 3811, July 2013 Domestic Ret	urn Recelpt



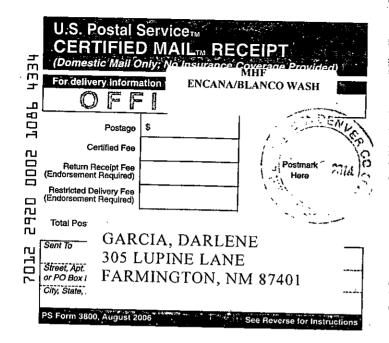
65	U.S. Postal Service TM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No. MHF
Ξ	For delivery information vis
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г <u>.</u>	Certified Fee
000	Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)
	Restricted Delivery Fee (Endorsement Required)
292	Total Pc GARCIA, CALVEDT
'n	Sent 10 #3 CR 5245
701	Street, A, or PO Bt. BLOOMFIELD, NM 87413
	City, Sta.  PS Form 3800, August 2006. See Reverse for Instructions

	The state of the s
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee
Article Addressed to:	D. Is delivery address different from Item 1? ☐ Yes If YES, enter delivery address below: ☐ No
GARCIA, ARABELLE PO BOX-1054	
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mall* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7012 29; (Transfer from service label)	20 DOD2 1086 4372
PS Form 3811, July 2013 Domestic Re	turn Receipt



A STATE OF THE STA		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A Signature  X Christine Julia Agent  B. Received by (Printed Name) C. Date of Del  C. Date of	
Article Addressed to:	D. Is delivery address different from Item 1?   If YES, enter delivery address below:   No	
GARCIA, CHRISTINE C PO BOX 1284		
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee) FT_Yes	
2. Article Number 7012 2 (Transfer from service label)	920 0002 1086 4358	
PS Form 3811, July 2013 Domestic Ret	um Receipt	

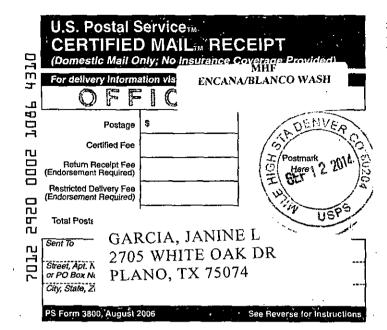
U.S. Postal Service TAL CERTIFIED MAIL TAL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) MHF For delivery information vi. ENCANA/BLANCO WASH  Postage \$ Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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:  ■ GARCIA, CLAUDIA  POBOX 1725	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  C. Date of Delivery  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
Total Postage  GARCIA, CLAUDIA  PO BOX 1725  Street, Apr. No. or PO Box No. City, State, ZIP  Total Postage  GARCIA, CLAUDIA  PO BOX 1725  BLOOMFIELD, NM 87413	BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3800, August 2006 See Reverse for Instructions	2. Article Number (Transfer from service label) 7012 21 PS Form 3811, July 2013 Domestic Returns	120 0002 1086 141,



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SËNDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X MANUAL ACCORD  B. Received by (Printed Name)  C. Date of Delivery
GARCIA, DARLENE 305 LUPINE LANE FARMINGTON, NM 87401	D. Is delivery address below: No  18 2014  3. Service Trop
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7012 292	0 0002 108P 4334
PS Form 3811, July 2013 Domestic Retr	
CENTED COMOLETE THE SECTION	COMPLETE THIS SECTION ON DELIVERY.

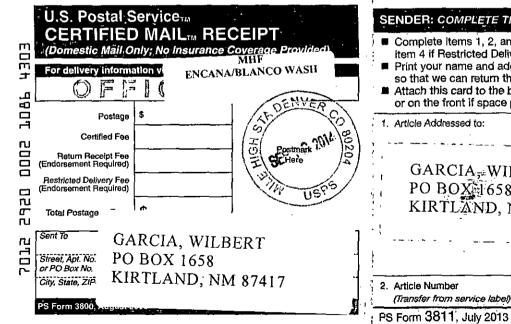
4327	U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Incurence Committee Provided) For delivery information views ENCANA/BLANCO WASH	
_ <del></del>	OFFIC	
108	Postage \$ ADENVERO	
	Certified Fee   Y @ / \O\	
-000	Return Receipt Fee (Endorsement Required)	}
_	Restricted Delivery Fee (Endorsement Required)	
다 다	Total Posteria & Fees \$	
	GARCIA, ISABELLE L	
7012	Street, Apt. PO BOX 3314	
1~	City, State, FARMINGTON, NM 87499	
	PS Form 38	ns.

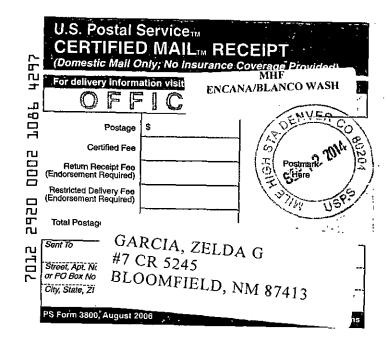
	· · · · · · · · · · · · · · · · · · ·
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  GARCIA, ISABELLE L POSOX 3314	If YES, enter delivery-address below:
FAMINGTON, NM 87499	3. Service Type 2014  Certified Mail □ Prority Mall Express □ Registered □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7012 295	O OOO2 1086 4327
PS Form 3811, July 2013 Domestic Retu	ırn Receipt .



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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li></ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
or on the front if space permits.	JANINE CARRIA 9/16/14
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ Yes
Marketin and the second	
GARCIA, JANINE L	
2705 WHITE OAK DR	
PLANO, TX 75074	3. Service Type
TLANO, IX 75071	☐ Certified Mall® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number	
(Transfer from service label)	2 2920 0002 1086 4310 <u> </u>
PS Form 3811, July 2013 Domestic Ret	um Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature    Agent   Addressee
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
CAPCIA WILDERT	
GARCIA	
	l ·
PO BOX 1658	2 Sondo Tino
	3. Service Type  Gertified Mall® □ Priority Mail Express™
PO BOX 1658	☐ Certified Mali® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
PO BOX 1658	Certified Mali® ☐ Priority Mail Express™
PO BOX 1658	☐ Certified Mall® ☐ Priority Mail Express" ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes

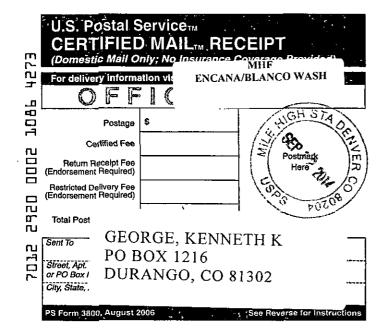
Domestic Return Receipt





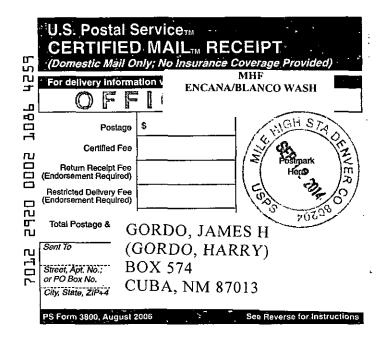
36 4280	For delivery informatio  ENCANA/BLANCO WASH	3)
2920 0002 1086	Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Posta	67 / G
7012	Sinet To  GARNANEZ, BRENDA  Street, Apt. N. or PO Box Nt. City, State, Zt.  FARMINGTON, NM 87401  PS Form 3800, August 2000.  See, Reverse for Ins.	itructions

THOICE OF DICHE CO.	·
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  GARNANEZ, BRENDA  COUNTY ROAD 5364 #20	A. Signature  X Brunda Malman, Addressee  B. Received by (Printed Name)  C. Date of Delivery  Brenda Cranans  D. Is delivery address different from Item 17  If YES, enter delivery address below:
FARMINGTON, NM 87401	3. Service Type  Certified Mail® Priority Mall Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7.012 2720	0005 1086 4580
PS Form 3811, July 2013 Domestic Retu	um Receipt



4266	U.S. Postal Ser CERTIFIED IN (Domestic Mail Only;	IAIL RE		<i>)</i>
TU.	For delivery information	V ENCANA	VBLANCO WASH	
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ГШ	Certified Fee		HIGH S	
9000	Return Receipt Fee (Endorsement Required)	<u> </u>	Postmark Here	
	Restricted Delivery Fee (Endorsement Required)	(_	Postman, Here	
292	Total Post		00 80504 N	/
ш	Sent To GEORG	E, LUCY I	M FUCO	
7012	Street, Apt. PO BOX	₹ 323		
7		ZI, NM 87	037	
	PS Form 3800, August 2006		See Reverse tor instr	uctions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     D. Is delivery address different from item 1?   Yes
Article Addressed to:	If YES, enter delivery address below:
GEORGE, KENNETH K PO BOX 1216 DURANGO, CO 81302	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
product representation and a suppose and the con-	20 0002 1086 4273
PS Form 3811, July 2013 Domestic Ret	um Receipt
SENDER: COMPLETE THIS SECTION:	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery Is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X JUCJUS Sept Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  Lettym Georg 91714
Article Addressed to:	D. Is delivery address different from item 1?
GEORGE, LUCY M PO BOX 323	
NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7012 2920 (Transfer from service label)	0005 7096 4588
PS Form 3811, July 2013 Domestic Retu	um Receipt



나 근	U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)
디기	For delivery information vis ENCANA/BLANCO WASH
	OFFIC
108	Postage \$  Certified Fee  Return Receipt Fee
	Certified Fee
000	Return Receipt Fee (Endorsement Required)
	Restricted Delivery Fee (Endorsement Required)
920	Total Postage
n,	HARRIS, MARY J
ГU	709 N BUENA VISTA AVE
7012	or PO Box No. FARMINGTON, NM 87401
	City, State, Zif PS Form 3800, August 2006 See Reverse for Institutions is

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SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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. Allow Carl 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:  No
GORDO, JAMES H (GORDO, HARRY) BOX 574 CUBA, NM 87013	3. Service-Type Certified Mail® ** Priority Mail Express**
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
1	4. Restricted Delivery? (Extra Fee)
2. Article Number 7012 2	920 0002 1086 4259
PS Form 3811, July 2013 Domestic Re	eturn Recelpt





근급	(Domestic Mail O	MAILTM REC	CEIPT Coverage Provided MHF /BLANCO WASH
및	For delivery informa	tion vi ENCANA	BLANCO WASI
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10 8.E	Postage	\$	GHSTA
	Certified Fee		Postmark Z
5000	Return Receipt Fee (Endorsement Required)		Here's
	Restricted Delivery Fee (Endorsement Required)		
0585 5	Sent To 1	ARRISON, H 504 HARRISC LOOMFIELD	ENDERSON H ON LANE
7012	Street, Apt. No.; or PO Box No. City, State, ZIP+4	LOOMFIELD	
	PS Form 3800, August	2006	See Reverse for Instructions

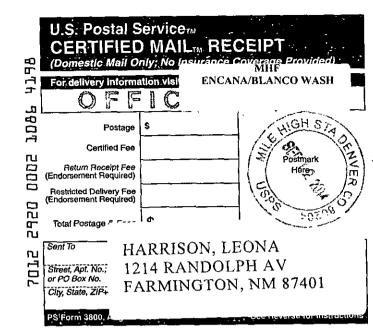
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Addressee  B. Received by (Printed Name)  C. Date of Delivery  CAMARY 9-23-14
Article Addressed to:	D. Is delivery address different from Item 1?  Yes If YES, enter delivery address below:
HARRISON, HENDERSON H 1604 HARRISON LANE	:
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7012 2	450 0005 709P 4558
PS Form 3811, July 2013 Domestic Retu	um Receipt .



Ì	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL REC	Overage Provided)
	For delivery informa	ation visit ENCA	NA/BLANCO WASH
. <u>.</u>	OFF		DENI
10 B	Postage	\$	10
	Certified Fee		1 1969.1.2.70M/C
000	Return Receipt Fee (Endorsement Required)		Postmark Here
	Restricted Delivery Fee (Endorsement Requirement		
2920	Total Postage &	IARRISON, J	ULIA
-	Sent To	26 EAST MA	IN ST
7012	Street, Apt. No.; F or PO Box No.	ARMINGTO	
	City, State, ZIP+4 PS Form 3800, August	2006	See Reverse for Instructions

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY	
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	☐ Agent ☐ Addressee	
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.	Received by (Printer Name) C. Date of Delivery	
¹ 1. Article Addressed to:	D. Is delivery address different from item 1?	
HARRISON, JANICE T PO BOX 696 AZTEC, NM 87410	If YES, enter delivery address below:  No  No  No  No  No  No  No  No  No  N	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7012 2920 0002 1081 4211		
PS Form 3811, July 2013 Domestic Ret	urn Receipt	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X
126 EAST MAIN ST	D. Is despend Angless different from item 1?
FARMINGTON, NM 87401	3. Service/Bre3  - Certified Mail*
2. Article Number  (Transfer from service label) 7012, 2920	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

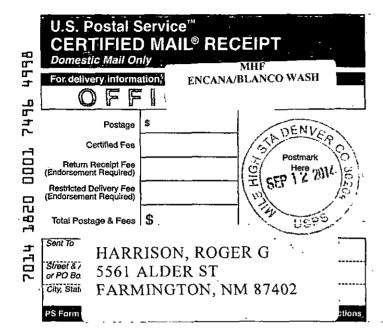


-7	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® REC	EIPT	
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7496	Postage Certified Fee	\$	1 / 4/6%	REE .
0001	Return Receipt Fee (Endorsement Required)		Postmark Here	)ER.C)
1820	Restricted Delivery Fee (Endorsement Required)	æ	(600 POR	38 /
ב אבטל	Street & Av 1214	RISON, LERO RANDOLPH		
ř~	or PO Box City, State FAR	MINGTON, N	M 87401	tions,

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.
Complete items 1, 2, and 3. Also complete	A Land Co
item 4 if Restricted Delivery is desired.	Agent
■ Print your name and address on the reverse	Addressee
so that we can return the card to you.	B. Received by (Rrinted Name) C. Date of Delivery
Attach this card to the back of the mailplece, or on the front if space permits.	9-15-14
	D. Is delivery address different from item 1?   Yes
Article Addressed to:	If YES, enter delivery address below:   No
مست ينمن بير ييس	
1	<u>.</u>
HARRISON, LEONA	
1214 RANDOLPH AV	<u> </u>
FARMINGTON, NM 87401	3. Service Type
171111111111111111111111111111111111111	☐ Certified Mail® ☐ Priority Mail Express™
	Registered Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7012 2920 [ (Transfer from service label)	3002 108F 4748
PS Form 3811, July 2013 Domestic Ret	urn Receint
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	Agent  Addresses  B. R ceived by Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  If YES, enter delivery address below:
- PAGON I PROV	<b>}</b> } .
HARRISON, LEROY	
1214 RANDOLPH RD	11
FARMINGTON, NM 8740	3. Service Type
	G. Salvice Type  G. Certified Mail® Priority Mall Express**
The second secon	
	,
	☐ Registered ☐ Return Receipt for Merchandise
	☐ Registered ☐ Return Receipt for Merchandise
511 1:4 1.Ac	☐ Registered ☐ Return Receipt for Merchandled ☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 185 (Transfer from service label) 7014 185 PS Form 3811, July 2013 Domestic Re	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery

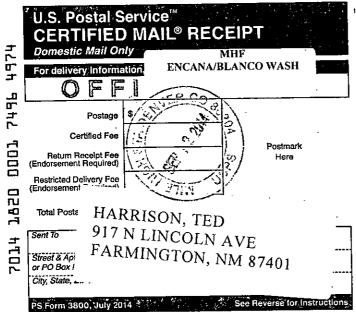
Domestic Return Receipt





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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below.
HARRISON, ROGER G 5561 ALDER ST FARMINGTON, NM 87403	E dig FA
FARMINGTON, NM 87402	i3. Service Type ☐ Certified Mail® ☐ Record ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820 (Transfer from service label)	0001 7496 4998
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

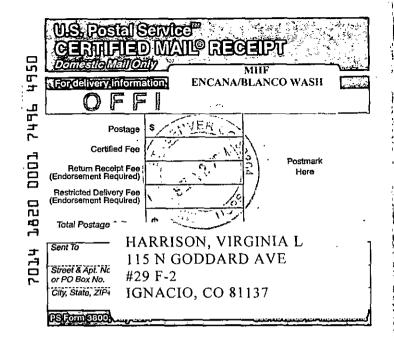
187	U.S. Postal Service  CERTIFIED MAIL® RECEIPT  Doinestic Mail Only  For delivery information, v  ENCANA/BLANCO WASH	
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구부위	Postage \$ NVERO	
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0 0	Restricted Delivery Fee (Endorsement Regulred)	
1620	Total Postage	_
	HARRISON, STEVE T	- {
7	1077 S LAKE ST	-1
70,74	or PO Box No. SALT LAKE CITY, UT 84105	-
	City, State, ZiF	8
	PS Form 3800, July 2014	النفندر



4967	U.S. Postal Service  CERTIFIED MAIL® RECEIPT  Domestic Mail Only  For delivery information  ENCANA/BLANCO WASH	
7496	OFFI	
	Postage Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	
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1.620	Total P HARRISON, TOMMY 235 2 S DUSTIN RD	
7074	Sent To FARMINGTON, NM 87401	
70	or PO B City, State, ZIP+4	
	PS Form 3800, July 2014 See Reverse for Ins	tructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X A A A A A A A A A A A A A A A A A A
1. Article Addressed to:  HARRISON, TED 917 N LINCOLN AVE	D. Is delivery address different from Item 1 Yes If YES, enter delivery address below:
FARMINGTON, NM 87401	3. Service Type  ☐ Certifled Mall* ☐ Priority Mall Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 182	0 0001 7496 4974
PS Form 3811, July 2013 Domestic Ret	urn Receipt

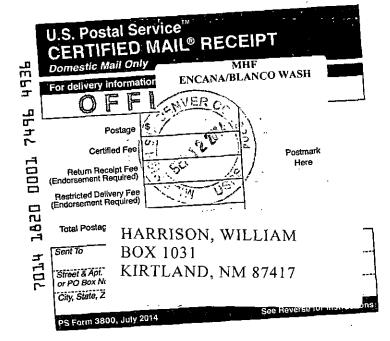
•	į.
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY.
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery 9-16-14.
Article Addressed to:     Article Addre	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
HARRISON, TOMMY 235 2 S DUSTIN RD	, , , , , , , , , , , , , , , , , , ,
FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
for a contract of the second	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820 (Transfer from service label)	0001 7496 4967
PS Form 3811, July 2013 Domestic Ret	um Receipt
former and the second of the s	المراج المستعدد المستعدد



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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A, Signature    Dent
Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
HARRISON, VIRGINIA L 115 N GODDARD AVE #29 F-2	·
IGNACIO, CO 81137	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820 (Transfer from service label)	0001 7496 4950
PS Form 3811, July 2013 Domestic Reti	urn Receipt
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4943	U.S. Postal Service RECEIPT  GENTIFIED WAILS RECEIPT  Contestional Contestion Encana/Blanco Wash	
1820 0001 7496 L	Postage \$ Certified Fee	
1 4102	HARRISON, WAYNE E	nstructions

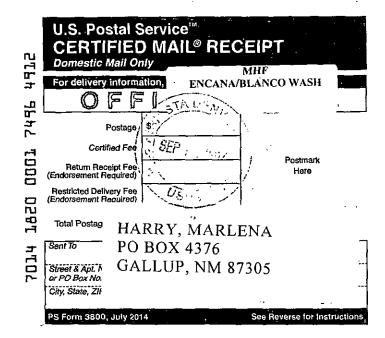
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  C. Jate of Delivery  A. Signature  A. Signat
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
HARRISON, WAYNE E	
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	20 0007 344P 4443
PS Form 3811, July 2013 Domestic Retu	ırn Receipt

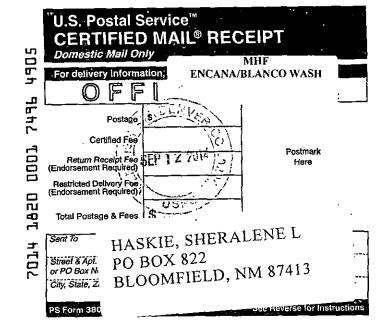


<u> </u>	Same and the same
SENDER: COMPLETE THIS SECTION!	COMPLÈTE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature Agent Addressee  B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from Item 1? ☐ Yes If YES, enter delivery address below: ☐ No
HARRISON, WILLIAM BOX 1031	
KIRTLAND; NM 87417	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
. 2. Article Number (Transfer from service label)	1820 0001 749F 493F
PS Form 3811, July 2013 Domestic Retu	ım Receipt

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	PS Form 38	00, July 2014		See Reverse for Ins	tructions

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X Agent Addressee B. Received by Printed Name) D. Is delivery address different from item 1?  Yes
HARRISON, WILLIE G 6315 N SAINT NICHOLAS CIR, UNIT 60	If YES, enter delivery address below:   No
FLAGSTAFF, AZ 86004	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)  PS Form 3811, July 2013  Domestic Retu	· · · · · · · · · · · · · · · · · · ·



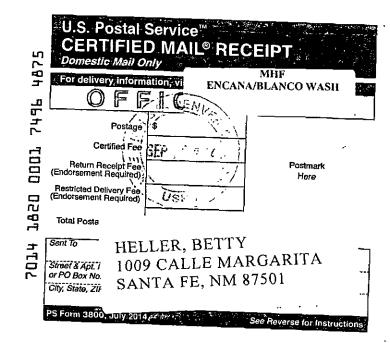


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	* Muchael Lee Addressee
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Michael Ree 9-18-14
1. Article Addressed to:	D. Is delivery address different from item 1?
the second of th	If YES, enter delivery address below:   No
HARRY, MARLENA	
PO BOX 43.76	
GALLUP, NVI 87305	
The state of the s	3. Service Type ☐ Certified Mall® ☐ Priority Mail Express™
	☐ Certified Mall® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	
	820 0001 7496 4912
PS Form 3811, July 2013	um Receipt
والمراوية والمرا	
	p. 19-w.
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A Squature
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
■ Complete items 1, 2, and 3. Also complete	A Signature  X MA Agent  Agent  Addressee
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A Signature
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X Agent  Agent  Addressee  A Received by (Printed Name)  C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A Signature  X Agent  Agent  Ag
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A Signature  A Agent  Agent  Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  Agent
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>HASKIE, SHERALENE</li> </ul>	A Signature  A Agent  Agent  Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  Agent
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>HASKIE, SHERALENE L</li> <li>PO BOX: 822</li> </ul> </li> </ul>	A Signature  A Agent  Agent  Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  A Agent  Agent
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>HASKIE, SHERALENE</li> </ul>	A. Sanature  A. Received by Printed Name)  D. Is delivery address different from Item 17 Yes  If YES, enter delivery address below:
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>HASKIE, SHERALENE L</li> <li>PO BOX: 822</li> </ul> </li> </ul>	A. Sanature  A. Agent  Addressee  A. Received by Printed Name  C. Date of Delivery  G-22.14  D. Is delivery address different from item 17  Yes  If YES, enter delivery address below: No  No  No  Priority Mall Express**
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>HASKIE, SHERALENE L</li> <li>PO BOX: 822</li> </ul> </li> </ul>	A. Sgnature  A. Received by Printed Name  C. Date of Delivery  G-22-1-4  D. Is delivery address different from item 17  Yes  If YES, enter delivery address below: No  No  No  Registered Priority Mall Express**  Registered Return Receipt for Merchandise
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>HASKIE, SHERALENE L</li> <li>PO BOX: 822</li> </ul> </li> </ul>	A. Signature  X. M. Agent  Addressee  Agent  Addressee  Agent  Addressee  C. Date of Delivery  G-22·1  D. Is delivery address different from item 17  Yes  If YES, enter delivery address below: No  No  No  Registered  Registered  Insured Mail  Collect on Delivery
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  HASKIE, SHERALENE L PO BOX: 822 BLOOMFIELD, NM 87413	A. Sgnature  A. Received by Printed Name  C. Date of Delivery  G-22-1-4  D. Is delivery address different from item 17  Yes  If YES, enter delivery address below: No  No  No  Registered Priority Mall Express**  Registered Return Receipt for Merchandise
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>HASKIE, SHERALENE L</li> <li>PO BOX: 822</li> </ul> </li> </ul>	A. Sgnature  A. Sgnature  A. Sgnature  A. Agent  Addressee  Addressee  C. Date of Delivery  G-22·1  D. Is delivery address different from item 17



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40	For delivery information, vis ENCANA/BLANCO WASH	
	OFFICE	
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7014 ጊዜ	Total Po  HASKIE, SHERMAN PO BOX 822 Street & Po Bo. City, State  See Reverse tortinstitut See Reverse tortinstitut See Reverse tortinstitut	ctions
	PS Form 3800, July 2014	

O'EL OF EGOTEWE	4
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  HASKIE, SHERIDAN P POBOX 514 AZTEC, NM 87410	A. Signature  X. Agent Addressee  A. Received by (Rrinted Name)  D. Is delivery address different from item 1? Yes If YES, enter delivery address below:  No. Service Type
	☐ Certified Mail® ☐ Priority Mail Express®☐ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number	4. nestricted Delivery? (Extra Fee) Yes
(Transfer from service label) 7014 1820	0001 7496 4899
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.  ■ Print your name and address on the reverse so that we can return the card to you.	A. Signature  X. Manual Land Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	C. Date of Delivery
1. Article Addressed to:  HASKIE, SHERMAN PO BOX 822	D. Is delivery address different from item 1?   If YES, enter delivery address below:
BLOOMFIELD, NM 87413	3. Service Type ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820	
(Transfer from service label)	0001 7496 4882 1000
PS Form 3811, July 2013 Domestic Retu	

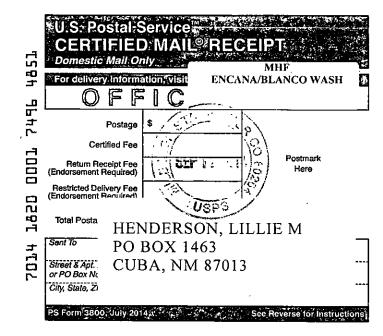


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SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>HELLER, BETTY         <ul> <li>1009 CALEE MARGARITA</li> <li>SANTA FE, NM 87501</li> </ul> </li> </ul>	A. Signature  X
•	4. Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label)	014 1820 0001 7496 4875
PS Form 3811, July 2013 Domestic Re	aturn Receipt
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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  X. B. Buckman  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?  C. Date of Delivery
1. Article Addressed to:  HENDERSON, JULIA T 4169A E, ROUTE 9 PMB 174	If YES, enter delivery address below: 🗷 No
CUBA, NM 87013	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number,  (Transfer from service label) 7014 1620	0001 7496 4868

Domestic Return Receipt

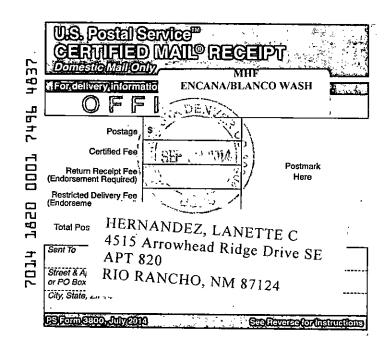
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PS Form 3811, July 2013



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7014	Street & / or PO Bo. City, Statu	FARMINGTON, NM 8	7401	
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A. Signature  X. Canelda Drufft Agent  A Addressee  B. Received by (Printed Name) C. Date of Delivery  Ranelda Chiffith 9/18/14
D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
3. Service_Type  ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
20 0001 7496 4851

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature
1. Article Addressed to: HENRY, VIRGINIA M 23 CR 5584	D. Is delivery address different from item 1?   [In Yes   Partier delivery address below:   No
FARMINGTON, NM 87401	3. Serve Type  "☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service la 7014 1820 00	JOL 7496 4844
PS Form 3811, July 2013 Domestic Retu	um Receipt
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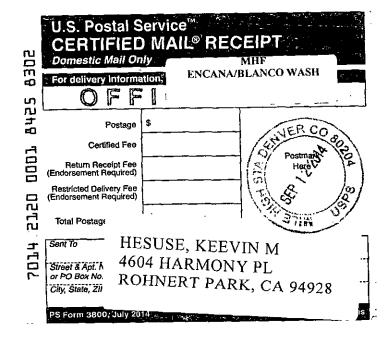
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	HERRERA, EFFIE PO BOX 5593	٦
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	PS Form 3800 July 2014 23 See Reverse for Instruments	į,

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  HERNANDEZ, LANETTE C  4515 Arrowiread Ridge Drive SE  APT 820	D. Is delivery address different from item 1?   If YES, enter delivery address below:  Lanette Children NYBO
RIO RANCHO, NM 87124	3. Service Type  ☐ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820	1,0001 7496 4837
PS Form 3811, July 2013 Domestic Ret	urn Receipt



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7014	Street & Apt. No. N / or PO Box No.	AGEEZI, NM 87037
	City, State, ZIP+	/
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<ul> <li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>HESUSE, CALVIN A</li> </ul>	Agent Addressee  B. Received by (Printed Name) C. Date of Delivery Calvin G. Ht. Sus G. 17-14  D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
PO BOX 401	
NAGEEZI, NM 87037	3. Service-Type  ☐ Certiffed Mail® ☐ Priority Mail Express™ , ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 212 (Transfer from service label)	0 0001 8425 8319
PS Form 3811, July 2013 Domestic Ret	um Receipt



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	PS Form 3800, July 201	4 10 10 10 10 10 10 10 10 10 10 10 10 10	See Reverse for	Instructions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A Signature Agent Addressee
so that we can return the card to you.  Attach this card to the back of the malipiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
EESUSE, KEEVIN M 4604 HARMONY PL	
ROHNERT PARK, CA 94928	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)   Yes
2. Article Number (Transfer from service label, 7014 2120	_0001 8455 8302 ····
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X W Agent  B. Received by (Printed Name)  C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from the Printer Printer  D. Is delivery address.
1. Article Addressed to:	to the state of th
HESUSE, LUCINDA J	If YES, enter delivery address below: 176
GALLUP, NM 87305	

3. Service Type

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Domestic Return Receipt

2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

☐ Registered

☐ Insured Mail

4. Restricted Delivery? (Extra Fee)

☐ Certified Mail® ☐ Priority Mail Express™

☐ Return Receipt for Merchandise

Yes

Collect on Delivery



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7074	Street & Apt. No., G, or PO Box No.	ALLUP, NM 87301
	City, State, ZIP+	
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■ Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. ■ 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. Mellow He was Pagent  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
HESUSE, MELVIN H	,
PO BOX 3195	
CANONCITO, NM 87026	3. Service Type  G Certified Mail*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Reti	urn Receipt
SENDER: COMPLETE THIS SECTION.	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature  X Dark and D H Signature  B. Received by (Printed Name)  C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Nothaniel Hesuse
Article Addressed to:	D. Is delivery address different from item 1?
	·
HESUSE MATHANIEL	·
609 1/2 WILSON AVE	<u> </u>
GALLUP, NM 87301	3. Septice Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (	2120 0001 8425 6272
PS Form 3811, July 2013 Domestic Re	turn Receipt

U.S. Postal Service 826 ENCANA/BLANCO WASH For delivery information, vis C) # Postage 口 Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 23,20 **Total Post** HOGUE, SANDRA 7034 Sent To PO BOX 1662 Street & Api KIRTLAND, NM 87417 or PO Box I City, State, . PS Form 3800, July 2014

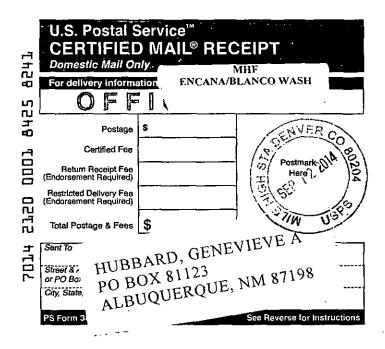
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	City, State, ZIP4 .		
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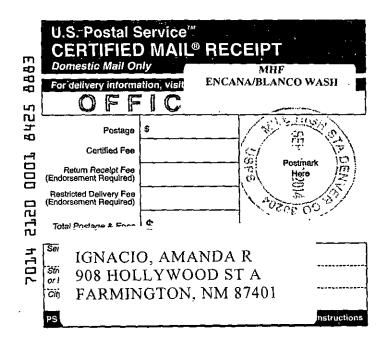
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:  No
HOGUE, SANDRA PO BOX-1662 KIRTLAND, NM 87417	3. Service Type ☐ Certified Mall ☐ Priority Mall Express ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 21	20 0001 8425 8265
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SENDER: COMPLETE THIS SECTION	COMPLETE, THIS SECTION ON DELIVERY.
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  HOSEASE, ANDREA PO BOX 1227	A. Signature  X. Low Agent Addressee  B. Received by [Printed Name] C. Data of Delivery  Lucura D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
FRUITLAND, NM 87416	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
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PS Form 3811, July 2013

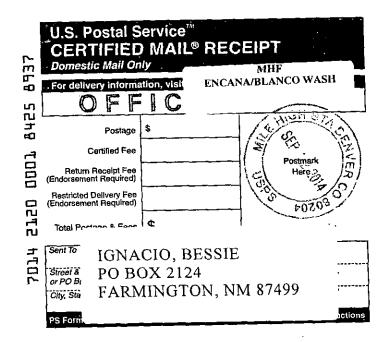


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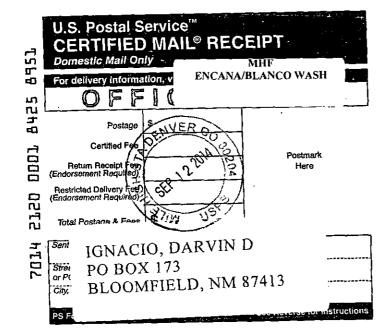
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Article Addressed to:     Article Addressed to:     Article Addressed to:     Article Addressed to:     Article Addressed to:	D. Is delivery address different from item 1?	
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BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)	014 2120 0001 8425 8920	
PS Form 3811, July 2013 Domestic Return Receipt		



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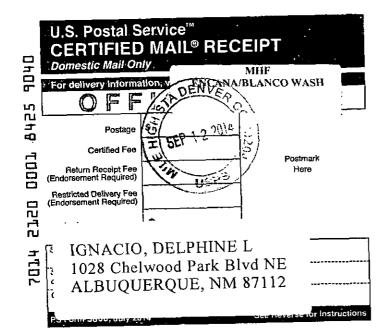
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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Article Addressed to:	D. Is delivery address different from item 1?
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KAYENTA, AZ 86033	3. Sep/ice Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  C. Date of Delivery
1. Article Addressed to:  IGNACIO, DARVIN D PO BOX 173	D. Is delivery address different from Item 1?   If YES, enter delivery address below:   No
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	2120 0001 8425 8951
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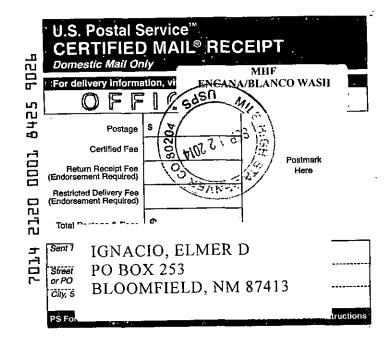
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IGNACIO, DAVIS PO BOX 829	D. Is delivery address different from mem 1?  Ves  If YES, enter delivery address below:
KIRTLAND, NM 87417	3. Service Type  ☐ Certified Mall ☐ Priority Mall Express ☐ Registered ☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 7014  (Transfer from service label)	2120 0001 8425 8968
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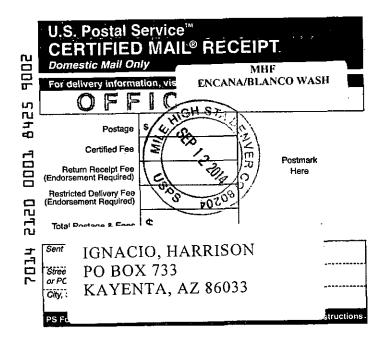
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BUQUERQUE, NM	3. Service Type Certified Mail® ☐ Priority Mail Express" ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes
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· · · · · · · · · · · · · · · · · · ·	☐ Registered ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
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PS Form 3811, July 2013 Domestic Return Receipt		



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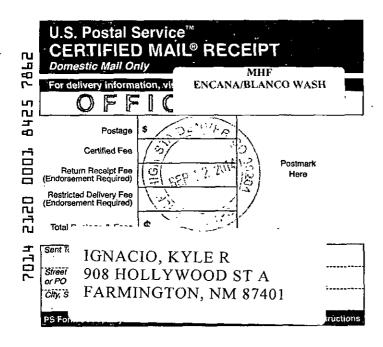
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KAYENTA, AZ 86033	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes		
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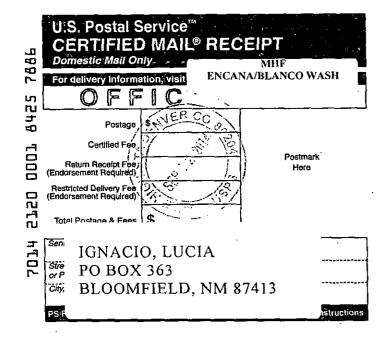


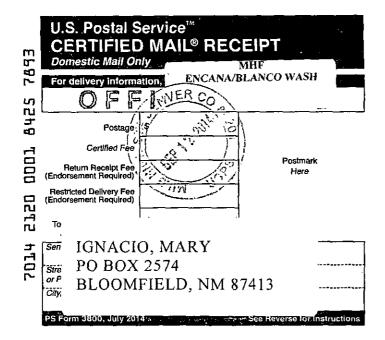
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:	A. Signature  X. Agent  Addressee  B. Raceived by (Printed Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
IGNACIO, KENNETH R PO BOX 2262 BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail ☐ Priority Mall Express ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
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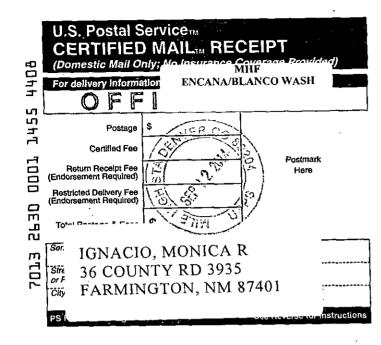


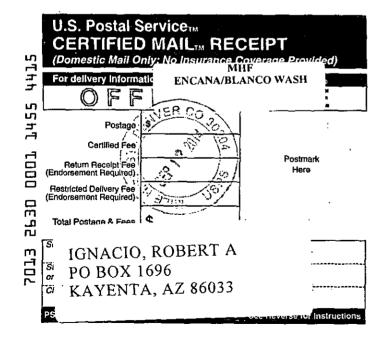




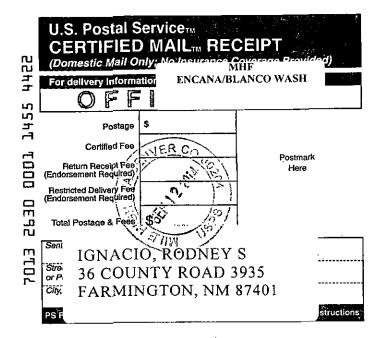


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IGNACIONLUCIA PO BOX 363 BLOOMFIELD, NM 87413	3. Senice Type  Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)	
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PS Form 3811, July 2013 Domestic Return Receipt		
SENDER: COMPLETE THIS SECTION.  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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. Detto Addressee  B. Received by (Printed Name) C. Date of Delivery  SECTION ON DELIVERY  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:		
IGNACIO, MARY PO BOX 2574 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail®	
C. Autolo Number	4. Restricted Delivery? (Extra Fee) Yes	
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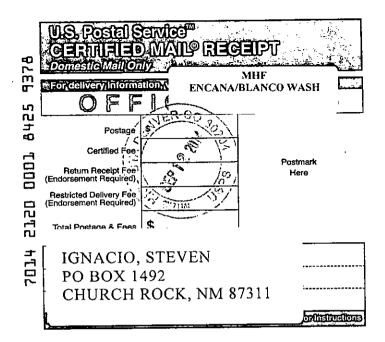


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2. Article Number 7013 2530 0001 1455 4408 (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receipt		
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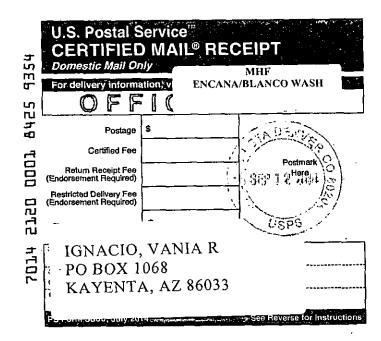
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Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  IGNACIO, RODNEY S 36 COUNTY ROAD 3935	Roducy Tanaco  Solivery Engress different from item 1?   Yes
or on the front if space permits.  1. Article Addressed to:  IGNACIO, RODNEY S 36 COUNTY ROAD 3935	The state of the s
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<ul> <li>item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece.</li> </ul>	B. Received by (Printed Name) C. Date of Delivery
Print your name and address on the reverse	B. Received by (Printed Name)   C. Date of Delivery   ROGENTANACIO   9-19-14
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  Construction  C. Date of Delivery  Construction
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)   C. Date of Delivery   ROGENTANACIO   9-19-14
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<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>IGNACIO, ROGER</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  Conclusion of Delivery  Co
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  Conclusion of Delivery  Co
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>IGNACIO, ROGER BOX 1643</li> </ul>	B. Received by (Printed Name) C. Date of Delivery  ROGETANACIO 9-19-14  D. Is delivery address different from item 17 Yes  If YES, enter delivery address below:
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>IGNACIO, ROGER</li> </ul>	B. Received by (Printed Name) C. Date of Delivery POPE TOWN 9-19-14  D. Is delivery address different from item 17  Yes If YES, enter delivery address below: No  3. Service Type Coertified Mail® Priority Mail Express**
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>IGNACIO, ROGER BOX 1643</li> </ul>	B. Received by (Printed Name) C. Date of Delivery  COGENTACIO 9-19-14  D. Is delivery address different from item 17 Yes  If YES, enter delivery address below: No  3. Service Type  Certified Mail® Priority Mail Express®  Registered Return Receipt for Merchandise
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>IGNACIO, ROGER BOX 1643</li> </ul>	B. Received by (Printed Name) C. Date of Delivery POPE TOWN 9-19-14  D. Is delivery address different from item 17  Yes If YES, enter delivery address below: No  3. Service Type Coertified Mail® Priority Mail Express**
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>IGNACIO, ROGER</li> <li>BOX 1643</li> <li>FARMINGTON, NM 87499</li> </ul> </li> </ul>	B. Received by (Printed Name) C. Date of Delivery POPE TANCIO 9-19-/9  D. Is delivery address different from item 17 Yes If YES, enter delivery address below:  3. Service Type Certified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail
	y Zhanon \



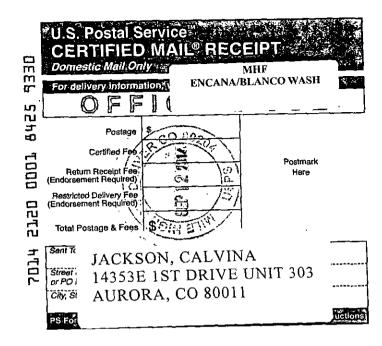
9361	U.S. Postal Service  CERTIFIED MAIL® REGELPT  Domestic Mail Only  MHF  For delivery information  ENCANA/BLANCO WASH	
2120 0001 8425	Postage \$  Certified Fee    Return Receipt Fee   (Endorsement Required)  Restricted Delivery Fee   (Endorsement Required)  Total Postage & Fees \$	
701.4	IGNACIO, SUSIE  Sifi 1509 MISTY GLEN TRL #916  Cit ARLINGTON, TX 76011	nstrucțions

1	:
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY,
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  Agent  Addressee  B. Regelved by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 1?  If YES, enter delivery address below:
IGNACIO, STEVEN PO BOX 1492 CHURCH ROCK, NM 8731	3. Service-Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
* O Autob N ash	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	7014 2120 0001 8425 9378
PS Form 3811, July 2013 Domestic Retu	urn Recelpt



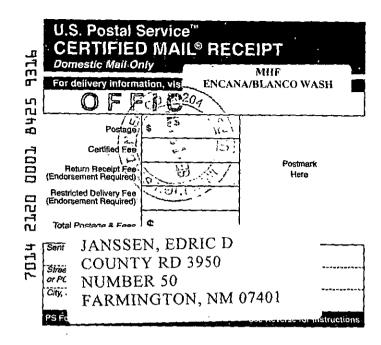
`_ 3F	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® REC	CEIPT	· .
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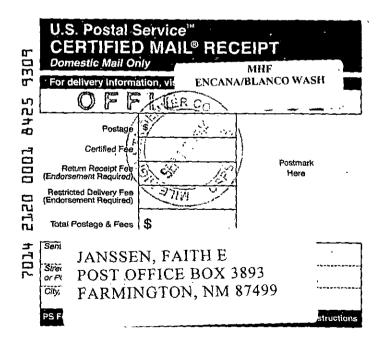
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the malipiece, or on the front if space permits.  Article Addressed to:  IGNACIO, VANIA R PO BOX 1068	A Signature  A Signature  Addressee  B. Received by (Frinted Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 17   Yes  If YES, enter delivery address below:
KAYENTA, AZ 86033	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	1
PS Form 3811, July 2013 Domestic Ret	urn Receipt
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  A. Signature  A. Signature  C. Date of Delivery  Truin Back
1. Article Addressed to:  TRVIN, RAY 277.05 HWY 184	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
DOLORES, CO 81323	3. Service Type  ☐ Certified Mail* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	014 5150 0001 8452 4347
PS Form 3811, July 2013 Domestic Retu	urn Receipt

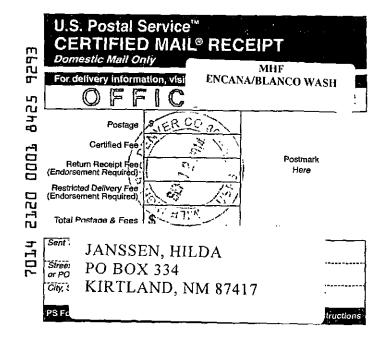


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7074	Ser. JACQUEZ, JUA Ser. BOX 514 or AZTEC, NM 87	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X Agent  Addressee
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.	LIVES MOUE OF 113/17
1. Article Addressed to:	D. Is delivery address different from item 1?
JACQUEZ, JUANITA P BOX 514	James James
AZTEC, NM 87410	3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
, ' ' '	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	7014 2120 0001 8425 9323
PS Form 3811, July 2013 Domes	stic Return Receipt



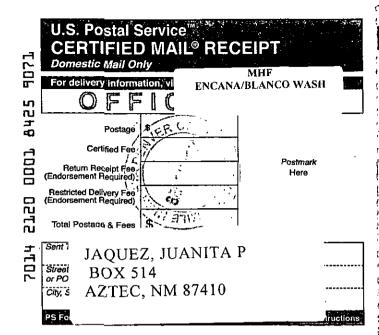




5 F088	U.S. Postal Service CERTIFIED MAIL® RECEIP  Domestic Mail Only  For delivery information, vis  OFFIC	F CONTRACTOR OF THE PARTY OF TH
2120 0001 842	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	Postmark Hero
7074	JANSSEN, KELLY B  Str. ori 126 E Main St.  City FARMINGTON, NM 87401	nstructions

SENDER: CO.  Complete items . item 4 If Restricted . Print your name and add. so that we can return the co.	A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Attach this card to the back of or on the front if space permits.  1. Article Addressed to:  JANSSEN, HILDA PO BOX:334	D. Is delivery address different from Item 1?
KIRTLAND, NM 87417	3. Septice Type  Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
Article Number 7014  (Transfer from service label)	2120 0001 8425 9293
PS Form 3811, July 2013 Domestic Ret	urn Receipt

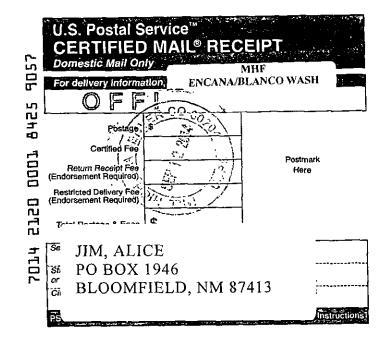
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
JANSSEN, KELLY B 126.E Main St.	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No  No  No  No  No  No  No  No  No  N
FARMINGTON, NM 87401	3. Seption   Priority Mail Express™   Priority Mail Express™   Registered   Return Receipt for Merchandise   Insured Mail   Collect on Delivery
Article Number     (Transfer from service label)	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Retu	ım Recelpt



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7014	JAQUEZ, TOMN	1Y	
2	Sire 126 E MAIN STI	REET	
•	city, FARMINGTON,	NM 87401	
	PS F		structions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JAQUEZ, JUANITA P BOX.514 AZTEC, NM 87410	A. Signature  X
2. Article Number (Transfer from service label)	4 2120 0001 8425 9071
PS Form 3811, July 2013 Domestic Retu	urn Receipt

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:  JAQUEZ, TOMMY  1.26 E MAIN STREET FARMINGTON, NM 8740  3. Service the mail of the mailpiece of t	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
FARMINGTON, NM 8740  3. Service tree and the service of the servic	item 4 if Restricted Delivery Is desired.  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:  JAQUEZ, TOMMY	D. Is delivery address different from item 1?  If XST enter trefligery address below:    Agent   Addressee     Add
(Transfer from service label)	2. Article Number 701.4 21	3. Service Type  Contined Mail: Priority Mall Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
PS Form 3811, July 2013 Domestic Return Receipt	(Transfer from service label)	

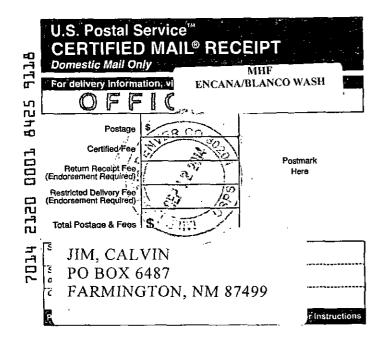


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4	JIM, BRUCE	
7074		1
Γ-	orF PO BOX 1174	7400
	FARMINGTON, NM 8	7499
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- Appendix of the second	The Bearing
SENDER: COMPLETE THIS SECTION	-COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  A Signature  A Agent  Addressee  B Received by (Printed Name)  C Date of Delivery,  A Signature  A Agent  C Date of Delivery,  A Agent  C Date of Delivery,  A Agent  C Date of Delivery,  A Agent
Article Addressed to:	Do Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
JIM, ALICE PO BOX 1946 BLOOMFIELD, NM 87413	3. Service Type  3. Certified Mall  □ Priority Mail Express □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) PS Form 3811, July 2013 Domestic Ret	120 0001 8425 9057 um Recelpt
SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  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 mailplece, or on the front if space permits.  Article Addressed to:  JIM, BRUCE PO BOX 1174 FARMINGTON, NM 87499	COMPLETE THIS SECTION ON DELIVERY  A Signature  X
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PS Form 3811, July 2013

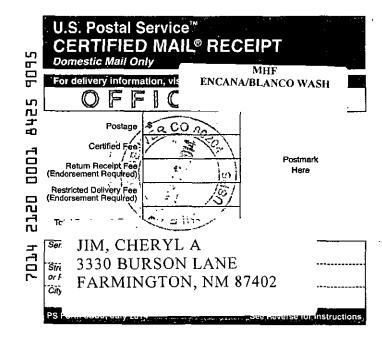


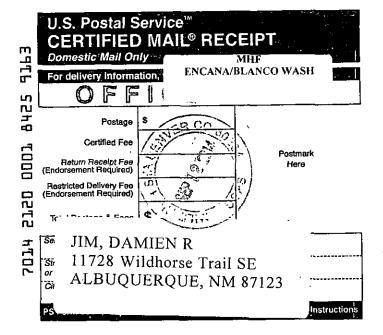


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Ĺ~	or PC City,	BLOOM	1FIEL	D, NM	87413	<b>,</b>	
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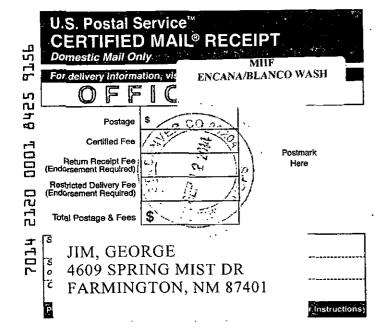
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
JIM, CALVIN PO BOX 6487	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
FARMINGTON, NM 87499	3. Service-Type  ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  X Agent  Addressee
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:     The second se	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
JIM, CHERYL A 3330 BURSON LANE	(3) STR 30
FARMINGTON, NM 87402	3. Service Type
· · · · · · · · · · · · · · · · · · ·	☐ Certified Mall* ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 (Transfer from service label)	2120 0001 8425 9095
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JIM, DAMIEN R	A. Signature  A. Signature  A. 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:
11728 Wildhorse Trail SE ALBUQUERQUE, NM 87123	3. Service Type  Certifled Mail Priority Mall Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
1	4. Restricted Delivery? (Extra Fee)
2. Article Number [70], (Transfer from service label)	4 2120 0001 8425 9163
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2. Article Number

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PS Form 3811, July 2013

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  Y Is delivery address different from item 1?  Capture  Compared to the printer of the pr
JIM, GEORGE 4609 SPRING MIST DR FARMINGTON, NM 87401	3. Service (portion of the control
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) PS Form 3811, July 2013 Domestic Retu	14 2120 0001 8425 9156
SENDER: COMPLETE THIS SECTION.  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JIM, EORA A 908 MESA VIEJO ST SW ALBUQUERQUE, NM 87121	COMPLETE-THIS SECTION ON DELIVERY  A. Signature  X
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery

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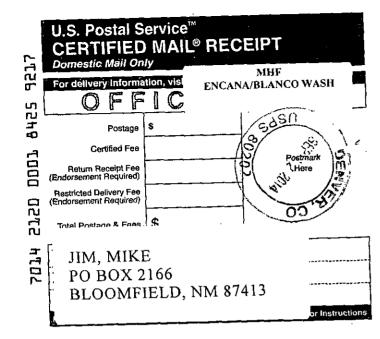
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Domestic Return Receipt

☐ Yes

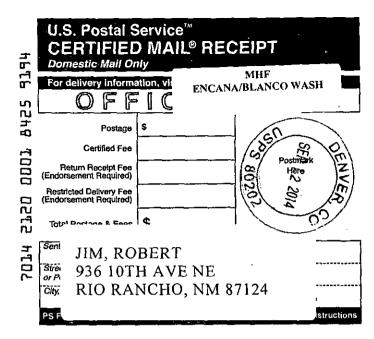






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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 1?  If YES, enter delivery address below:
JIM, MIKE PO BOX 2166 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail® Priority Mail Express"  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 701	4 2120 0001 8425 9217
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  X. Dermon Language  B. Regelved by (Printed Name)  C. Date of Delivery  9-16-14
or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:
JIM, RAYMOND PO BOX 1204 BLOOMFIELD, NM 87413	3. Seruled Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7 17 1,4	21,20 0001. A425 9200



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የመሪ	JIM, SHIRLEY M
2	56 PO BOX 1174
•	FARMINGTON, NM 87499
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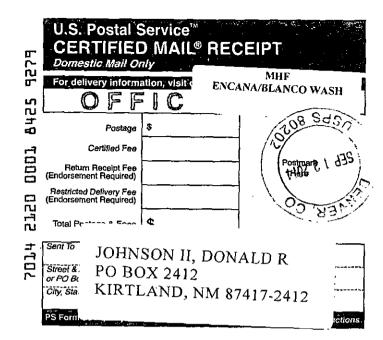
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  Agent  Addressee  B. Received by (Frinted Name)  C. Date of Delivery  S. delivery a gress different from item 1?   Yes
JIM, SHIRLEY M PO BOX 1174	No
FARMINGTON, NM 87499	3. Serves Type  Certifled Mall® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
Article Number     (Transfer from service label)	4. Restricted Delivery? (Extra Fee)



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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature,  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:	If YES, enter delivery address below:
JIM, TRINNIE PO BOX 181 BLOOMFIELD, NM 87413	3. Service Type ☐ Certifled Mail* ☐ Priority Mail Express™ ☐ Realstered ☐ Return Receipt for Merchandise
The second of th	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
:	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 701	4 2120 0001 8425 9170
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mailplece, or on the front if space permits.	A. Signature  X. M. C. M. P. C. Date of Delivery  B. Received by (Printed Name)  M. C. Date of Delivery  M. A. Signature  D. Agent  G. Date of Delivery  M. A. C. Date of Delivery
JIM-PINE, MARY PO BOX 2426	D. Is delivery address different from item 1?
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	7014 2120 0001 8425 9286

. (Transfer from service label) PS Form 3811, July 2013



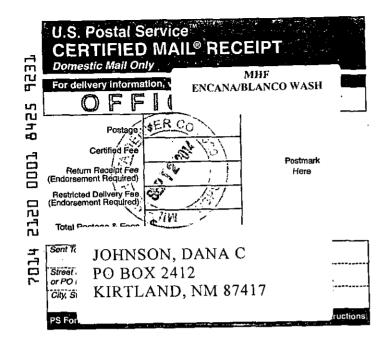
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7 ሀ ፲ ዛ	Sent T. JOHNS	ON, AUNDRIANA R	
~	Street 2504 E	AST 23RD STREET	
i	City 5 FARMI	NGTON, NM 87401	
1	PS Fo	<u></u>	ructions

- <del>"</del>	·
SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON PELIVERY
Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	X   On culd   C   Addressee  B. Received by (Printed Name)   C   Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	D. Is delivery address different from item 13 12 yes
Article Addressed to:	If YES, enter delivery address below:
TOTALGON IL DONALD B	·
JOHNSON II, DONALD R PO BOX 2412	
KIRTLAND, NM 87417-2412	3. Service Type  ☑ Certified Mail® ☐ Priority Mall Express**
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	7014 2120 0001 8425 9279
PS Form 3811, July 2013 Domestic Re	turn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY  A) Signature
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	Agent Addressee
<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	Beceived by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes
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JOHNSON, AUNDRIANA R 2504 EAST 23RD STREET	2014
FARMINGTON, NM 87401	3. Service Type
	☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	. 6.6.4 "An 4 64.64 4 From down 4 do



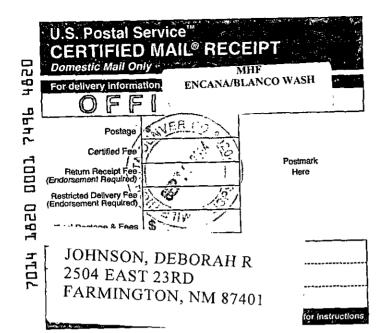
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7	Si 2504 EAST 23RD STREET	
	ä FARMINGTON, NM 87401	
	PS Instr	uctions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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Attach this card to the back of the mailpiece, or on the front if space permits.	B. Heddied by Villing Halley
Article Addressed to:	D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No
	W 125, Shist dantely address 25,5
JOHNSON, BRENDA	{{
PO:BOX 2044	<b>}</b> [
KIRTLAND, NM 87417	3. Service Type
	☐ Registered ☐ Return Receipt for Merchandis
*	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	4 2120 0001 8425 9255
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature
Attach this card to the back of the mailpiece, or on the front if space permits.	Racelycet by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, patent beliver parties below:
	870 12
JOHNSON, CHRISHANA N 2504 EAST 23RD STREET	( 15 ) (874)
FARMINGTON, NM 87401	3. Service Type
,	☐ Certified Mais ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
Add N	4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service (abel)	2014 2120 0001 8425 9248



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<b>L</b> ~	City. FARMINGTON, NM 87401	
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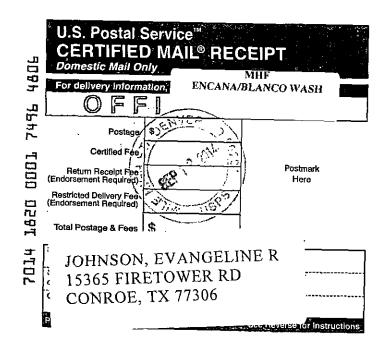
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JOHNSON, DANA C PO BOX 2412 KIRTLAND, NM 87417	3. Service Type ☐ Certifled Mail* ☐ Priority Mail Express*
. <del> </del>	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	<u> </u>
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SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Agent Addressee  B. Received by (Protect Name)  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:



m T	U.S. Postal Service CERTIFIED MAIL® RECEIPT  Domestic Mail Only	- u- :
L 4813	For delivery information: ENCANA/BLANCO WASH  OFFI	
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. ካፒዐረ	JOHNSON, DONALD R PO BOX 2412 KIRTLAND, NM 87417-2412	

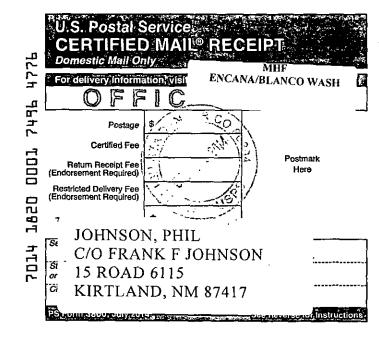
SENDE	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	Agent
Print your name and address on the reverse so that we can return the card to you.	B. Received by (Printed Name)  C. Date of Delivery
<ul> <li>Attach this card to the back of the mailpiece,</li> <li>or on the front if space permits.</li> </ul>	Harberton noon
Article Addressed to:	D. Is delivery address different from Item 1? Yes If YES, enter children address below: I No
JOHNSON, DEBORAH R 2504 EAST 23RD FARMINGTON, NM 87401	15 2014 2014
FARIMINGTON, NIM 87401	3. Service 1006 S □ Priority Mail Express** □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	7014 1820 8001 7496 4820
	Return Receipt
PS Form 3811, July 2013 Domestic I	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X. MCU DIR CR. Addressee
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature  X. MCU DIRV Agent  B. Received by (Printed Name)  DUNGIG BITCH
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  Donald Sittin  D. Is delivery address different from item 1? Tyes
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. Moll Diff Capent  B. Received by (Printed Name)  DUNG ICE BITCH
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOHNSON, DONALD R	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  Donald Sittin  D. Is delivery address different from item 1? Tyes
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOHNSON, DONALD R PO BOX 2412	A. Signature  X. M.L. D. Agent  B. Received by (Printed Name)  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: 5. No
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOHNSON, DONALD R	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  Donald Sittin  D. Is delivery address different from item 1? Tyes
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOHNSON, DONALD R PO BOX 2412	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  Donald  Donald  Disagration  D. Is delivery address different from item 1? Tyes  If YES, enter delivery address below:  D. Service Type  Certified Mail®  Priority Mail Express®  Registered  Registered  Return Receipt for Merchandise

(Transfer from service label)
PS Form 3811, July 2013



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<b>~</b>	AZTEC, NM 87	<sup>7</sup> 410	
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY.
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	X Agent
<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from Item 1? Yes  If YES, antar delivery address below: No
JOHNSON, EVANGELINE R 15365 FIRETOWER'RD	ESS 8600
CONROE, TX 77306	
CONROL, 1277300	3. Service Type Certified Mail®
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)
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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.	B. Received by (Printed Name) C. Date of Delivery  ANCY ALEN 9-15-14
Article Addressed to: ;	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
JOHNSON, MARK	,
1216 WEST AZTEC	
BOULEVARD	3. Septice Type
AZTEC, NM 87410	☐ Certified Mail® ☐ Priority Mall Express®☐☐ Registered ☐ Return Receipt for Merchandise☐☐ Insured Mail ☐ Collect on Delivery
i .	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	1820 0001 7496 4783



U.S. Postal Service CERTIFIED MAIL Domestic Mail Only	
	ENCANA/BLANCO WASH
Postage  Certified Fee  Certified Fee  Endorsement Required  Restricted Delivery Fee  (Endorsement Required)	Postmark Here
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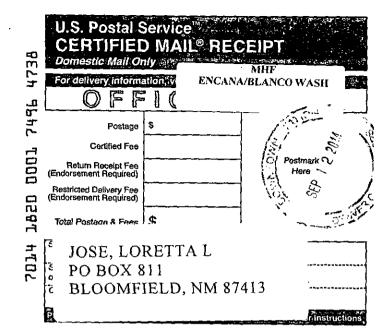
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 12  Q Yes
Article Addressed to:	D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:   No
JOHNSON, PHIL C/O FRANK F JOHNSON 15 ROAD 6115 KIRTLAND, NM 87417	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  A. Signature  A. Signature  D. Addressed  B. Received by (Printed Name)  D. Is delivery address different from item 19. Less.  If YES, enter delivery address below.
JOHNSON, RONDA J PO BOX 2412 KIRTEAND, NM 87417	3. Service Type  Certified Mail® Priority Mail Express®  Registered Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	114 1820 0001 7496 4769
PS Form 3811, July 2013 Domestic Ret	turn Receipt



5 4745	U.S. Postal Service CERTIFIED MAIL Domestic Mail Only	© REGEIPT:  MIIF ENCANA/BLANCO WASH
1620 0001 7496	Postage CO Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	Postmark Here
7014	JOSE, CLARIBE PO BOX 1392 BLOOMFIELD,	

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SENDER COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
The state of the s	A. Signature
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	X Marwith Jones - Agent - Addressee
so that we can return the card to you.  Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
or on the front if space permits.	Marretta Sons 9-17-2011
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
JONES, MARVETTA A	
- PO BOX 338	
PINEHILL, NM 87357	3. Service-Type
,	Certified Mail® D Priority Mail Express*
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mali ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014	1820 0001 7496 4752
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	A. Signature  X. Claubble for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X. Claubelle for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Clavibelle Toxe
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature  X. Clauble for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Carbelle Tose  D. Is delivery address different from item 1? Yes
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Claubelle for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Clavibelle Tox  D. Is delivery address different from item 1?   Yes
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X. Clauble for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Carbelle Tose  D. Is delivery address different from item 1? Yes
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>JOSE, CLARIBELLE</li> </ul>	A. Signature  X. Clauble for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Carbelle Tose  D. Is delivery address different from item 1? Yes
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOSE, CLARIBELLE PO BOX 1392	A. Signature  X. Clauble for Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Carbelle Tose  D. Is delivery address different from item 1? Yes
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>JOSE, CLARIBELLE</li> </ul>	A. Signature  X. Clauble
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOSE, CLARIBELLE PO BOX 1392	A. Signature  X. Clauble To Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery  Clavinelle To C  D. Is delivery address different from item 1? Yes  If YES, enter delivery address to live of No  3. Service Type
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOSE, CLARIBELLE PO BOX 1392	A. Signature  X. Clauble
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOSE, CLARIBELLE PO BOX 1392 BLOOMFIELD, NM 87413	A. Signature  X. Clauble   Agent   Addressee  B. Received by (Printed Name)   C. Date of Delivery  Clavibele   Sc.  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address to the print of the print
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOSE, CLARIBELLE PO BOX 1392 BLOOMFIELD, NM 87413	A. Signature  X. Clauble   Agent   Addressee   Address



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7014	F HCR 17 F	3OX 41	5			
[ C	CUBA, N	M 8701	3			
	re.	S - A SS OF BASE			r.lnstruc	tions?

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  JOSE, LORETTA L PO BOX 811 BLOOMFIELD, NM 87413	A. Signature  X. Agent  Addressee  B. Received by (Printer Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:  3. Service Type	
-··	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label) PS Form 3811, July 2013  Domestic Return	1820 0001 7496 4738	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X  Addressee  B. Received by (Printed Name)  C. Date of Delivery	
Attach this card to the back of the maliplece, or on the front if space permits.  1. Article Addressed to:  JOSE, STELLA HCR 17 BOX 415	D. Is delivery address different from item 1?	
CUBA, NM 87013	3. Service Type  Certified Maii  Registered  Registered  Collect on Delivery  4. Restricted Delivery? (Extra Fee)  Yes	
2. Article Number (Transfer from service label)	7014.1820:0001.74961:4721	





۲-	U.S. Postal Service" CERTIFIED MAIL Domestic Mail Only	RECEIPT
2024 4645 LOOO	For delivery information, vis  OFFOSTAGE  Postage  Certified Fee  Return Receipt Fee (Endorsement Required)	ENCANA/BLANCO WASH
1.620	Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	400
7014	KELLYWOOD, 1 PO BOX 2141 KIRTLAND, NM	

	Table 1
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  KELLYWOOD, HELENA L PO®BOX-3380	A. Signature  A. Signature  A. Signature  Andressee  An
SHIPROCK, NM 87420	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 (Transfer from service label)	1820 0001 7496 4714
PS Form 3811, July 2013 Domestic Retu	ım Receipt

SENDER: COMPLETE THIS SECTION:  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  X. Pass K. Manner A. Agent  Addressee
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.	B Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:  .KELLYWOOD, ROSE A PO BOX 2141	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
KIRTLAND, NM 87417	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
Article Number 7014 1.  (Transfer from service label)	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Ret	



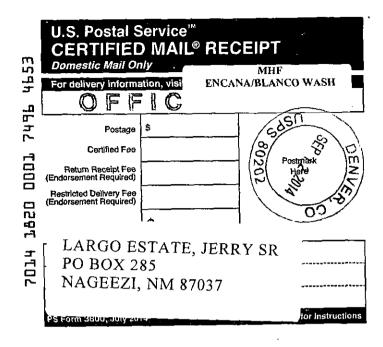
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7.	or PO FARMI	INGTON, NM	87401	
	PS Form 3800, July 20	14.	See Reverse for In	structions

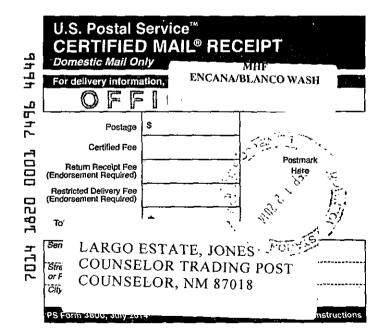
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON PELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Stricture  Agent  Addressee  C. Date of Delivery  Checker  Addressee
KINLICHEENIE, DARVA V 2011 TROY KING RD #444	D. Is to add a shape from item 1?  Yes enterway were address below:  No
FARMINGTON, NM 87401	3. Service Type  Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
2. Article Number (Transfer from service label) 7014	4. Restricted Delivery? (Extra Fee) ☐ Yes  1820 0001 7496 4684
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



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<b>L</b> ~	· ALBUQU	ERQUE, NM 87105
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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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?
KINLICHEENIE, JUDITH A	SEP 7
2614 EAST 20TH APT F-6	2014
FARMINGTON, NM 87401	3. Service Type  ☐ Certified (43) P ☐ Priority Mall Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 18 (Transfer from service label)	20 0003; 7496 4677
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  HLANO  Ageory  Addressee
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.	B. Received by (Printed Name) (C. Date of Delivery Fils Kalichem B. 15
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
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ALBUQUERQUE, NM 87105	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™
The state of the second control of the secon	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
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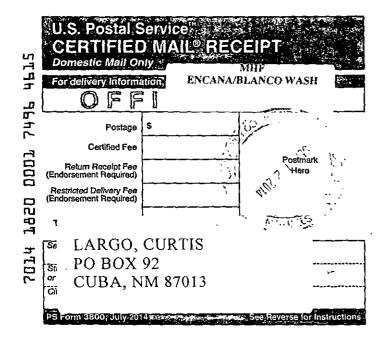


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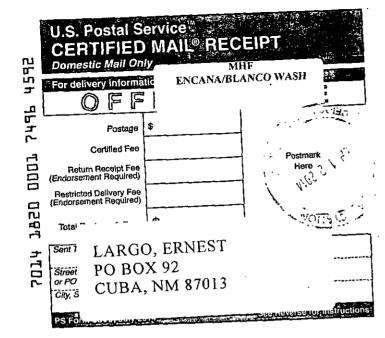
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CUBA, NM 87013	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 1 7014 18	20 0001 7496 4639
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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 mallpiece, or on the front if space permits.  Article Addressed to:	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  C. Date of Dalivery  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:
LARGO SR, TEDDY R PO BOX 904 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail® Priority Mall Express™ Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  Restricted Delivery? (Extra Fee) Yes
2. Article Number 7011	4 1820 0001 7496 4622
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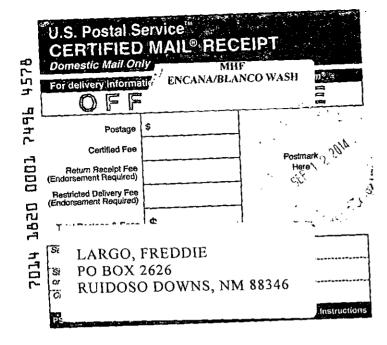
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<u> </u>	Sent LARGO	, DENNISON	
ት ፲ 🛮 ረ	Street POBOX	Č 92	************
٠.	City, CUBA,	NM 87013	***************************************
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■ Complete items 11,2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse	A. Signature  XCrut. Kury   Agent  Addresse
so that we can return the card to you.  Attach this card to the back of the mailplece, or on the front if space permits.	B. Repelved by (Printed Name) C. Date of Deliver 9-66-14
Article Addressed to:	D. Is delivery address different from item 1?
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LARGO, CURTIS PO BOX 92	
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	Restricted Delivery? (Extra Fee)  Yes
2. Article Number (Transfer from service label)	7014 1820 0001 7496 4615
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<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) C. Date of Deliver
1. Article Addressed to:  LARGO, DENNISON F	D. Is delivery address different from item 1?
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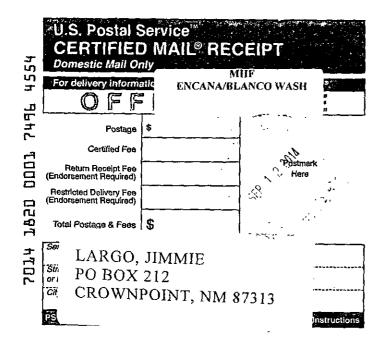
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1. Article Addressed to:  LARGO, ERNEST PO BOX 92		D. Is delivery address diffe If YES, enter delivery a	
CUBA, NM 87013	. <u>.</u>	☐ Registered ☐ ☐ Insured Maii ☐	Priority Mail Express* Return Receipt for Merchandise Collect on Delivery
D. A. Walla Marahara		4. Restricted Delivery? (E	xtra Fee) 🔲 Yes
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<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also item 4 if Restricted Delivery is d</li> <li>Print your name and address or so that we can return the card to the back of the control of the front if space pagings.</li> </ul>	o complete esired. the reverse o you.	A. Signature  B. Beceived by Frinted Na	Agent Addressee
or on the front if space permits.  1. Article Addressed to:  LARGO, ESTHER A PO BOX 4203 YAH TA HEY, NM 8	•		Plority Mail Express** Return Receipt for Merchandise Collect on Delivery
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Complete Items 1, 2, and 3, Also complete Items 4 if Restricted Delivery is desired.  Frint your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the malipiece, or on the front if space permits.  LARGO, FREDDIE PO BOX 2626 RUIDOSO DOWNS, NM 88346  LARGO, FREDDIE PO BOX 2610 RUIDOSO DOWNS, NM 88346  LARGO, FREDDIE PO BOX 2626 RUIDOSO DOWNS, NM 88346  Service Type Destricted Delivery Extra Fee)  LARGO, FREDDIE PO BOX 2626 RUIDOSO DOWNS, NM 88346  SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete Items 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  RUIDOSO DOWNS, NM 88346  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  RUIDOSO DOWNS, NM 88346  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  RUIDOSO DOWNS, NM 88346  RUIDOSO DOWNS, NM 88346  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  RUIDOSO DOWNS, NM 88346		
Certified Mail*   Priority Mail Express*   Registered   Resturn Receipt for Merchandise   Insured Mail   Collect on Delivery	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LARGO, FREDDIE  PO BOX 2626	A Signature  X Soldie Corp Addressee  B. Received by (Printed Name) Date of Delivery  Corp Addressee  D. Is delivery address different from item 1? Yes
2. Article Number  (Transfer from service label)  7014 1820 0001 7495 4578  PS Form 3811; July 2013  Domestic Return Receipt  Complete items 1, 2, and 3. Also complete items 4 if Restricted Delivery is desired.  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:  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  LARGO HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  Registered  Registered Registered Registered Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes  2. Article Number	RUIDOSO DOWNS, NM 88346	Certified Mail*
## Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ## 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:    LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346	· · · · · · · · · · · · · · · · · · ·	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  Article Number  Registered Restricted Delivery  A. Signature  X. Which are the secretion on perivery  A. Signature  X. Which are the secretion on perivery  A. Signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  C. Date of Delivery  The secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on perivery  A signature  X. Which are the secretion on the secretion on the secretion on the secretion on the secretion of the secretion on the secretion of the secretion on the secretion on the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion of the secretion		
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D. Is delivery address different from item 1? Yes  1. Article Addressed to:  LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  3. Service Type Certified Mall* Priority Mail Express* Registered Receipt for Merchandise Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> </ul>	A. Signature  X Wind Delivery  B. Regelved by (Printed Name)  C. Date of Delivery
LARGO, HAROLD PO BOX 83 RUIDOSO DOWNS, NM 88346  3. Service Type Certified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes	or on the front if space permits.	
Certified Mail*	LARGO, HAROLD PO BOX 83	
2. Article Number 7014 1820 0001 7496 4561	í.	☐ Certified Mall* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
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or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from from 1?   Yes  If YES, enter delivery address below:
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GROWNPOINT, NM 87313	3. Service Type Certified Mall* Priority Mall Express* Registered Return Receipt for Merchandise Insured Mail
. •	4. Restricted Delivery? (Extra Fee) Yes
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1. Article Addressed to:	D. Is delivery address different from item 1? D Yes  If YES, enter delivery address below: D No
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LARGO, JOANNE	10 50
PO BOX 6484 FARMINGTON, NM 87499	3. Service Type  Certified Mail® Prior Pri
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	City,	ALBUQU	JERQUE	E, NM 8	87108	***************************************
	PS Fc	<del>-</del>	·			structions

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LARGO, PAULINE T  PO BOX 141  CUBA, NM 87013	A. Signature  X. M. Addressee  B. Received by (Printed Name)   C. Date of Delivery  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*   Priority Mail Express**    Registered   Return Receipt for Merchandlse   Insured Mail*   Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	10 0001 7496 4530 ;
PS Form 3811, July 2013 Domestic Re	turn Receipt

See Francisco	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Agent  Addressee  D. Is delivery address different from item_1?    Yes
1. Article Addressed to:  LEARGO, SHEILA  1318 SAN PEDRO DRIVE SE,  APT. A	If YES, enter delivery address below:
ALBUQUERQUE, NM 87108	3. Service Type  Certifled Mail  Priority Mail Express  Registered  Return Receipt for Merchandise  Collect on Delivery  Restricted Delivery? (Extra Feel
2. Article Number (Transfer from service label)	1850 0001:3448:4253

PS Form 3811, July 2013

Domestic Return Receipt



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<b>!~</b>	BLOOM	FIELD,	NM 87	413	
	Œ.	4		See Reverse for Ins	tructions

2. Article Number

(Transfer from service label) PS Form 3811; July 2013

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY .
<ul> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee     B. Received by Printed Name   C. Date of Delivery     Community   C.   4
Article Addressed to:	D. Is delivery address different ft in item 1?  Yes  If YES, enter delivery address below:  No
LARGO, TOMMIE PO BOX 130	
NAGEEZI, NM 87037	3. Service Type  Certified Mail*  Priority Mail Express*  Registered  Return Receipt for Merchandise  Insured Mail  Collect on Delivery
•	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 11.7014 182  PS Form 3811, July 2013 Domestic Re	0 0001/7496 4516///
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.  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  A Signature  B. Received by (Printed Name)  D. Is delivery address different from item 1?
LARVINGO, EDDIE PO BOX 811	If YES, enter delivery address below:
BLOOMFIELD, NM 87413	3. Service-Type  - Certified Mail® Priority Mail Express™  D Registered Preturn Receipt for Merchandise

Insured Mail

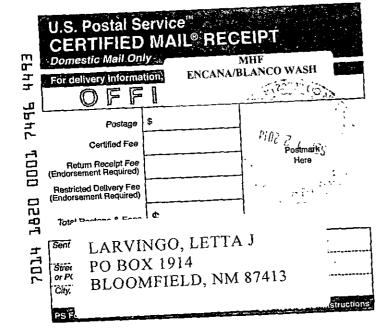
Domestic Return Receipt

4. Restricted Delivery? (Extra Fee)

7014 1820 0001 7496 4509

☐ Collect on Delivery

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	Se LARVIN	GO, NELLIE F	
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-را	or. BLOOMFIELD, NM 87413		
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SENDER: COMPLETE THIS SECTION :	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X
LARVINGO, LETTA J PO BOX 1914	
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
•	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 1820	0001 7496 4493
PS Form 3811 July 2013 Domestic Bet	um Peneint

■ Complete items 1, 2, and 3. A item 4 if Restricted Delivery is ■ Print your name and address so that we can return the can Attach this card to the back or on the front if space permit  1. Article Addressed to:  LARVINGO, NELL PO BOX 811	Also complete s desired. on the reverse d to you. of the mailplects.	į,	A. Signature  Norce  B. Received  D. Is delivery	by (Printer of address of	d Name)  103e  different from itely address belo	C. Date of	gent ddressee f Delivery B ·/ C
BLOOMFIELD, NN	1 87413	ı	3. Service T  Certiff  Regist  Insure	ed Mail* tered	☐ Priority Mai ☐ Return Rec ☐ Collect on I	elpt for Men	chandise
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U.S. Postal Service™
CERTIFIED MAIL® RECEIPT Domestic Mail Only MHF ENCANA/BLANCO WASH For delivery information, OF 7496 Postage Certifled Fee Postm**£**‰ Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 1820 LARVINGO, RAYMOND 7014 PO BOX 2026 BLOOMFIELD, NM 87413 see Reverse for Instructions

7 H H P S	U.S. Postal Service TO CERTIFIED MAIL® RECEIPT  Domestic Mail Only
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	LARVINGO, ROBERTA
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1-	BLOOMINGTON, MN 55425
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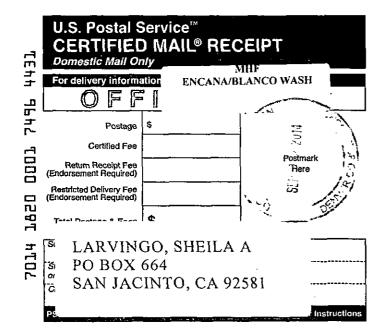
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY			
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Columbia Colombia  B. Received by (Printed Name).  C. Date of Delivery  Wesley White 9 16/14  D. Is delivery address different from item 1?			
Article Addressed to:	If YES, enter delivery address below:			
/				
LARVINGO, RAYMOND PO BOX 2026				
BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery			
	4. Restricted Delivery? (Extra Fee)			
2. Article Number (Transfer from service label) 7014 1820 0001 7496 4479 PS Form 3811, July 2013 Domestic Return Receipt				
	The state of the s			
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  P. C.D. Date of Delivery  P. C.D. Printed Name  9-18-14			
1. Article Addressed to:  LARVINGO, ROBERTA	D. is delivery address different from item 1?   If YES, enter delivery address below:   No			
1900 E 86TH ST APT 224	L			
BLOOMINGTON, MN 55425	3. Septce Type  Certified Mail* Priority Mall Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)			
2. Article Number .				
(Transfer from service label) 7014 18	320 0001 7496 4462			

Domestic Return Receipt



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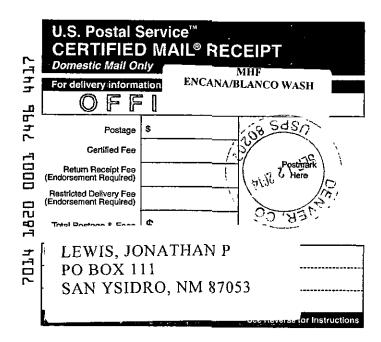
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  Agent  Addressee			
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Begelved by (Runted Name) C. Date of Delivery KODErta Lamin, 9-18-14			
Article Addressed to:	D. Is delivery address different from ten 1?			
EARVINGO, ROSETTA M				
BLOOMINGTON, MN 55425	<u> </u>			
BEOOMINGTON, MIN 33423	3. Service Type  ☐ Certified Mail ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery			
,	4. Restricted Delivery? (Extra Fee)			
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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.	B. Received by Printed Name C. Date of Delivery			
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes   If YES, enter delivery address below: ☐ No			
LARVINGO, ROY PO BOX 1241	,			
BLOOMFIELD, NM 87413	3. Service Type			
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery			
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Ä	HCR 63 BOX 347	
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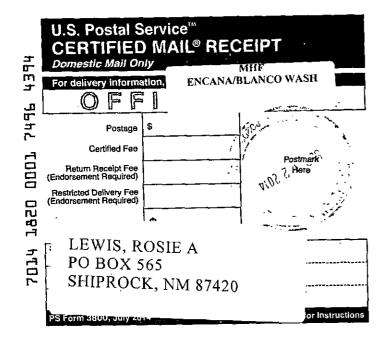
## RETURN

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the revel so that we can return the card to you.</li> <li>Attach this card to the back of the mailpine.</li> </ul>	rse X Muscultable Daddressee
or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
LEE, PRISCILLA HCR 63 BOX 347	
WINSLOW, AZ 86047	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label)	7014 1820 0001 7496 4424
PS Form 3811, July 2013 Do	omestic Return Receipt



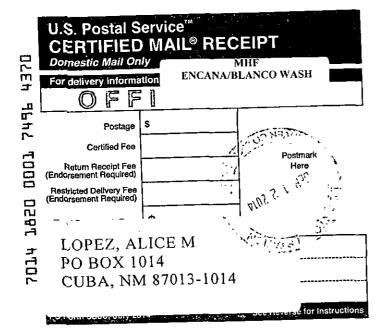
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	LEWIS, LEONA M	
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7	FARMINGTON, NM 87401	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery
1. Article Addressed to:  LEWIS, LEONA M	If YES, enter delivery address below:
1214 RANDOLPH AV	,
FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 (Transfer from service label)	1820 0001 7496 4400
PS Form 3811, July 2013 Domestic Retu	ım Receipt



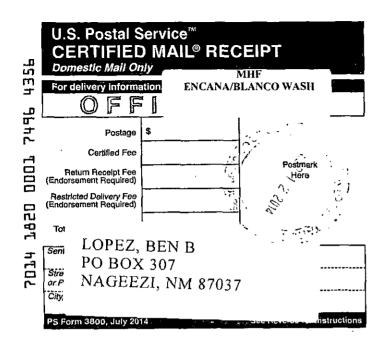
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SENDER: COMPLETE THIS SECTION	COMPLETE, THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Roull Seun D. Addressee  B. Received by (Printed Name)  C. Date of Delivery,  Posi & A. Cowis  C. Date of Delivery,
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
LEWIS, ROSIE A PO BOX 565 SHIPROCK, NM 87420	3. Service Type - □ Certified Mail® □ Priority Mail Express™
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  C. Date of Delivery
<ul> <li>Attach this card to the back of the mailpiece,</li> <li>or on the front if space permits,</li> </ul>	D. Is delivery address different from item 1? Yes
Article Addressed to:	TED. IS Delivery appress different from Item 17 L.1 Yes
	If YES, enter delivery address below:   No
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Lappy Strong C. Date of Delivery  Leng Lopez 9/15/14
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
LOPEZ, ALICE M PO BOX 1014 CUBA, NM 87013-1014	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™
1	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
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	Towns Co.
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  X A Gent  Addressee
so that we can return the card to you.  Attach this card to the back of the mailplece, or on the front if space permits.	B. Received by (Printed Name)  C. Date of Delivery
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LOPEZ, ALVIN 16452 W BUCHANAN ST	
GOODYEAR, AZ 85338-2564	3. Service Type  ☐ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
1	☐ Insured Mail ☐ Collect on Delivery



REturn

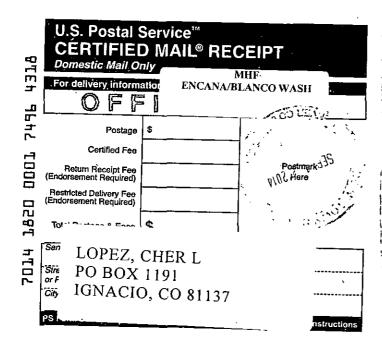
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<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. La La La Cara Addressee  B. Received by (Printed Name)  Date of Delivery  C. Is delivery address different from item 12  Yes
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
LOPEZ, BESSIE PO BOX 791	
CUBA, NM 87013	3. Septice Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number [7014] [1	820 (0001) 2448 (4349
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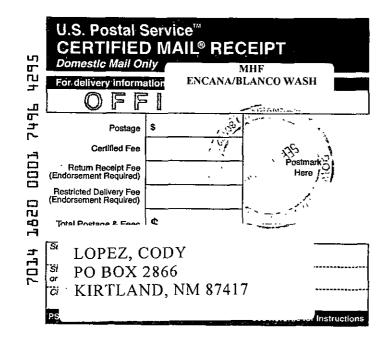






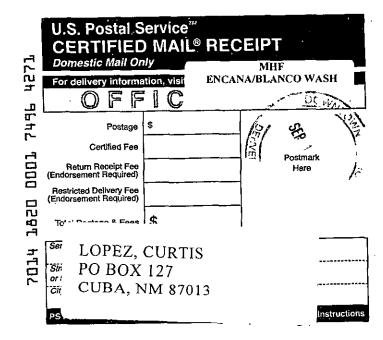
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1 7496	Postage \$ Certified Fee	
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	FARMINGTON, NM 87401	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. Agent
Article Addressed to:     . !!-	D. Is delivery address different from item 1? Li Yes If YES, enter delivery address below: Di No
LÖREZ, CHER L PO BOX 1191	
IGNACIO, CO 81137	3. Service Type  ☐ Certifled Mall* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail
•	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	1820 0001 7496 4318
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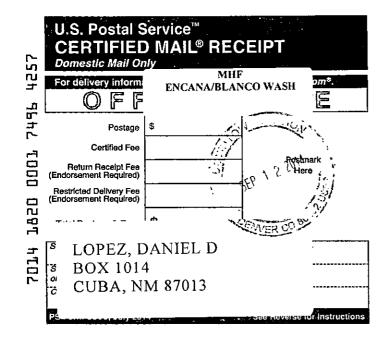
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COMPLETE THIS SECTION ON DELIVERY
A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
D. Is delivery address different from item 1? Yes  If YES, enter delivery address below: No
3. Service-Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee)
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A. Signature  X
3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee)
4 1820'0001 7496 4271

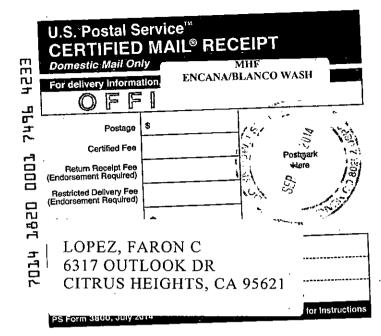
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:  LOPEZ, DANIEL  PO BOX 6051	D. Is delivery address different from item 1? Yes If YES, enter delivery address Behavior No
FARMINGTON, NM.87499	3. Service Type  Certified Mail* Registered Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
Article Number  (Transfer from service label)	7014 1820 0001 7496 4264



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<b>L</b> ~	or Pi City, CUBA, I	NM 87013	,.
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. O. D. S. delivery address different from item 17. Yes
1. Article Addressed to:  LOPEZ, DANIEL D  BOX 1014	D. Is delivery address different from item 1? U Yes  If YES, enter delivery address below: U No
CUBA, NM 87013	3. Service Type ☐ Certified Mali® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	1820 0001 7496 4257
PS Form 3811, July 2013 Domestic Rete	ırn Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>LOPEZ, EDDIE</li> <li>P.O. BOX 1097</li> <li>CUBA, NM 87013</li> </ul>	A. Signature  X. Schold Juffs
· <u></u>	☐ Certified Mail* ☐ Priority Mall Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	14 1820 0001 7496 4240
PS Form 3811, July 2013 Domestic Re	turn Receipt



56	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT  Domestic Mail Only MHF
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	LOPEZ, GINO
7	PO BOX 1253
707	or. TEEC NOS POS, AZ 86514
	PS Form 3800, July 2014 See Reverse for Instructions

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item ⅓ if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	If YES, enter delivery address below:
LOPEZ, FARON C 6317 OUTLOOK DR	
CITRUS HEIGHTS, CA 95621	3. Service Type  ☑ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, July 2013 Domestic Re	turn Receipt
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	A. Signature  A. Agent  Addresses
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.	B. Received by (Printed Name)  C. Date of Deliver  D. Is delivery address different from Item 1?   Yes
** * * * * * * * * * * * * * * * * * *	MANOR AND AND MARKET MANAGEMENT OF MA
, CDIG CDIO	If YES, enter delivery address below:   No
LOPEZ, GINO PO BOX 1253	If YES, enter delivery address below: ☐ No

☐ Return Receipt for Merchandlse

☐ Yes

☐ Collect on Delivery

☐ Registered

2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

☐ Insured Mail

4. Restricted Delivery? (Extra Fee)

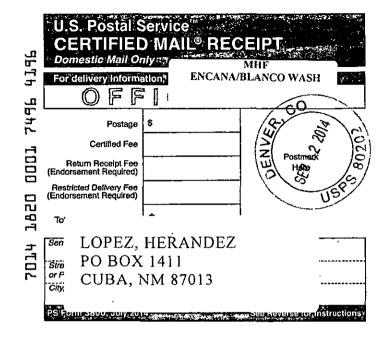
7014 1820 0001 7496 4226

## U.S. Postal Service™ CERTIFIED MAIL® RECEIPT 4219 Domestic Mail Only ENCANA/BLANCO WASH For delivery information 7496 Postage ZER, Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1,820 To LOPEZ, HARRISON Sen 7074 PO BOX 22 Stre or F BLOOMFIELD, NM 87413 City PS Form 3800; July 2014 - 4 - 4 - 4 - 4 - 4 - 4

420S	U.S. Postal S CERTIFIED Domestic Mail Or	) MAIL® REC	MHF
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	PS Form 3800; July 20	114g w + 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	See Reverse for Instructions

SENDER: COMPLETE THIS SECTION.	COMPLETE THIS SECTION ON DELIVERY
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	*Helen Legg   Agent   Addressee
so that we can return the card to you.  Attach this card to the back of the mailplece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery Helen Lopez 9-16-14
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
LOPEZ, HARRISON PO BOX 22	
BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mali ☐ Priority Mail Express ☐ Registered ☐ Return Receipt for Merchandise
·	☐ Insured Mail ☐ Collect on Delivery
O Andreia Alicenter	4. Restricted Delivery? (Extra Fee)
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	A. Signature  A. Signature  B. Received by (Printed Name)
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>LOPEZ, HELEN C</li> </ul>	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>LOPEZ, HELEN C</li> <li>PO BOX 1253</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addressee  B. Received by (Printed Name)  C. Date of Delivery
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>LOPEZ, HELEN C</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>LOPEZ, HELEN C</li> <li>PO BOX 1253</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  1/8/4  D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No  3. Service Type  ☐ Certified Mail® ☐ Priority Mall Express™  ☐ Registered ☐ Return Receipt for Merchandise

Domestic Return Receipt



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40 디	
نا	LOPEZ, HOLLY G
7,	PO BOX 1253
ספער אתמל	TEEC NOS POS, AZ 86514
	PS Form 3800, July 2014 See Reverse for Instructions

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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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
LOPEZ, HERANDEZ PO BOX 1411 CUBA, NM 87013	3. Service Type  ☐ Certified Mall® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, July 2013 Domestic Re	complete this section on delivery
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
LOPEZ, HOLLY G PO BOX 1253 TEEC NOS POS, AZ 86514	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	4. Restricted Delivery? (Extra Fee) ☐ Yes   20 0001 7495 4189
PS Form 3811, July 2013 Domestic Retu	urn Receipt

MHF 7 For delivery information, ENCANA/BLANCO WASH FF 7496 **Postage** Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1.820 LOPEZ, IRENE S ንዐጌዛ PO BOX 107 NAGEEZI, NM 87037

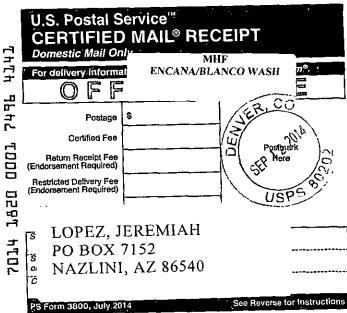
PS Form 3800, July 2014

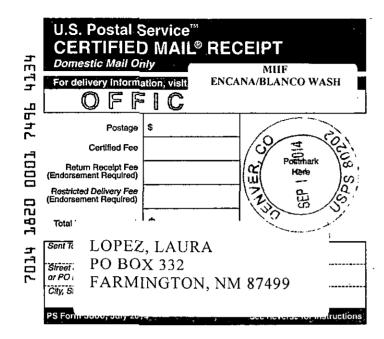
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1	city, si	
	PS Form 3800 July 2014 Photogram See Reverse form	erructions

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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Printiyour 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  A. Signature  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Sisceived by (Printech Vame)  A. C. Date of Delivery  AND Is delivery address different from item 1?
1. Article Addressed to:	If YES, enter delivery address below:   No
LOPEZ, IRENE S PO BOX 107	
NAGEEZI, NM 87037	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	1820 0001 7496 4172 eturn Receipt
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
LOPEZ, JACQUELINE D PO BOX 2776 KIRTLAND, NM 87417	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
\$ 147. San 19.	☐ Insured Mall ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
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Domestic Return Receipt

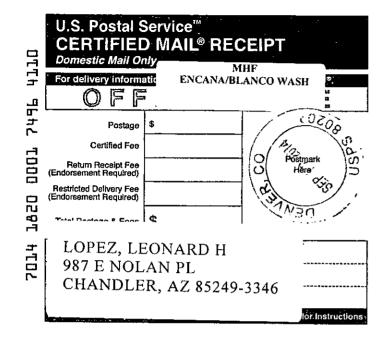






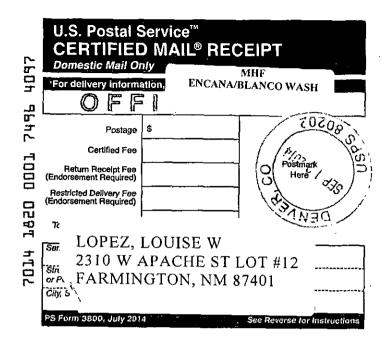
~	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® RECE	
0001 7496 4127	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	IV.	Postmark Here VO
7014 1820	LOPEZ, LE PO BOX 1 I CUBA, NM	95 87013-1195	for instructions

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LOPEZ, LENA PO BOX 1195	A. Signature  X COMPLETE THIS SECTION ON DELIVERY.  A. Signature  X COMPLETE THIS SECTION ON DELIVERY.  Addressee  B. Received by (Printed Name)  C. Date of Delivery,  Leng DDC 92314  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
CUBA, NM 87013-1195	3: Service Type Certified Mall* Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number, (Transfer from service label) PS Form 3811, July 2013 Domestic Retr	um Receipt



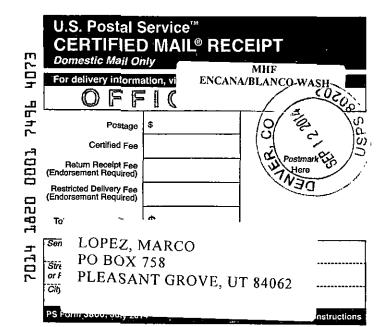
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  Printed Name  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:
LOPEZ, LEONARD H 987 E NOLAN PL CHANDLER, AZ 85249-3346	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.	A. Signature  A. Received by (Printed Nanty)  C. Date of Delivery
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
LOPEZ, LORENZO PO BOX 1295	
CUBA, NM 87013	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes



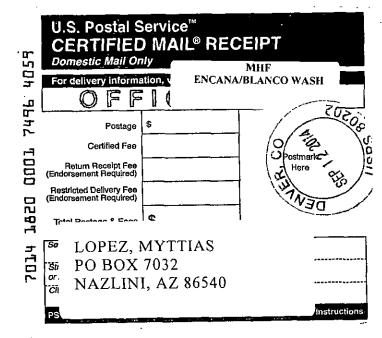
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY:
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LOPEZ, LOUISE W 2310 W APACHE ST LOT #12	D. Is delivery address different from from 1? Yes If YES, enter delivery address below.
FARMINGTON, NM 87401	3. Service Type  ☐ Certified Mail* ☐ Registered ☐ Insured Mail* ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 4097
PS Form 3811, July 2013 Domestic Ret	urn Receipt



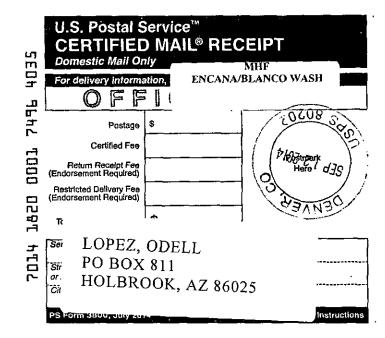
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<u> </u>	PO BOX 883	1
7014	CUBA, NM 87013	1
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	PS Form 3800, July 2014 See Reverse for Instructions	

<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>POBOX 758</li> <li>PLEASANT GROVE, UT 84062</li> </ul>	A. Signatur  A. Signatur  A. Signatur  A. Signatur  A. Signatur  A. Signatur  A. 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  Certified Mail  Priority Mail Express  Registered  Resturn Receipt for Merchandise  Insured Mail  Collect on Delivery  4. Restricted Delivery? (Extra Fee)  Yes
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>LOPEZ, MARIE PO BOX 883</li> </ul>	A. Signature  X. J. L. L. Agent  D. Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Yes
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> LOPEZ, MARIE	A. Signature  X
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>LOPEZ, MARIE</li> <li>PO BOX 883</li> <li>CUBA, NM 87013</li> </ul> </li> </ul>	A. Signature    Agent   Addressee     Addressee   Addressee     B. Received by (Printed Name)   C. Date of Delivery     G. Dat
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>LOPEZ, MARIE PO BOX 883</li> </ul>	A. Signature  X



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1-	° NAGEEZI	, NM 87037		
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SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Becelved by (Printech Arme)  Addressee  C. Date of Delivery  Arthur Marker  D. Is delivery address different from item 1?   Yes
LOPEZ, NELSON PO BOX 107 NAGEEZI, NM 87037	If YES, enter delivery address below: ☐ No  3. Service Type
	☐ Certifled Mail® ☐ Priority Mail Express®. ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 16	120 0001 744P 404S
PS Form 3811, July 2013 Domestic Ret	urn Receipt



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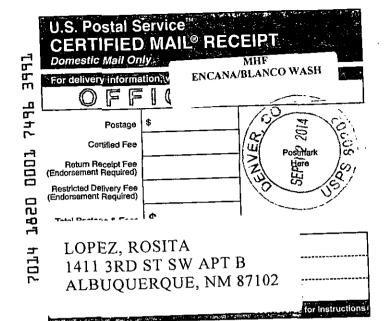
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature Agent  X Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
LOPEZ, ODELL PO BOX 811	
HOLBROOK, AZ 86025	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
•	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014	1820 0001 7496 4035
PS Form 3811, July 2013 Domestic Retu	ım Receipt

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	Restricted Delivery Fee (Endorsement Required)		1/3/
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	rs LOPEZ, F	RITA	
7034	g PO BOX	1544	***************************************
7	CUBA, N	M 87013	
	PS Form 3800, July 201	4	See Reverse for Instructions

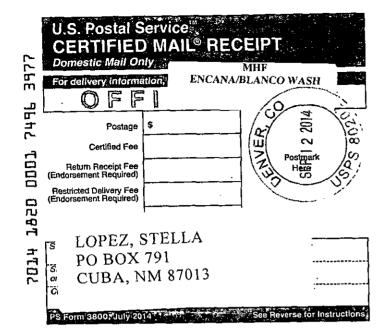
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Agent  Addressee  C. Date of Delivery  Agent  Agent  Addressee
Article Addressed to:  LOPEZ, RITA	D. Is delivery address different from item 1? ☐ Yes '  If YES, enter delivery address below: ☐ No
PO BOX 1544	
CUBA, NM 87013	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	1820 0001 7496 4004
PS Form 3811, July 2013 Domestic Ret	um Receipt



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7014	PO BOX			
<b>L</b> ~	FINON,	AZ 86510	<u> </u>	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  A Agent  A Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. 15 delivery address different from item 1?  Yes
Article Addressed to:	D. 1s delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
LOPEZ, ROSITA 1411 3RD ST SW APT B	
ALBUQUERQUE, NM 87102	3. Service Type ☐ Certified Mali® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 701	4 1820 0001 7496 3991
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LOPEZ, SHERRI L PO BOX 251 PINON, AZ 86510	A. Signature  X
	☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 701  Transfer from service labeli	

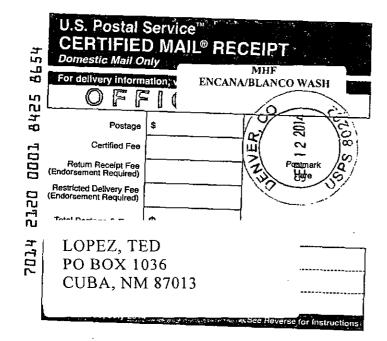
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PS Form 3811, July 2013



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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY			
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Rule Love   Agent   Addressee  B. Received by (Printed Name)   Date of Delivery  Rule Love   Addressee			
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No			
LOPEZ, STELLA PO BOX 791 CUBA, NM 87013	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery			
	4. Restricted Delivery? (Extra Fee)			
2. Article Number 7014 1820 0001 7,495 3977 (Transfer from service label)				
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY  A. Signature			
<ul> <li>item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	Agent Addressee  By Received by (Panted Name)  C. Date of Delivery  KANDACEBARL Logez 9-110-14			
1. Article Addressed to:  LOPEZ, STEWART  6208 KEARNEY TRAIL NW	D. is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No			
ALBUQUERQUE, NM 87120	3. Service Type  ☐ Certified Mail® ☐ Registered ☐ Insured Mail ☐ Collect on Delivery			
2. Article Number	4. Restricted Delivery? (Extra Fee) Yes			
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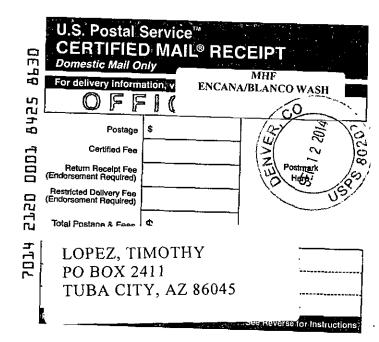
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. J. C. J. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addressee  C. Date of Delivery  D. Is delivery address different from Item 17 1 Yes
1. Article Addressed to:	If YES, enter delivery address below:
LOPEZ, TED PO BOX 1036	
CUBA, NM 87013	3. Service-Type ☐ Certified Mall® ☐ Priority Mall Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7 1 1 4 (Transfer from service label)	2120 0001 8425 8654
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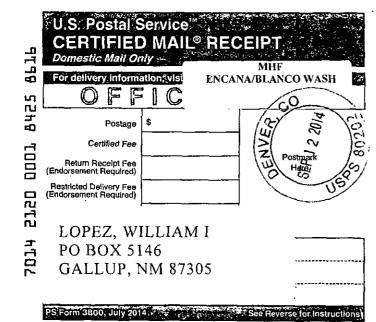
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIV	ERY
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	Teddy Lopez	☐ Agent☐ Addressed
LOPEZ, TEDDY PO BOX 386	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No	
NAGEEZI, NM 87037	3. Service Type  Certified Mali  Priority Mail E  Registered  Return Receip	•
	☐ Insured Mail ☐ Collect on Del 4. Restricted Delivery? (Extra Fee)	lvery 🗀 Yes



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L-	or PC City,	BLUE C	GAP, AZ	Z 8652	0 ,	
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■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  LOPEZ, TIMOTHY PO BOX 2411 TUBA CITY, AZ 86045	A. Signature  A. Signature  A. Signature  A. Signature  B. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address body:  3. Service Type  — Certified Mall*  Priority Mail Express*
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	4 2120 0001 8425 8630 -
	Alerha Comment
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY (1)
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A Signature Agent Agent Addressee
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.	B. Received by (Printed Name)  C. Date of Delivery  9/18/14  D. Is delivery address different from item 12 Yes
Article Addressed to:     .	D. Iš deļivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
LOPEZ, VICTORIA PO BOX 4412	
BLUE GAP, AZ 86520	3. Service Type
The second secon	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	☐ Registered ☐ Return Receipt for Merchandise



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급사단	Postage \$	
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2750		
=	LOPEZ, WILSON	
7034	PO BOX 1157	
~	CHURCH ROCK, NM 8	7311
	PS Form 3800, July 2014 224 3.	See Reverse to that

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  LOPEZ, WILLIAM I PO BOX 5146	B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  If YES, enter delivery address below:
GALLUP, NM 87305	3. Service Type  Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number, (Transfer from service label)	21/20 ' 0001' '8425' '8616
PS Form 3811, July 2013 Domestic Re	turn Receipt

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SENDER:,COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A.
Article Addressed to:	D. Is delivery address different from item 17 Yes If YES, enter delivery address below:
LOPEZ, WILSON PO BOX 1157	(4)
CHURCH ROCK, NM 87311	3. Service Type  Certified Mail®
	4. Restricted Delivery? (Extra Fee)
2. Article Number, (Transfer from service label)	4,5150,0001,8452,8803
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



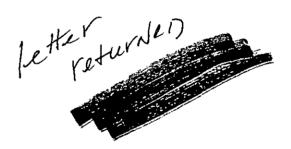
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7	ALBUQUERQUE, NM 87108	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent  Addresse  B. Received by (Printed Name)  C. Date of Deliver  4-16-41  D. Is delivery address different from Item 12  Yes
Article Addressed to:	D. Is delivery address different from Item 1? ☐ Yes If YES, enter delivery address below: ☐ No
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LOPEZ, YAZZIE	
PO BOX 1057	
CUBA, NM 87013	3. Service-Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
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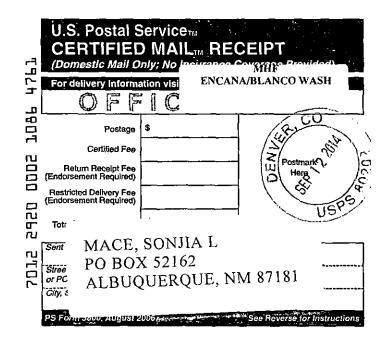


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>MACE, LENORA K</li> <li>BOX 1688</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  LENUKA Marce  9/23/14  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
CUBA, NM 87013	3. Service Type Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. 'Article Number (Transfer from service label) 7 [	112 2920 0002 1086 4792
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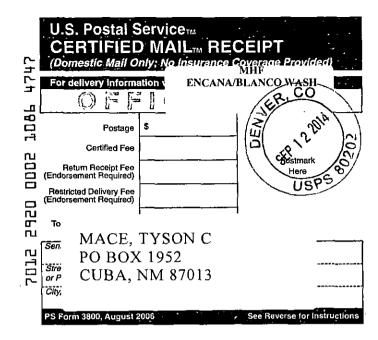
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<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>MACE, SONJIA L PG BOX 52162 AEBUQUER OTHER M. 87181</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. St. Date of Delivery  C. Date of Delivery  D. St.		
SEP 1 7 2014 E	☐ Certified Mall® ☐ Priority Mail Express ☐ Registered ☐ Return Receipt for Merchandise ☐ insured Mail ☐ Collect on Delivery		
	4. Restricted Delivery? (Extra Fee)		
2. Article Number (Transfer from service label) 5 p 5  PS Form 3811, July 2013  Comestic Return Receipt			
SENDER: COMPLETE THIS SECTION	¿COMPLETE THIS SECTION ON DELIVERY VX		
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X W GAME  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addresse		
1. Article Addressed to:  MACE, TAITUM T  3 13 PENNSYLVANIA ST NE APT C	D. Is delivery address different from item 197		
ALBUQUERQUE, NM 87108	3. Service Type  ☐ Certified Mali ☐ Priority Mali Express ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mali ☐ Collect on Delivery		
	4. Restricted Delivery? (Extra Fee)		
2. Article Number	aller belle .		

(Transfer from service label)
PS Form 3811, July 2013



, 473D	U.S. Postal S CERTIFIED (Domestic Mail O	MAILTH REC	DEIPT MHF CON Provided) BLANCO WASH
2920 0002 1086	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees	\$	Postmark Here USPS
ה בנור	S PO BOX	RD, RUTH 1251 FIELD, NM 87	7413

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  MAGGARD, RUTH PO BOX 1251	A. Signature  X. Corp.	
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)	
Article Number     (Transfer from service label)	7012 2920 0002 1086 4730	
PS Form 3811, July 2013 Domestic Return Receipt		



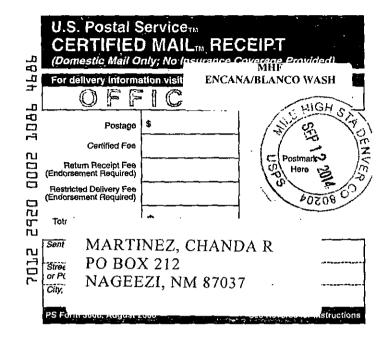
<b>ዛ</b> 7 ጊዜ	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL RECEIPT
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0005	Return Receipt Fee (Endorsement Required)	Here Q
	Restricted Delivery Fee (Endorsement Required)	18 36
2920	Total Poetana & Faae	¢
	Se MANUE	L, LORRAINE L
7	F PO BOX	332
7012	1 '	GTON, NM 87499
	PS	Instructions

	TAK
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY?
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailplece, or on the front if space permits.</li> </ul>	A. Signature  X. Mahl
, 1. Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address pelow:
MAKIL, SARAH V 918 E MCDOWELL RD	A CALOR OI ASS
MESA, AZ 85203	3. Service Type  Certified Mail Shority Mail Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
The second secon	4. Restricted Delivery? (Extra Fee)   Yes
2. Article Number (Transfer from service label) 7012 2	920 0002 1086 4723
PS Form 3811, July 2013 Domestic Ret	urn Receipt



93	U.S. Postal Service MAIL RECEIPT  (Domestic Mail Only; No Insurance Coverage Provide	4)
	For delivery information ENCANA/BLANCO WASH	<u> Lang</u>
7	OFFI	
J.086	Postage \$	STA.
	Certified Fee Postmark	18
2000	Return Receipt Fee (Endorsement Required)	DENVER
	Restricted Delivery Fee (Endorsement Required)	
2920	(Endorsement Required)	
'n	MARTINEZ, CALBERT -	<del></del> :
гu	PO BOX 397	)
7012	or F NAGEEZI, NM 87037	/
B.	City	ë salari
	PS Farm 3800, August 2006 See Reverse for In	structions

	·
SENDER: COMPLETE THIS SECTION:	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	Agent Addressee  Received by (Parties) Name)  C. Date of Delivery
1: Article Addressed to:  MARTINEZ SR, FRED C 4633 GILA #30	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No  No
FARMINGTON, NM 87402	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7012	2920 0002 1086 4709
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY  A/ Signature /
<ul> <li>item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	X Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. 72 (4) Park Work  C-17 14
Article Addressed to:	
	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No
MARTINEZ, CALBERT PO BOX 397	
MARTINEZ, CALBERT PO BOX 397 NAGEEZI, NM 87037	
PO BOX 397	If YES, enter delivery address below: ☐ No  3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
PO BOX 397	If YES, enter delivery address below: □ No  3. Service Type □ Certified Mail* □ Priority Mail Express** □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery



79	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL. REC	CEIPT	
784 4801 5000 05P5 5107	Postage Certified Fee Refum Receipt Fee (Endorsement Required) Restricted Delivery Fes (Endorsement Required)  Total Control  S MARTIN S PO BOX	EZ, CUSTER	A/BLANCO WAS	C. F. O.
		OUNT THE RESERVE	See Reverse for i	nstructions

	į.		
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A Signature  A Signature  A Signature  A Addressee  B. Received by (Printed Name)  C. Date of Delivery  HANDA Matine 7 19 49  D. Is delivery address different from item 17 49  If YES, enter delivery address below:  No		
MARTINEZ, CHANDA R PO BOX 212 NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number			
(Transfer from service label) 7012 2	450 0005 JO86 4686		
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X. A. Signature  X. A.		
MARTINEZ, CUSTER PO BOX 97 FINLEY, OK 74543	If YES, enter delivery address below:    If YES, enter delivery address below:   Insured Mail   Collect on Delivery   Yes   Insured Delivery? (Extra Fee)   Yes	2. Article Number	
(Transfer from service label) 7012 292	0 0002 1086 4679		
PS Form 3811, July 2013 Domestic Retu	m Receipt		



Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) To' To' Sen MARTINEZ, HAROLD A Sire PO BOX 80882 Or F ALBUQUERQUE, NM 87198	6 4655	U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No MITE For delivery information vis ENCANA/BLANCO WA	SH
	2920 000	Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) To'  Sen MARTINEZ, HAROLD A Stre PO BOX 80882 or F ALBUOUER OUE NIM 87108	



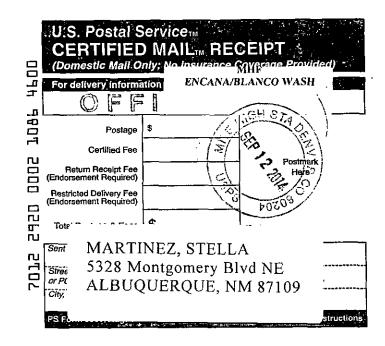
4631	U.S. Postal S CERTIFIED (Domestic Mail O	O MAIL™ RECEIPT Inly; No Insurance Coverage Prov	
<b>-</b>	OFE	ENCANA/BLANCO WA	311
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0005	Return Receipt Fee (Endorsement Required)	Postma GCO 1 Here	114 (g)
	Restricted Delivery Fee (Endorsement Required)	113	/\$/ _
김임	Total Postage & Fees	\$ USP	
7012	Str	IEZ, LORETTA	
7	or, CR 6402		
1	KIRTLA	ND, NM 87417	
	PS	_	nstructions

<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also completem 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reso that we can return the card to you.</li> <li>Attach this card to the back of the mail or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  A. Signature  A. Agent  Addresse  B. Received by (Printed Marge)  C. Date of Delivery
MARTINEZ, LORETTA CR 6402 # 31 KIRTLAND, NM 87417	3. Service Type  Certified Mail* Priority Mall Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
Article Number     (Transfer from service label)	7015 5920 0002 1086 4631
PS Form 3811, July 2013	Domestic Return Receipt



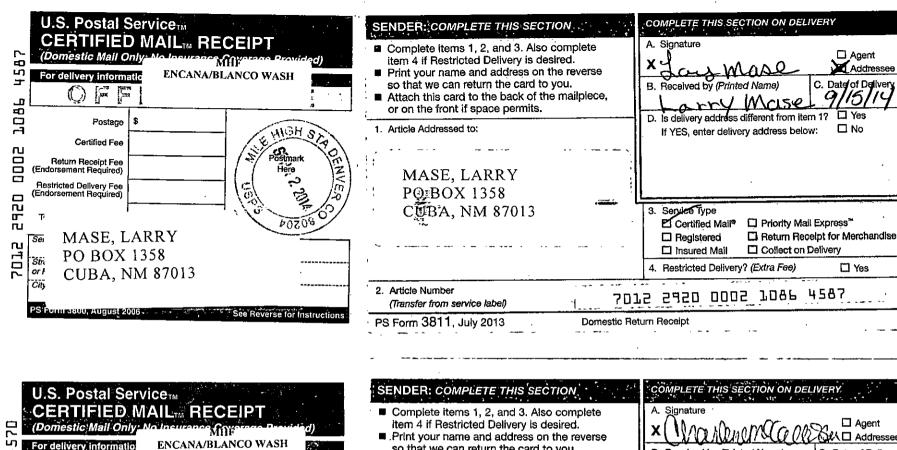
7.7	U.S. Postal S CERTIFIE! (Domestic Mail O	D MAIL™ RECEIPT	(Ided)
1086 46	For delivery information		VASH
0 000s	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	Rostma From	/3/
7012 292	Stree 38455 N	NEZ, PAULA A I SHERATON #774 PARK, IL 60087	structions

SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  MARTINEZ, MAXINE A PO BOX 56	A. Signature  X. M. W. W. M. M. Marrier  B. Received by (Printed Name)  C. Date of Delivery  MAXINE Martinez 7-16-014  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:	
NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label) 7.012 2920 0002 1086 4624		
PS Form 3811, July 2013 Domestic Return Receipt		



CERTIFII  (Domestic Mail  For delivery Into	EMCLERA	CEIPT MHF BLANCO WASH
肾。 PO BOX	CALVIN	Postmark Here? POZO3
PS Form 3800, Augus	1 2006	See Reverse for Instructions

	!
SENDER: COMPLETE THIS SECTION Section	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	Addressee
Attach this card to the back of the mailpiece,	B. Received by (Printed Name)  C. Date of Delivery  GC7 G/11/19m5  7/17/14
or on the front if space permits.	D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:   No
the second second	
" TIMEZ căinx -	
TINEZ, SFELLA	
5328 Montgomery Blvd NE	3. Service Type
ALBUQUERQUE, NM 87109	. ☐ Certified Mail® ☐ Priority Mall Express™
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	☐ Registered ☐ Return Receipt for Merchandise
A Community of the work of the work of the second of the s	☐ Insured Mail ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label)     7012	5450 0005 708P APOO ,
PS Form 3811, July 2013 Domestic Ret	urn Receipt
*	المناسب الماران المعاملين المحام في المستقل ال
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X M a C as lette Addressee
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece,	Mar Castillo 9 6.14
or on the front if space permits.	D. Is delivery address different from Item 1? ☐ Yes
Article Addressed to:	If YES, enter delivery address below:   No
TALSE CALVE	
MASE, CALVIN	
PO BOX 543	
CUBA, NM 87013	3. Service Type
1	I S. Service IVDe
	Certified Mall® ☐ Priority Mall Express™
\	☐ Certified Mall® ☐ Priority Mali Express™ ☐ Registered ☐ Return Receipt for Merchandise
· · · · · · · · · · · · · · · · · · ·	☐ Certified Mall® ☐ Priority Mali Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	☐ Certified Mall® ☐ Priority Mali Express™ ☐ Registered ☐ Return Receipt for Merchandise



U.S. Postal Service <sub>TM</sub> CERTIFIED MAILT RECEIPT Comestic Mail Only: No Insurance Ministrace Provided	)
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(Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	150
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Total Pos Total	18
MCCALLISTER, CHARLENE	
Sireet Api or PO Box RUIDOSO DOWNS, NM 88346	
City, State,	
PS Form 3	піопв:

na je naga unu unu unu un de de de de de de de de de de de de de	
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  X Agent  B. Received by (Printed Name)  C. Date of Delivery
or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from item 1? Ses
MCCALLISTER, CHARLENE	SEP 17 2014
RUIDOSO DOWNS, NM 88346	3. Service Type Certified Mall® Priority Mail Express® Registered Receipt for Merchandise Insured Mail Collect on Delivery
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 701	2 2920 0002 1086 4570
PS Form 3811, July 2013 Domestic Retu	ım Receipt



	RECEIPT  MHF  ANA/BLANCO WASH
Postage \$	Postmark
Certified Fee  Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	Postmark Here 2
(Endorsement Required)  U Total	0,000
I Sent 7 MONTOYA ELI	IZABETH
Street, or PO BOX 1854 CUBA, NM 8701	3
PS Form 3600, August 2006	See Heverse for Instructions

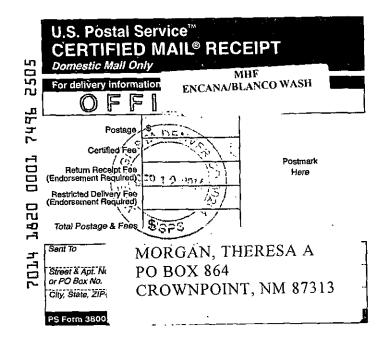
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Signature  X. Signature  X. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Cizabeth Wontona 9/17/14
1. Article Addressed to:  MONTOYA, ELIZABETH PO BOX 1854	D. Is delivery address different from item 1?
CUBA, NM 87013	3. Service Type  Certified Mail*  Registered  Return Receipt for Merchandise  Insured Mail  Collect on Delivery  4. Restricted Delivery? (Extra Fee)  Yes
2. Article Number 701 (Transfer from service label)	2 2920 0002 1086 4556
PS Form 3811, July 2013 Domestic Ret	urn Receipt



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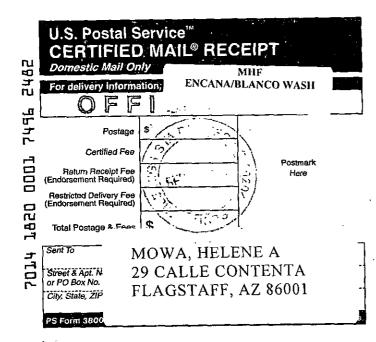
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X July Russell X Agent  B. Received by (Printed Name)  C. Date of Delivery  Page 15-14  D. Is delivery address different from item 1? Yes
Article Addressed to:      Article Addresse	If YES, enter delivery address below: No
MORGAN, ELRINA	
10 CR 6116 KIRTLAND, NM 87417	3. Service Type
KIRTEAND, INNEOTATI	☐ Certified Mail® ☐ Priority Mail Express™ . ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	320 0001 7496 2529
PS Form 3811, July 2013 Domestic Ret	urn Recelpt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>MORGAN, NELIDA L         7121 CHANTELLE ST         FARMINGTON, NM 87401</li> </ul>	A. Signature  X
FARIVIAND TOTAL TOTAL	3. Senice Type  Certified Male Alphothy Mail Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7014 185	20 20 7496 2512
	Return Receipt



99	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
1820 0001 7496 24°	Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Sees. \$	
ጉበጉ	MOSE, ELEANOR R STREET & ADI. NI OF PO BOX No.  City, State, ZiP  PS Form 3800.  MOSE, ELEANOR R PO BOX 310244  PO BOX 310244  MEXICAN HAT, UT 84531	

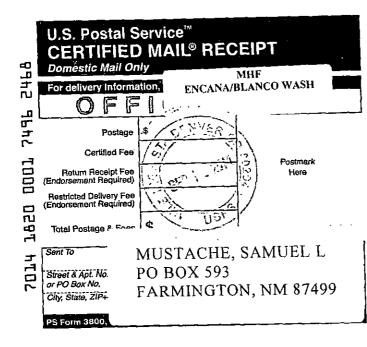
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signiture
Article Addressed to:	D. is delivery address different from item 1?
MORGAN, THERESA A PO BOX 864 CROWNPOINT, NM 87313	3. Sep/ce Type Certified Mail* Priority Mail Express* Registered Return Receipt for Merchandise
	4. Restricted Delivery? (Extra Fee)
2. Article Number	
(Transfer from service label) 7014 1820	0001 2446 5202
PS Form 3811, July 2013 Domestic Re	turn Receipt
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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?  Yes, if YES, enter delivery address below:
MOSE, ELEANOR R	ir YES, enter delivery address below.
MEXICAN HAT, UT 84531	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number   17014 1820	0001/7496 2499

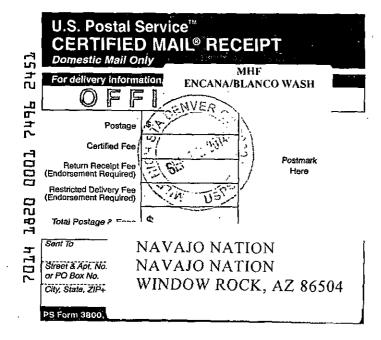


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1	For delivery information of F	ENCANA/BL	ANCO WASH	
9642 TOOO 028T	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	SENVED TO	Postmark Here	
7074 79	Sent To Street & Apt. No.	MURPHY, HI BOX 1243 CROWNPOIN		13

(	Print.
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 17  If YES, enter delivery address below:
MOWA, HELENE A 29 CALLE CONTENTA	
FLAGSTAFF, AZ 86001	3. Service Type  Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
i t	4. Restricted Delivery? (Extra Fee)
2. Article Number: 111111 7014 1820  (Transfer from service label)  PS Form 3811, July 2013  Domestic Ref	0001 7496 2482
	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  X
1. Article Addressed to:  MURPHY, HELEN M	If YES, enter delivery address below:   No
BOX 1243 CROWNPOINT, NM 87313	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2 Astrolo Number	on non: 2496 2475

(Transfer from service label)
PS Form 3811, July 2013





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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Addressee  B. Received by (Printed Name)  C. Date of Delivery
MUSTACHE, SAMUEL L PO BOX 593 FARMINGTON, NM 87499	D. Is delivery address different from the delivery address below: p 15 2014  3. Service Type
الا المحترم فيند من السلسان على السلسان من السلسانية ال	☐ Certifled Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. 'Article Number (Transfer from service label) 7014 1	820 0001 7496 2468
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY  A. Segnature
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B Received by (Printed Name) C. Date of Delivery  Oun C Pesh al G   Ses
1. Article Addressed to:  NAVAJO NATION NAVAJO NATION	If YES, enter delivery address below: D No
WINDOW ROCK, AZ 86504	3. Service Type  Gertified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
A A & A A December 2	
2. Article Number 7014 185	20 0001 7496 2451

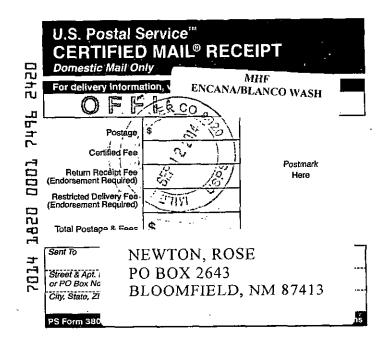
'\* (Transfer from service label)
PS Form 3811, July 2013



35	U.S. Postal CERTIFIED Domestic Mail O	D MAIL® RECEIPT	77
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<b>_</b>	Sent To N	ELSON, SARAH I	
7034	Street & Apt. P(	O BOX 1215 RUITLAND, NM 87416	
	PS Form 380		กร

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Agent  Addresse  B. Received by (Printed Name)  C. Date of Deliver  D. Is delivery address different from item 1?  Yes
1. Article Addressed to:	If YES, enter delivery address below:
NELSON, SARAH B	
PO BOX 1215	
FRUITLAND, NM 87416	3. Service Type  Certified Mail® Priority Mail Express®  Registered Return Receipt for Merchandis
	☐ Insured Mail ☐ Collect on Delivery
	☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	
2. Article Number (Transfer from service label) PS Form 3811, July 2013 - Domestic Re	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	4. Restricted Delivery? (Extra Fee) Yes
(Transfer from service label)	4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  Adgent  Addresse  B. Received by (Printed Name)  C. Date of Deliver  D. Is delivery address different from item 1?  If YES, enter delivery address below:
PO BOX 1365	
FRUITLAÑD, NM 87416	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandis ☐ Insured Mail ☐ Collect on Delivery
•	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014	1820 0001 7496 2437
PS Form 3811, July 2013 Domestic	Return Receipt



2473	U.S. Postal Service <sup>™</sup> CERTIFIED MAIL® RECEIPT Domestic Mail Only	
<u> </u>	For delivery information, ENCANA/BLANCO WASH	
7496	Postage \$ \$ P	
	Continue Eng.	
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	Restricted Delivery Fee (Endorsement Required)	
7014 1820	Total Postage & Faes \$	
<b>_</b>	Sent To NEZ, ANGELIA M	$\neg$
	Street & Apt. PO BOX 778	
<b>r</b> ~	City, State, 2 CUBA, NM 87013	
	PS Form 38	ońs

46	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  P. Is delivery address different from item 17  Yes
Article Addressed to:	D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
, - · · · · · · · · · · · · · · · · · ·	
NEWTON, ROSE	
PO BOX 2643	
BLOOMFIELD, NM 87413	3. Service Type  Grentified Mail® Grentity Mail Express®  Registered Grentity Mail Express®  Registered Grentity Mail Express®  Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 2420
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



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Ę	For delivery information, FNCANARIA ANGO WAS TO THE PROPERTY OF THE PROPERTY O	
	ENCANA/BLANCO WASH	
7496	Postage \$ SER CO	
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0007	Return Receipt Fee (Endorsement Required) Postmark	
20	Restricted Delivery Fee (Endorsement Regulred)	
18	Total Postage P Conn	
<b>±</b>	NEZ, DOLLY	ı
7014	Street & Apt. No. PO BOX 5701	
~	or PO Box No. City, State, ZIP: FARMINGTON, NM 87499	
i	PS Form 3800,	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery
. Article Addressed to:	D. is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
NEZ, AUTUMN R PO BOX 1255: KIRTLAND, NM 87417	3: Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
. <b>.</b>	4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, July 2013 Domestic Ref	1820 0001 7496 2406 turn Receipt
PS Form 3811, July 2013  Domestic Ref	
	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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,	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery



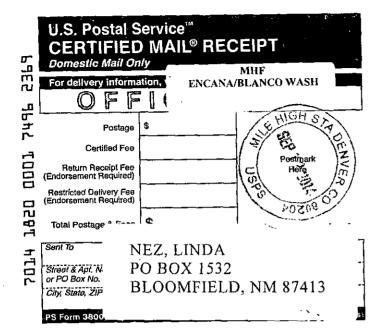
<b>7</b> E	U.S. Postal Service CERTIFIED MAI Domestic Mail Only	L® RECEIPT
딘	For delivery Information, vis	ENCANA/BLANCO WASH
卫	OFFE	
1820 0001 7496	Certified Fee  Return Receip Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postagr	Postmark Here
7034	or PO Boy No	LAINE JUEROA NE APT #112 JUERQUE, NM 87123

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
NEZ EARL POBOX 584	
BLANCO, NM 87412	3. Service Type  G Certified Mail® Priority Mail Express®  Registered Return Receipt for Merchandi I Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7014	1820 0001 7496 2383
	eturn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X

ALBUQUERQUE, NM

2. Article Number

(Transfer, from service label)
PS Form 3811, July 2013

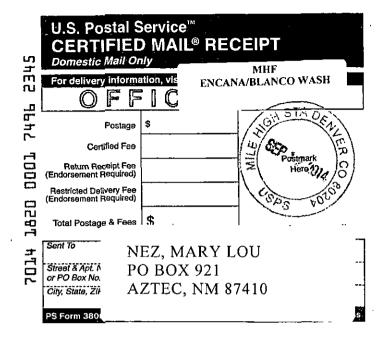


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7074	ł .	BOX 5434	•	
7	or PO Box Mi	RMINGTON	, NM 87499	
	PS Form 380			ns

<u>.                                    </u>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Addressee  B. Received by (Received Name)  C. Date of Delivery  9-16-14
Article Addressed to:	If YES, enter delivery address below:
NEZ, LINDA	
PO BOX 1532	La Carta Tara
BLOOMFIELD, NM 87413	3. Service Type  Certified Mail* Priority Mail Express** Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013  Domestic Ref	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Martia New G. Agent G. Date of Delivery  Mariya Nez 9-614
Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
NEZ, MARILYN	
PO BOX 5434	3. Service Type
PO BOX 5434 FARMINGTON, NM 87499	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
= =	☐ Certified Mall <sup>®</sup> ☐ Priority Mall Express <sup>™</sup> ☐ Registered ☐ Return Receipt for Merchandise

PS Form 3811, July 2013

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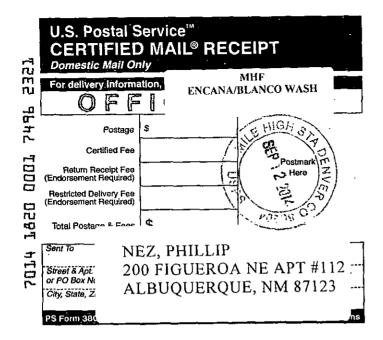


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~	or PO Box Nc City, State, ZI F A	RMINGTON	, NM 87499 ·
	PS Form 380		ns

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  NEZ, MARY LOU PO BOX 921 AZTEC, NM 87410	A. Signature  X
2. Article Number (Transfer from service label) 7 114 16	320 0001 7496 2345
- PS Form 3811, July 2013 Domestic Ret	urn Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X. Manuly Modern G. Date of Delivery  Marily Mez  D. Is delivery address different from item 1? G. Yes  If YES, enter delivery address below: G. No
NEZ, PERRY PO BOX 2842 FARMINGTON, NM 87499	3. Sepice Type  Certified Mail® Priority Mail Express**  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7014 18	20 0001 7496 2338
PS Form 3811, July 2013 Domestic Retu	ırn Receipt





SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
NEZ, PHILLIP 200 FIGUEROA NEAPT #112	If YES, enter delivery address below 5
ALBUQUERQUE, KIN 87423	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 18	
PS Form 3811, July 2013 Domestic Retu	rn Receipt

- 2314	U.S. Postal S CERTIFIED Domestic Mail Or For delivery Informs	MAIL® REC	EIPT  MHF  LANCO WASH
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7014 3	Street & Apt. N	EZ, RENA O BOX 1058 HIPROCK, NI	 M 87420

Agent  Addressee  Received by (Printed Name)  Selection of Police Addresse  Selection of Police Addresse  Addressee
a demonstration and the second
,
<u> </u>
Service Type  Certified Mail*  Priority Mail Express**  Registered  Registered  Collect on Delivery
Restricted Delivery? (Extra Fee)
0001 7496 2314



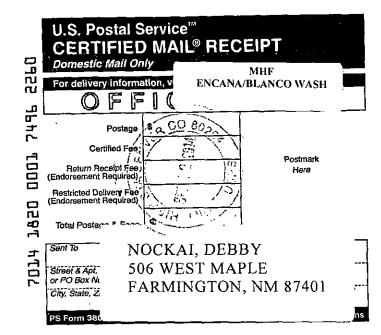
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	Restricted Delivery Fee (Endorsement Required)		
1,820	Total Postage * Enn		0575
	Sent To	EZ, SHIRLE	Y ANN
7	. n	O BOX 1255	
707		IRTLAND, N	IM 87417
	PS Form 3800		5

	<u></u>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature
<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) C. Date of Delivery
. Article Addressed to:	D. Is delivery address different from item 1?
NEZ, SHERILYN	***
PO BOX 1255 KIRTLAND, NM 87417	3. Service Type  Certifled Mail® Priority Mail Express®  Registered Return Receipt for Merchandise  Insured Mail
	4. Restricted Delivery? (Extra Fee) · ☐ Yes
(Transfer from service label) 2014 18	20 0001 7496 2307 eturn Receipt
(Transfer from service label) 7014 184 PS Form 3811, July 2013 Domestic Re	COMPLETE THIS SECTION ON DELIVERY
(Transfer from service label) 7014 186	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent  Addressee
(Transfer from service label)  PS Form 3811, July 2013  Domestic Reservice R	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent  Addressee
(Transfer from service label) 7014 186 PS Form 3811, July 2013 Domestic Re  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent  Addressee
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.  NEZ, SHIRLEY ANN	COMPLETE THIS SECTION ON DELIVERY  A. Signature  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?



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1820	Total Postage & Fees \$	
	NEZ, TIMOTHY	7
7	NEZ, TIMOTHI	
7014	Street & Apt. 12111 W DREYSUS DRIVE	}
-	City, State, Zi EL MIRAGE, AZ 85335	
	PS.Form 380	is.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> </ul>	A. Signature
Print your name and address on the reverse	Agent Date
so that we can return the card to you	B. Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name)  C. Date of Delivery
	D. Is delivery address different from item 1?  Yes
Article Addressed to:	If YES, enter delivery address below:   No
and the second of the second o	.
311	
NEZ, STEVEN R	
PO BOX 1255	\
KIRTLAND, NM 87417	3. Service Type
, t	☐ Certified Mail® ☐ Priority Mail Express™
التاليين المراجعين وسياعا عباستينا والمارية	Registered Return Receipt for Merchandise
•	☐ Insured Mail ☐ Collect on Delivery
2. Article Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
	20 0001 7496 2284
DO Farm 2011 11 2015	Return Receipt
ENDED, CONDUCTE THE SECTION	COMPLETE THIS SECTION ON DELIVERY
ENDER: COMPLETE THIS SECTION	<u></u>
Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	X Addressee
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece,	LOSA MIS 3/15/14
or on the front if space permits.	D. is delivery address different from item 1?  Yes
, Article Addressed to:	If YES, enter delivery address below:
<u> </u>	
	· ·
NEZ TIMOTIN	•
NEZ, TIMOTHY	·
12111 W DREYSUS DRIVE	3. Service Type
EL MIRAGE, AZ 85335	☐ Certified Mail® ☐ Priority Mail Express™
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
Adul Minchae	
Article Number (Transfer from service label)	20 0001 7496 2277



ш	U.S. Postal S CERTIFIED Domestic Mail Or	) MAIL® REC	EIPT	
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0001	Certified Fee  Return Receipt Fee (Endorsement Required)		Postmark Here	
	Restricted Delivery Fee (Endorsement Required)			
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7074	Street & Apt.   P(	O BOX 842		•••
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2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

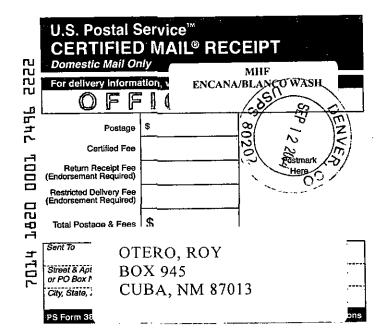
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  Article Addressed to:  NOCKAI, DEBBY 506 WEST MAPLE	A. Signature  Adgent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address biliterent from item 1?  If YES gifter delivery address below:  No
FARMINGTON, NM 87401	3. Service Type SPS  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 2260
PS Form 3811, July 2013 Domestic Ret	urn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Agent Addressee  B Received by (Printed Name) C. Date of Delivery
1. Article Addressed to: O'JOHN, VERA	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
PO BOX 842 IGNACIO, CO 81137	3. Service Type  Gertified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
Name of the Control o	4. Restricted Delivery? (Extra Fee)

7014 1820 0001 7496 2253



33	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® REC	EIPT	
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	Restricted Delivery Fee (Endorsement Required)		00,0	
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7074	or PO Box No	O BOX 642		1
i,	City, State, ZiP.	CUBA, NM 87	7013	+
	PS Form 3800			

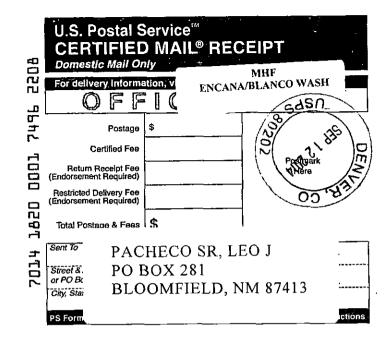
•	;
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  15  D. Is delivery address different from item 1?   Yes
Article Addressed to:	If YES, enter delivery address below:
OTERO, CHESTER L	<u>.</u>
; PO BOX 1712	<u> </u>
CUBA, NM 87013	3. Service Type  Certified Mail® Priority Mail Express™  Registered Receipt for Merchandise  insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2.: Article Number (Transfer from service label)	820 '0000 7496 2246 <u>*</u>
PS Form 3811, July 2013 Domestic Re	eturn Receipt



7.5	U.S. Postal S CERTIFIED Domestic Mail Or	D MAIL® RECEIPT	
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7014	Street & A or PO Box 42 F	ROAD 5580	
L_		RMINGTON, NM 87407	)
	PS Form	••	ctions

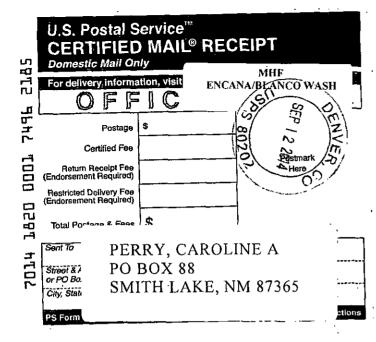
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li>OTERO, ROY.</li> <li>BOX 945</li> <li>CUBA, NM 87013</li> </ul>	A. Signature  X
2. Article Number (Transfer from service label)	150 0007 JAAP 5555
PS Form 3811, July 2013 Domestic Ret	urn Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
PACHACO KENNETH, EVA M 42 ROAD 5580 FARMINGTON, NM 87407	3. Set the Type (1)  3. Set the Type (1)  3. Registered Priority Mail Express**  Registered Priority Mail Express**  Certified Meil Priority Meil Pr
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 1820 (Transfer from service label)	0001 7496 2215
PS Form 3811, July 2013 Domestic Ret	urn Receipt



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1820 0001 7496 2192	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees	\$	ENCANA	( ) ( )	WASH Stmark lere	DENVE
70ጌ4	Street & A PO	BOX 2		OLD NM 8741	13	tions

<u> </u>	A CONTRACTOR OF THE CONTRACTOR
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
PACHECO SR, LEO J PO BOX 281 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandis Insured Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label) 7034 3.5	20 0001 7476 2208 sturn Receipt
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PS Form 3811, July 2013  Domestic Residue of the service labely of the service labely of the service labely of the service labely of the service labely of the service labely of the service labely of the service of the service labely of the service labely of the service of the service labely of the service l	A. Signature  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Less  L
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	COMPLETE THIS SECTION ON DELIVERY  A. Signature  B. Received by (Printed Name)  C. Date of Delivery  O 16-10-10



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7	or PO Box Ni City, State, Z	JBA, NM 87013	
	DC Fores 200		ns.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 1?   Yes
Article Addressed to:	If YES, enter delivery address below:
· Valentina	
PERRY, CAROLINE A PO BOX 88	
SMITH LAKE, NM 87365	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 1821	0001 7496 2185
PS Form 3811, July 2013 Domestic Ret	urn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Hulb Pete Agent  Addressee  B. Received by (Printed Name)  Hn +u Pete 9-16-14
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
PETE, ANITA	· · · · ·
PO BOX 595	3. Service Type
CUBA, NM 87013	Gertified Mail® Priority Mail Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
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	Restricted Delivery Fee (Endorsement Required)	00	
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7014	Street &/ PO	BOX 723	
~	or PO Bo. CUI	3A, NM 87013	
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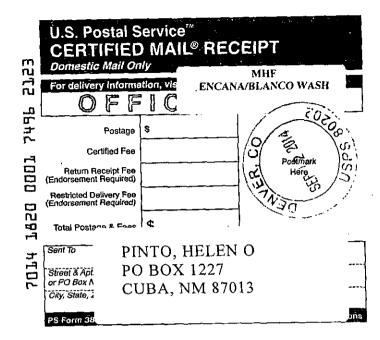
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A Signature  **Received by (Printed Name)   C. Daje of Delivery  **Besse Frank   9/19/14  D. Is delivery address different from Item 1?   Yes  If YES, enter delivery address below:   No
PINTO, BETTY BOX 1547 HCR 79 CUBA, NM 87013	3. Serulee Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)   1	820 0001 7496 2161
	eturn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee
; 1. Article Addressed to:	If YES, enter delivery address below:   ☐ No
PINTO, CARLITA J PO BOX 723	
CUBA, NM 87013	3. Service Type ☐ Certified Mail* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 7014 1  (Transfer from service label)	L820 0001 7496 2154
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Return

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items T, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. A. Agent  Addresses  B. Received by ( <i>Printed Name</i> )  C. Date of Delivery  D. Is delivery address different from item 1?  Yes	
Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No	
PINTO, EVELYN 4307 TOPKE CT NE ALBEQUERQUE, NM 87109	3. Service Type  Certified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 2130	
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7034	or PO Box No.  City, State, Zil	AGEEZI, NM 87037	
	PS Form 3804	·	s

<u>,                                     </u>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. D. Is delivery address different from item 1?  Yes
1. Article Audressed to.	If YES, enter delivery address below: ☐ No
PINTO, HELEN O PO BOX 1227	
CUBA, NM 87013	3. Sepice Type  Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise Insured Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 701.4	1950 0001 244P 5753
SENDER: COMPLETE THIS SECTION  Complete items 12, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your namezard 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:  PINTO, LOIS A PO BOX 447	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X
NAGEEZI, NM 87037	3. Service Type  Gertifled Mail® Priority Mail Express®  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	820 0001 7496 2116
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	CERTIFIED Domestic Mail Of For delivery Inform Postage Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees Sent To PI Street & Api.   or PO Box No

r ·	<u> </u>
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<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery   Tup   Tup   Tup     D. is delivery address different from item 1?   Yes
1. Article Addressed to:	If YES, enter delivery address below:   No
PLATERO, ANDY PO BOX 93	
NAGEEZI, NM 87037	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
:	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 701:4 1:82	0.0001 2446 5086
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to: PLATERO, BETTY PO BOX 99	D. is delivery address different from item 1?  Pes  If YES, enter delivery address below:  No
SANTA YSABEL, CA 92070	3. Service Type  ☐ Certified Mail* ☐ Registered ☐ Insured Mail ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
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	Street & Ap. PO	BOX 3618	,
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	PS Form 38		ons

STAIDED, COMPLETE THE SECTION	COMPLETE THE SECTION
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.	Agent
■ Print your name and address on the reverse	X Addressee
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Attach this card to the back of the mailpiece,	Eliabeth Hicks
or on the front if space permits.	
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	If YES, whiter delivery addings below: 🗆 No
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PLATERO, BEVERLY A	2014 (2)
, 1600 CLIFFSIDE DR APT 177	
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(Haister Hotti Get Vice label)	turn Receipt  COMPLETE THIS SECTION ON DELIVERY
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PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY  A. Signature
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent  Addressee
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent  Addressee
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Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X. Addressee  B. Received by (Printed Name) . C. Date of Delivery  Tail LaDanie 9.15.14
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PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Received by (Printed Name) . C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven
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PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  A. Received by (Printed Name) . C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:	A. Signature  A. Signature  A. Received by (Printed Name) . C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  PLATERO, BRIAN A	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X. Agent  Addresses  B. Received by (Printed Name)  C. Date of Deliven  A. Signature  Addresses  B. Received by (Printed Name)  C. Date of Deliven  A. Signature  Addresses  B. Received by (Printed Name)  Addresses  I Agent  Addresses  B. Received by (Printed Name)  A. Signature  B. Received by (Printed Name)  B. Received by (Printed N
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  PLATERO, BRIAN A PO BOX 3618	A. Signature  A. Signature  A. Signature  A. Signature  Addressed  B. Received by (Printed Name)  C. Date of Deliven  C. Date of Deliven  C. Date of Deliven  Addressed  D. Is delivery address different from item-1?  I Yes  If YES, enter delivery address below.  3. Service Type
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  PLATERO, BRIAN A PO BOX 3618	A. Signature  A. Signature  A. Signature  Addressed  B. Received by (Printed Name)  D. Is delivery address different from item 1?  I Yes  If YES, enter delivery address below  3. Service Type  Certified Malie
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  PLATERO, BRIAN A	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  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®  Certified Mail®  Return Receif for Merchandise
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  PLATERO, BRIAN A PO BOX 3618	A. Signature  A. Signature  A. Signature  Addressed  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 12  Yes  If YES, enter delivery address below:  3. Service Type  Certified Malie  Registered  Return Receipt for Merchandise



[1] [4]	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only
7496 20.	For delivery information, vis  OFFIC  Postage \$  ENCANA/BLANGO-WASH  70200
1820 OSB1 7	Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$
7014 1	Sent To  PLATERO, DAN  Street & Apt. or PO BOX 1381  City, State, Z  PS Form 380

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?
1. Article Addressed to:  PLATERO, CHRISTINE	If YES, enter delivery address below:
313 W SYCAMORE APT 2 BLOOMFIELD, NM 87413	3. Service Type  Certified Mali* Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Transfer from service label)	,820 0001, 7496 2048
(Transfer from service label) 7 U L 4 1 PS Form 3811, July 2013 Domestic Ref	
(Transfer from service label)  PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  B. Received by (Printed Jame)  C. Date of Delivery  PLATERO 9-17-14
(Transfer from service label)  PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	COMPLETE THIS SECTION ON DELIVERY  A. Signature  B. Received by (Printed Name)  C. Date of Delivery
PS Form 3811, July 2013  Domestic Ref  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  3. Service Type  E. Certified Mail <sup>3</sup> D. Priority Mall Express**
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.  PLATERO, DAN PO BOX 1381	A Signature  B. Received by (Printed Jame)  DAN PLATERO  D. Is delivery address different from item 1?  If yes, enter delivery address below:  3. Service Type



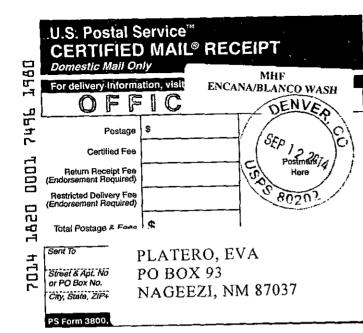
76 2017	ENCANA/RIANCO WASH
1820 0001 7496	Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage * 5000 ©
707 H	Sent To PLATERO, DIANA R Street & Apt. No. or PO BOX 43 City, State, ZiPi PS Form 3800.  PLATERO, DIANA R PO BOX 43 PO BOX 43 BLUEWATER, NM 87005

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address differentiation, item 1? Yes  If YES, enter relivery address prow:   No
PLATERO, DEANDRA PO BOX 1062	98000 15 70 65
AUBURN, WA 98071	3. Service Type  Certified Mail® Priority Mail Express®  Registered Receipt for Merchandise  Insured Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number ([]) 7014 182	0 0001 7496 2024
PS Form 3811, July 2013 Domestic Retu	urn Receipt



1997	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only		
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	Restricted Delivery Fee (Endorsement Required)	00202	
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7074	Sent To	PLATERO, ERNEST J	
0	Street & Apt. No.,	7701 E OSBORN 271 W	
r-	or PO Box No. City, State, ZiP+4	SCOTTSDALE, AZ 85251	
	PS Form 3800, Ju	;	

*			
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1? "  Yes		
Article Addressed to:	If YES, enter delivery address below: 5/2 No.		
PLATERO, ERNEST J	3 17 3		
7701 E OSBORN 271 W SCOTTSDALE, AZ 85251	3. Service Type		
SCO1.1SDALL, AZ 32	☐ Certified Mail® ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery		
•	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Transfer from service label) 11.1.170141182010001/17496 1977			
PS Form 3811, July 2013 Domestic Return Receipt			



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1?
PLATERO, EVA PO BOX 93	
NAGEEZI, NM 87037	3. Service Type  Certified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014	L820 0001 7496 1980
PS Form 3811, July 2013 Domestic Ref	turn Receipt

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1820	Total Postage * =	le l	
<b>_</b>	Sent To P	LATERO, GEORGE	
7014	Street & Apt. N P	O BOX 93	
7	or PO Box No. City, State, ZIF	AGEEZI, NM 87037-0093	,
	PS Form 3800		

- <del> </del>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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    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
PLATERO, GEORGE PO BOX 93 NAGEEZI, NM 87037-0093	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7 114 14	920 LOOD 7496 1973
PS Form 3811, July 2013 Domestic Ret	urn Receipt



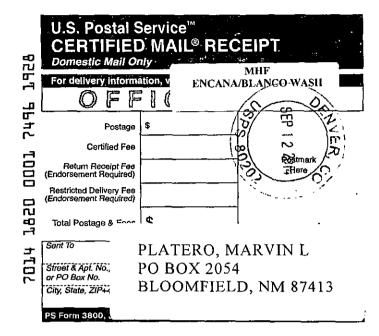
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1.620	Total Postage & Fees	\$	1	٠
 	Sent To PI	LATERO, JES	SICA L	
7014		RD 2598 ZTEC, NM 87	410	
	DS Form 380			r ns

NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X
Article Addressed to: PLATERO, IDA M	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
412 E-CEDAR AVE BLOOMFIELD, NM 87413	3. Service Type   Certified Mail*   Priority Mail Express*   Registered   Return Receipt for Marchandise   Insured Mail   Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
Transfer from service label)	120 0001 7496 1966 urn Receipt
Form 3811, July 2013  Domestic Ret  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	
Form 3811, July 2013  Domestic Ret  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X Agent  Addresse



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1820	Total Postage & Fees	<b>!</b> \$	
7014	Sent To P	LATERO, LENORA J	٦
	Street & Apt. N 1	9 CR 7588	
7	ar PO Bax No. City, State, ZIP	BLOOMFIELD, NM 87413	
	PS Form 3800		Á

and the second s	No. of the last of
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
PLATERO, LEANDER PO BOX 1431	3. Service Type
FARMINGTON, NM 87499	☐ Certified Mail® ☐ Priority MailExpress* ☐ Registered ☐ Return Receipt for Merchandise ☐ Collect on Delivery
2. Article Number	
(Transfer from service label) 7014 185	20 0001 7496 1942
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Slenture  Agent  (D) Addressee  B. Received by (Printed Name)  C. Date of Delivery  13114
Article Addressed to:	D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:
PLATERO, LENORA J 19 CR 7588 BLOOMFIELD, NM 87413	3. Service Type  Gertified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 1	820 0001 7496 1935



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  PLATERO, MARVIN L	A. Signature  X Mulecut—Rober
PO BOX 2054 BLOOMFIELD, NM 87413	3. Service Type Grentified Mall® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	850 0001 7496 1928
PS Form 3811, July 2013 Domestic Ref	turn Receipt

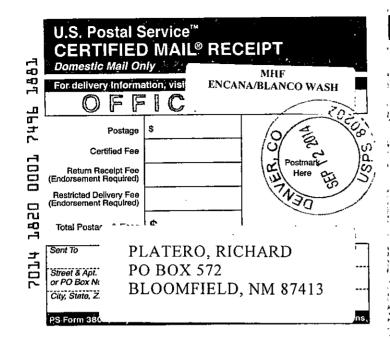
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<b></b>	Sent To PLATERO, MYRON
7014	Street & Apt. 1 PO BOX 73.
7	or PO Box No City, State, Zi, ROCK POINT, AZ 86545
	PS Form 380

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  Agent  Addresse  B. Beceived by (Printed Name)  G. Date of Deliver  D. Is delivery address different from them 12. 12 Yes
PLATERO, MYRON	If YES, enter delivery address below:
PO BOX 73	3. Service Type
ROCK POINT, AZ 86545	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandis ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes

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L 1874 ့ .	U.S. Postal S CERTIFIED Domestic Mail Of For delivery inform	D MAIL® RECEIPT
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딥	Restricted Delivery Fee (Endorsement Required)	
79	Total Postage & Fee	
7014	Street & Apt. No. 3	PLATERO, RITA R 25 JAMES CIRCLE BLOOMFIELD, NM 87413
	PS Form 3800	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X July Autor   Addressee  B. Received by (Printed Name)   C. Date of Delivery  -15-14  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below: (9-15-14)
PLATERO, RICHARD PO BOX 572 BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number (Transfer from service label) 111117014 182	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Ret	urn Receipt



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7014		LATERO, STE		-
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	PS Form 380			лs

OFFICE ACTION STEELING SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
PLATERO, RUBY A PO BOX 216 NAGEEZI, NM 87037	3. Service Type  Certified Mail Priority Mail Express* Registered Return Receipt for Merchandise Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 1867
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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,	COMPLETE THIS SECTION ON DELIVERY  A. Signature  X. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Stala Tase  9/8/14
or on the front if space permits.  1. Article Addressed to:  PLATERO, STELLA HCR 17 BOX 415 CUBA, NM 87013	D. Is delivery address different from item 1?
	i y. nesticieu Delivery ( <i>ickiia Peal</i> III Vac
2. Article Number	



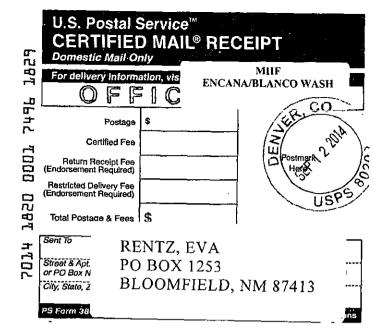
A. Signature  Agent  Addressee  B. Received by (Prin)ed Name)  C. Date of Delivery
D. Is delivery address different from item 1?
S (SEP 23 201A) S
3. Service Type    S \times 3   Service Type   S \times 3     Certified Mail*   Priority Mail Express**   Return Receipt for Merchandise   Insured Mail   Collect on Delivery
4. Restricted Delivery? (Extra Fee)
20,0001,7496,1843,,,
turn Receipt
COMPLETE THIS SECTION ON DELIVERY  A. Signature  A. Signature  Agent  Addressee  B. Reseived by (Printed Name)  C. Date of Delivery
D. Is delivery address different from item 1?  Yes
if YES, enter delivery address below:   \[ \sum_{\text{No}}  \text{No} \]
3. Service Type  Certified Mail* Priority Mail Express*  Registered Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
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COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION







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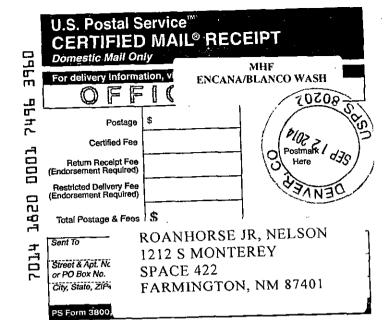
	1
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Flegeived by (Printed Name)  C. Date of Delivery  C1-16-14
Article Addressed to:	D. Is delivery address different from item 1?
RENTZ, EVA PO BOX 1253	Q. Sandra Time
BLOOMFIELD, NM 87413	3. Senice Type   ☐ Certifled Mali® ☐ Priority Mall Express™   ☐ Registered ☐ Return Receipt for Merchandise   ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  X. Dury M. Reyol D. Agent  B. Received by (Printed Name)  C. Date of Delivery
or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from item 1?  Ves  If YES, enter delivery address below:  No
REYOS, GLORIA M 2908 LOS ANAYAS RD NW ALBUQUERQUE, NM 87104	3. Service Type ☐ Certified Mail® ☐ Registered ☐ Registered ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 18 PS Form 3811, July 2013 Domestic Reti	בל פוססט איידער באבל בארייביססטיאבי



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1,820	Total Postage & Fees	[	
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i i	or PO Box No	BOX 1261	
L-	City, State, Z.	AVAJO, NM 87328	
	PS Form 380		ns

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Received by Printed Name)  C. Date of Delivery  D. Is delivery address different from temp.
1. Article Addressed to:  RIVERA, ORLANDO M PO BOX::5868	If YES, enter delivery address below AP No
FARMINGTON, NM 87499	3. Service Type  Gertified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 1	820 0001 7496 1805
PS Form 3811, July 2013 Domestic Ret	urn Receipt

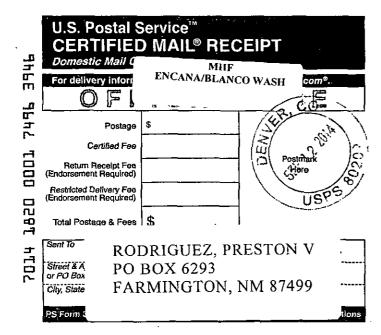
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ንወጌት	Street & Apt. P(	D BOX 2334 LOOMFIELD		
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature Agent  Agent  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:	D. is delivery address different from item 1?
ROANHORSE JR, NELSON 1212 S MONTEREY	S (2) 2 (2)
SPACE 422 FARMINGTON, NM 87401	3. Service Type  Certified Mail  Registered  Registered  Insured Mail  Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	1820 0001 7496 3960
PS Form 3811, July 2013 Domestic Re	turn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY

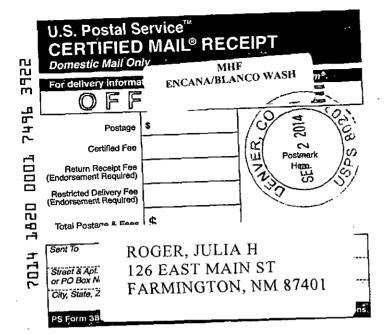
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1?
RODRIGUEZ, ELEICIA A	
PO BOX.2334	3. Service Type
BLOOMFIELD, NM 87413	☐ Certified Mall® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014	1820 0001 7496 3953
PS Form 3811, July 2013 Domestic Re	turn Receipt





39	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® REC	EIPT	
33	For delivery informa	tior ENCANA/BL	ANCO WASH	
7496	Postage	\$	(R)	
	Certified Fee		Postmark	1
1000	Return Receipt Fee (Endorsement Required)		Postmark Here	2014
0 0	Restricted Delivery Fee (Endorsement Required)			/68
1.820	Total Postage & Fees			FS.
Ŧ	Sent To RC	DRIGUEZ, R	CICHARD P	'
7074	Street & Apt PC	BOX 2334		
1	City, State, BI	OOMFIELD,	NM 8/413	
	PS Form 38			ons

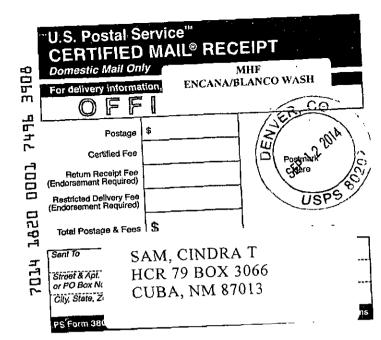
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
RODRIGUEZ, RICHARD P PO BOX 2334 BLOOMFIELD, NM 87413	3. Service Type  ☑ Certified Mail <sup>®</sup> ☐ Priority Mail Express**
	□ Registered □ Return Receipt for Merchandise □ Insured Mall □ Collect on Delivery  4. Restricted Delivery? (Extra Fee) □ Yes
2. Article Number (Transfer from service label)	1820 0001 7496 3939
PS Form 3811, July 2013 Domestic Retu	ım Receipt



10	U.S. Postal Service™ CERTIFIED MAIL® REC	CEIPT	
3915	Domestic men - "	ANCO WASH	7°
ያልትረ	Postage \$	SVER	CQ\
, ינססס	Certified Fee  Return Receipt Fee (Endorsement Required)	Postri GEP	eark 014
1820 O	Restricted Delivery Fee (Endorsement Required)	US	PS SO
	1047s	ARA	
7034	Street & Apt. I or PO Box No. PO BOX 2438 City, State, Zii SANTA FE, N	3	
	.PS Form 380		<u> </u>

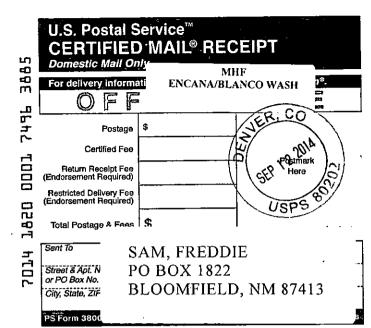
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. eignature  X		
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES enterpolative address below: No		
ROGER, JULIA H	SEP ANGOLOGICA		
FARMINGTON, NM 87401	3. Service Type  Contribution  Priority Mail Express**  Registered  Return Receipt for Merchandise		
	□ Insured Mail □ Collect on Delivery  4. Restricted Delivery? (Extra Fee) □ Yes		
2. Article Number (17014 1820 0001 7496 3922 (Transfer from service label)			
PS Form 3811, July 2013 Domestic Ret	urn Receipt		





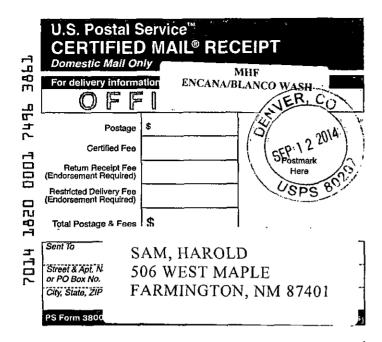
무근	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only MHE	
7496 389	For delivery information; vi  OFFIC  Postage \$ ENCANA/BLANCO WASH	
1000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	
2014 1820	Sent 10	ń

SENDER, COMPLETE THE SECTION	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVER!
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A. Signature  X Exthu Sam Agent  Addressee
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.	B. Repeived by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item (7) Yes  If YES, enter delivery address delow: Q No
SAM, ESTHER	(2 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
PO BOX 92	
	3. Service Type
FRUITLAND, NM 87416	☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	1820 0001 7496 3892
PS Form 3811, July 2013 Domestic Ret	urn Receipt



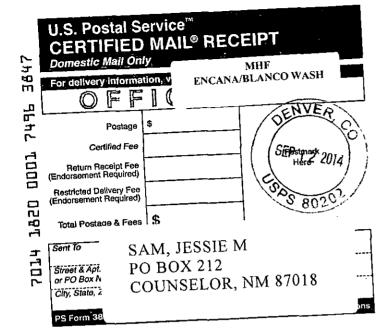
3878	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® REC	AHE	
9	For delivery informs	tion ENCANA/B	LANCO WASH	
	OFF			
구박무듐	Postage	\$	WHILE	760
	Certified Fee		1.7/	/Aroc.
נונונו	Return Receipt Fee (Endorsement Required)		Postroark Abre	2 2014
	Restricted Delivery Fee (Endorsement Required)		USPS	
1,820	Total Postage & Fees	\$	, ops	3 80.50
<b>-</b>	Sent To S A	AM, HARLAN	Į	
7014	Lor PO Box No	ROAD 6115	NA 07417	
-	City, State, Zi	IRTLAND, NI	VI 8/41/	
	PS Form 380			16

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X		
Article Addressed to:	If YES, enter delivery address below:		
SAM, FREDDIE PO BOX 1822 BLOOMFIELD, NM 87413	3. Service Type ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery		
	4. Restricted Delivery? (Extra Fee) ☐ Yes		
2. Article Number (Transfer from service label) 7014 1820 0001 7496 3885 PS Form 3811, July 2013 Domestic Return Receipt			
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Réceived by (Printed Name)  C. Date of Delivery		
1. Article Addressed to: SAM, HARLAN	D. Is delivery address different from them 17 Yes  If YES, enter delivery address below 17 No		
#1 ROAD 6115 KIRTLAND, NM 87417	3. Service Type  Gertified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery		
O Autolo Manual	4. Restricted Delivery? (Extra Fee)		
2. Article Number 7014 18	20 0001 7496 3878		
PS Form 3811, July 2013 Domestic Re			



	U.S. Postal S	Service'''		
	CERTIFIED	MAIL® REC	EIPT	
5	Domestic Mail Or	aly	MIIF	
∃.	For delivery informa	ation, ENCANA/I	BLANCO WASH	
	OFF		VIED	
7496	Postage	\$	OF THE R. C.	$\sqrt{c}$
	Certified Fee		SEBsthack 2014	1
1000	Return Receipt Fee (Endorsement Required)		Here Here	//
	Restricted Delivery Fee (Endorsement Required)		SPS 8020	
la 1	Total Postage & Fees	\$		
<u> </u>	Sent To S.A.	AM, IRVIN		
7034	Street & Apt. 43	4 N 3RD		
•	City, State, Zl B	LOOMFIELD,	NM 87413	
	PS Form 380			າຣຸ

•	· ·
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery.
Article Addressed to:	D. Is delivery and beside the property of the second of th
SAM, HAROLD 506 WEST MAPLE FARMINGTON, NM 87401	3. Service Type    Certified Mail®   Priority Mail Express®   Registered   Return Receipt for Merchandise   Insured Mail   Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	0 0001 7496 3861
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



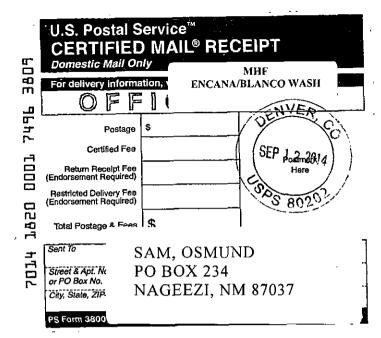
30	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® RECEIPT
38	For delivery informa	
1	OFF	ENCANA/BLANCO WASH
749b	Postage	SEP 1 2 2014
	Certified Fee	11 1 1
1000	Return Receipt Fee (Endorsement Required)	Postmark Here
	Restricted Delivery Fee (Endorsement Required)	36%
1.82	Total Postage & Fees	<b>s</b> -
<u> </u>	Sent To S	AM, JULIAN
ንዐጌዛ	Street & Apt. N	O BOX 221 OUNSELOR, NM 87018
	PS Form 3800	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Agent  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	If YES, enter delivery address below: ☐ No
SAM, JESSIE M PO BOX 212	
COUNSELOR, NM 87018	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820	0003 7496 3847
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1?
, —— —— · · · · · · · · · · · · · · · ·	If YES, enter delivery address below:   No
SAM, JULIAN	if YES, enter delivery address below:   No
+ PO BOX 221	
SAM, JULIAN PO BOX 221 COUNSELOR, NM 87018	3. Service Type  Cortified Mail Registered Return Receipt for Merchandise Collect on Delivery
PO BOX 221 COUNSELOR, NM 87018	3. Service Type  Certified Mail® Priority Mail Express® Registered Receipt for Merchandise Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes
PO BOX 221 COUNSELOR, NM 87018	3. Service Type  Cortified Mail Registered Return Receipt for Merchandise Collect on Delivery

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT Domestic Mail Only 3623 MHF ENCANA/BLANCO WASH For delivery information, 7496 Postage SEP 1 2 2014 Certified Fee 1000 Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) 1.820 Total Postage & Fees \$ SAM, MELVIN Sent To 7074 #14 COUNTY ROAD 4903 Street & Apt. No. or PO Box No. BLOOMFIELD, NM 87413 City, State, ZIP PS Form 3800

	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® REC		
3836	For delivery informa		MHF BLANCO WASH	
	OFF		ENVER	
구부립단	Postage	\$	(0)	ļ
	Certified Fee		(SEP 1.2 2014)	
1000	Return Receipt Fee (Endorsement Required)		\ Uara	/
	Restricted Delivery Fee (Endorsement Required)		\$ 80202	
1.820	Total Postage & Fees	\$	ļ	1
	Sent To	SAM, NASBA	AN	l
7014		BOX 212 COUNSELOR	R, NM 87018	
	PS Form 3800,			1

•	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent     Addressee     B. Received by (Printed Name)   C. Date of Delivery     Ken Rayhuru   9/19/14     D. Is delivery address different from item 1?
1. Article Addressed to:	If YES, enter delivery address below:
Production of the second	_1
SAM, MELVIN #14 COUNTY ROAD 4903 BLOOMFIELD, NM 87413	, 3. Service Type  Gretified Mail® Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014	LAZO 0001 7496 3823
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY  A: Signature
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  9/20(14)  D. Is delivery address different from item 1?   Yes
1. Article Addressed to:	If YES, enter delivery address below: ☐ No
SAM, NASBAN BOX 212 COUNSELOR, NM 87018	3. Service Type ☐ Certified Mail® ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
- · · · · · · · · · · · · · · · · · · ·	
	4. Restricted Delivery? (Extra Fee)
2. Article Number , (Transfer from service label) 7014	A Floridate d Dellar D. Co.



	U.S. Postal Service		
E M	CERTIFIEL  Domestic Mail Or		
E 7	For delivery informa	ENCAMADEANOU III	
7496	Postage	s UNVER, CO	ل
	Certified Fee	SEPPAsithalk Here	
1000	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee	\\\\ \	<i>j</i>
1820	(Endorsement Required)	USPS 8073	
	Total Postage & Fees    Sent To   C	•	_
7034	Street & Apt. N P	AM, STEPHANIE O BOX 1128	
<u></u>	or PO Box No. City, State, ZiF	UBA, NM 87013	
	PS Form 3800		9

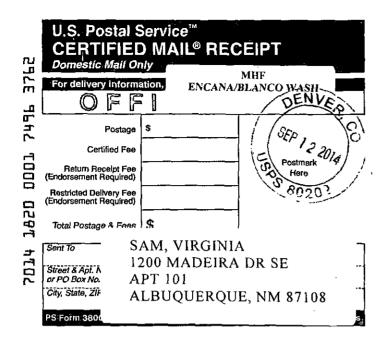
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Lary Jour Day Agent D. Addressee  B. Received by (Printed Name) C. Date of Delivery  HANY Sanches 22114
Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
SAM, OSMUND PO BOX 234	
NAGEEZI, NM 87037	3. Service Type  Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014	1820 0001 7496 3809
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Jovanna 12 948  If YES, enter delivery address below:
SAM, STEPHANIE	
. CUBA, NM 8/013	3. Service Type  G Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service label) 7014 18	20 2001 7496 3793



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X O NC Signature  B. Received by (Printed Name)  D. Is delivery address different from item 1? (Name)
1. Article Addressed to:	If YES, enter delivery address below:
POBNOTIFY SENDER OF NE BLAISAM VERNA BLAISAM VERNA BLANCO BLVD A BLOOMFIELD NM 8741	*0820-00779-12-38
2. Article Number (Transfer from service label) 7014 182	0 0001 7496 3786
PS Form 3811, July 2013 Domestic Re	eturn Receipt

	U.S. Postal S CERTIFIED Domestic Mail Of	) MAIL® RE	CEIPT	
3779	For delivery Information	ation, v ENCA	MHF NA/BLANCO WASH	
749b	Postage Certified Fee	\$	- SEP,	15
1000	Return Receipt Fee (Endorsement Required)		Postmark 2014 Here	} ].
1,820	Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	\$	80202	
7014 1	Sent To Street & Apt. No., or PO Box No. City, State, ZIP+4	SAM, VINA PO BOX 26 KIRTLANI		
	50.50		•	

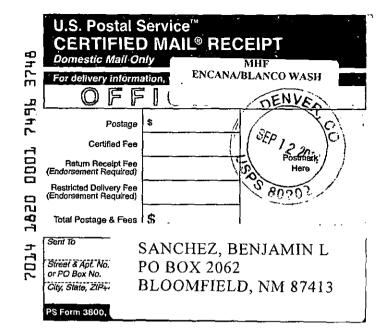
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X  MULL  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Yes
SAM, VINA A PO BOX 2683	If YES, enter delivery address below:
KIRTLAND, NM 87417	3. Service Type  Certified Mail* Priority Mail Express*  Registered Receipt for Merchandise  Insured Mail Collect on Delivery
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 1820	
DO = . 0044	eturn Receiot





755	Domestic Mail O	D MAIL® RECEIPT	
37	For delivery inform	atlon, v ENCANA/BLANCO WASH	
교	OFF	DENVE	
7496	Postage	18 / (50	<b>.</b>
	Certified Fee	C Postman,	: 
1000	Return Receipt Fee (Endorsement Required)	Here Y	
	Restricted Delivery Fee (Endorsement Required)	80202	
1820	Total Postage & Fees	<b>s</b> .	
7034	Sent To	SANCHEZ JR, BILLY	
<u></u>	Street & Apt. No.,	PO BOX 1732	
<b>ر</b> ~	or PO Box No. City, State, ZIP+4	BLOOMFIELD, NM 87413	
	PS Form 3800, c		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  SANCHEZ JR, BILLY	A. Signature  A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  A. Ib./U  D. Is delivery address different from item 17  If YES, enter delivery address below:
PO BOX 1732 [BLOOMFIELD, NM 87413	3. Service Type  Certifled Mail® Priority Mail Express®
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 3755
PS Form 3811, July 2013 Domestic Ret	urn Receipt

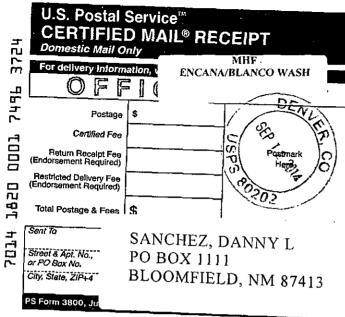


ä		MAIL® RECEIPT
3731	Domestic Mail Or For delivery inform	EMCANA (Dr. 43100
긡	OFF	DENVE
<b>164</b> 2	Postage	\$ SEP.
מממזי	Certified Fee Return Receipt Fee (Endorsement Required)	Postmath, Hero
	Restricted Delivery Fee (Endorsement Required)	\$80202
1820	Total Postage & Fees	\$
7	1	SANCHEZ, BRIAN LEE
70 ጌ	Lat DO Day No	PO BOX 1732 BLOOMFIELD, NM 87413
	PS Form 3800, J	

<u>, , , . , , , , , , , , , , , , , , , ,</u>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Segment Addresses  B. Received by (Printed Name)  C. Date of Delivery  Denjamin C. Sanche  D. Is delivery address different from item 1?   Yes
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
SANCHEZ, BENJAMIN L PO BOX 2062 BLOOMFIELD, NM 87413	3. Service Type  Certifled Mail Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  Restricted Delivery? (Extra Fee)
2. Article Number	
(Transfer from service label) 7014 185	20 0001 7496 3748 :
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery
or on the front if space permits.  1. Article Addressed to:	D. Is delivery address different from item 1?   The second of the second
SANCHEZ, BRIAN LEE	
PO BOX 1732 BLOOMFIELD, NM 87413	3. Service Type  C Certified Mail® Priority Mall Express"  Registered Return Receipt for Merchandise
PO BOX 1732	☐ Certified Mail® ☐ Priority Mall Express**

(Transfer from service label)
PS Form 3811, July 2013

264



3717	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only
W	ENCANA/BLANCU WASH
9642	
7	Postage \$ Certified Fee
<b>~</b> 7	
1000	Return Receipt Fee (Endorsement Required)
20	Restricted Delivery Fee (Endorsoment Required)  Total Posterie & Feed
1,00	Total Postage & Fees \$
'n,	SANCHEZ, HARRY
7034	or PO BOX No. PO BOX 234
	City, State, Zin NAGEEZI, NM 87037
	PS Form 3800

	- 100 (C) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Mejhana Borehaz Addressee  B. Received by (Printed Name)  SVEYNANA SAVCHEZ 9-16. (J. D. Is delivery address different from Item 17 Yes
Article Addressed to:	If YES, enter delivery address below:
· SANCHEZ, DANNY L	
PO BOX 1:111	
BLOOMETELD, NM 87413	3. Service Type  Certified Mail Priority Mail Express Return Receipt for Merchandise Cinsured Mail Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	1820 0001 7496 3724
PS Form 3811, July 2013 Domestic Retu	urn Receipt

A. Signature  X Lowy Sanck Agent Addressee  B. Received by (Printed Name)  C. Date of Delivery
D. Is delivery address different from item 19
3. Service Type  Certified Mail® Priority Mail Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
4. Restricted Delivery? (Extra Fee) Yes
1820 0001 7496 3717



, 35.94	U.S. Postal S CERTIFIED Domestic Mail Of For delivery Inform	D MAIL® REC	EIPT  MHF  MBLANCO WASH	
1820 0001 7496	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees	\$	Postmark Herau	DENSO
7014	Sent To  Street & Api. No., or PO Box No.  City, State, ZIP+4  PS Form 3800, J	SANCHEZ, M PO BOX 1732 BLOOMFIEL	2	

2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  Agent  Addressee
SANCHEZ, LANORIA A PO BOX 1732	
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mall* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) PS Form 3811, July 2013 Domestic Ref	1820 0001 7476 3700 turn Receipt
SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery
SANCHEZ, MICHAEL PO BOX 1732	
BLOOMFIELD, NM 87413	3. Service Type

☐ Insured Mail

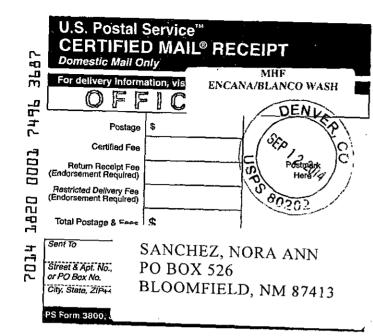
Domestic Return Receipt

4. Restricted Delivery? (Extra Fee)

7014 1820 0001 7496 3694

☐ Collect on Delivery

☐ Yes



16 3670	U.S. Postal CERTIFIE Domestic Mail O For delivery inform	D MAIL® RECEIPT  MHF  BUILDING  ENCANA/BLANCO WASH
7496	Postage	s COENT
2 0003	Certified Fee  Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	Postmark PD Priere CO
1820		s
7034	Sent To  Street & Apt. No., or PO Box No.  City, State, ZIP+4	SANCHEZ, ROSE B PO BOX 1732 BLOOMFIELD, NM 87413
	PS Form 3800, J	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. No.1a Benals (Agent Agent
Article Addressed to:	If YES, enter delivery address below:
SANCHEZ, NORA ANN PO BOX 526 BLOOMFIELD, NM 87413	
BLOOMITELD, NWI 67413	3. Service Type  Certified Mall Priority Mall Express Registered Return Receipt for Merchandise Collect on Delivery
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	0 0001 7496 3687
PS Form 3811, July 2013 Domestic Ret	urn Receipt
<b></b>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  ALLIFICA  D. Is delivery address different from item 1?  If YES, enter delivery address below:
SANCHEZ, ROSE B PO BOX 1732 BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	מלשלה להיים במני מספים מבמני
PS Form 3811, July 2013 Domestic Re	sturn Receipt
	· ·

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only MHF ENCANA/BLANCO WASH For delivery information, vi 199 7 Postage | \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1820 Total Postage & Fees \$ SANCHEZ, ROSE MARIE 7074 Street & Apt. No., or PO Box No. PO BOX 2062 BLOOMFIELD, NM 87413 City, State, ZIP+4 PS Form 3800, Jo

56	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® RECEIPT
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구부위도	Postage	\$ (1)
	Certified Fee	SEP Postmer C
1000	Return Receipt Fee (Endorsement Required)	USPS
	Restricted Delivery Fee (Endorsement Required)	03.
1820	Total Postage & Fees	\$
<b>#</b>	Sent To	SANCHEZ, WALLACE
7034		O BOX 1732
		BLOOMFIELD, NM 87413
	PS Form 3800.	

· · · · · · · · · · · · · · · · · · ·	<u> </u>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>SANCHEZ, ROSE MARIE</li> </ul>	A. Signature  X Description of Addressee  B. Received by (Printed Name)  C. Date of Delivery
PO BOX 2062 BLOOMFIELD, NM 87413	3. Service Type  Gruffied Mail® Priority Mail Express™  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) - Yes
2. Article Number (Transfer from service label)	14:1820:0001, 2448:3683
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  3.16.14  D. Is delivery address different from item 1?   Yes
SANCHEZ, WALLACE	If YES, enter delivery address below:
PO BOX 1732 BLOOMFIELD, NM 87413	3. Service Type  Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7014	1820 0001 7496 3656

Domestic Return Receipt

- PS Form 3811, July 2013

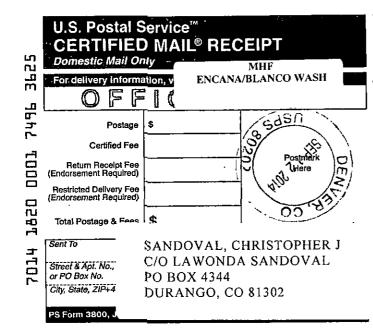
368



	PS Form 3800	,
32	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
36	For delivery information, view ENCANA/BLANCO WASH	ı
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נססס	Postage \$ Certifled Fee Return Receipt Fee (Endorsement Required) Restricted Politics Return Receipt Fee	
1.620	Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$	
7014	SANDOVAL, AGNES Street & Apt. No. or PO BOX 62 City, State, ZiP4  PS Form 3800.  SANDOVAL, AGNES PO BOX 62 CHURCHROCK, NM 87311	

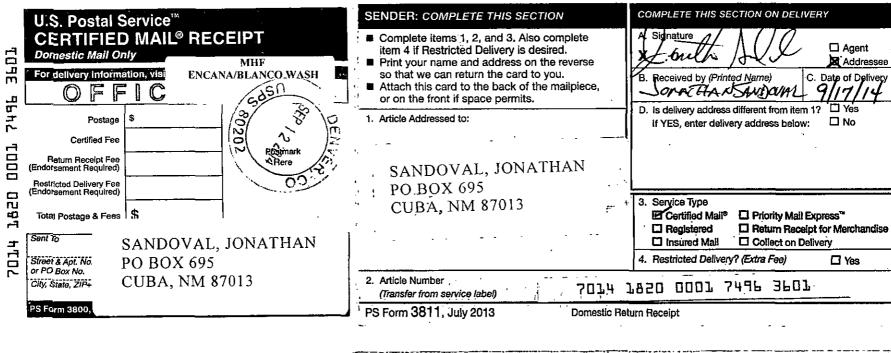
X Louis Barby Agent Addressee
B. Received by (Printed Name)  C. Pate of Delivery  C. Pate of Delivery  9 11 14  D. Is delivery address different from item 1?  If YES, enter delivery address below:
3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee)
1820 0001 7496 3649

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> SANDOVAL, AGNES	B. Received by (Printed Name)
PO BOX 62 CHÜRCHROCK, NM 87311	3. Service Type  Gertified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	L4 1820 0001 7496 3632
PS Form 3811, July 2013 Domes	stic Return Receipt



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1	OFF	I C SASA
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707	Street & Apt. No.	SANDOVAL, JAMES PO BOX 254 TOHATCHI, NM 87325

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Rrint your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Addressee  C. Date of Delivery  Addressee  D. Is delivery address different from item 1?  D. Ves
Article Addressed to:	If YES, enter delivery address below:
SANDOVAL, CHRISTOPHER J E/O LAWONDA SANDOVAL PO/BOX 4344 DURANGO, CO 81302	3. Service Type  Certified Mali Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
<u></u>	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 701.4	1820 0001 7496 3625
PS Form 3011, July 2010	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  SANDOVAL, JAMES	Delivery address different from item 1?
PO BOX 254 TOHATCHI, NM 87325	
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2 Article Number	Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
	Certified Mail



	U.S. Postal Service <sup>™</sup>		
	CERTIFIED MAIL® RECEIPT	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY .
<b>96</b> 3595	Dotnestic Mail Only  For delivery information; vi  OFF  ( ) ENCANA/BLANCO WASH	<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece,</li> </ul>	A. Signature  X Julia Jungara Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery
749	Postage \$ /9	or on the front if space permits.	D. Is delivery address different from item 1? ☐ Yes
-3	Certifled Fee	1. Article Addressed to:	If YES, enter delivery address below: ☐ No
000	Return Receipt Fee (Endorsement Required)	1000	·
	Restricted Delivery Fee (Endorsement Required)	SANDOVAL, JULIA M	
182	Total Postage & Fees \$	1420 YORK AVE #9 FARMINGTON, NM 87401	3. Service Type
01.4	SANDOVAL, JULIA M Street & Apt. N or PO Box No. 1420 YORK AVE #9	; PARMINGTON, IND 87401	☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
Γ-	Orpo Box No. 1420 YORK AVE #9 City, State, Zif FARMINGTON, NM 87401		4. Restricted Delivery? (Extra Fee)
	PS Form 380d	2. Article Number (Transfer from service label) 7014 18	20 0001 7496 3595
		PS Form 3811, July 2013 Domestic Rev	turn Receipt

☐ Agent

C. Date of Delivery

☐ Yes

Addressee



<del>- 1</del>	U.S. Postal S CERTIFIED Domestic Mail Or	D MAIL® RECEIPT
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	Restricted Delivery Fee (Endorsement Required)	
감염감	Total Postage & Fees	\$ .
<u></u>	Sent To	ANDOVAL, SYLVESTER
7014	Street & Apt. No.	PO BOX 3765
•	City, State, ZIP+	FARMINGTON, NM 87499
	PS Form 3800,	

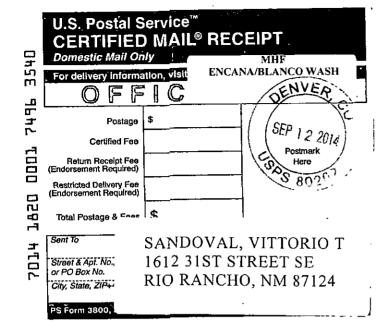
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mallpiece, or on the front if space permits.  1. Article Addressed to:  SANDOVAL, ROSE J	A. Signature  X Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  C. Date of Delivery
6808 IVY PI, SW ALBUQUERQUE, NM 87121	3. Service Type  Grentified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 188	::::::::::::::::::::::::::::::::::::::

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY .
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent  Addressee  B. Becelved by (Printed Name)  Vestor Sonding
Article Addressed to:	D. As delivery address different from item 1?  Yes If YES, enter delivery address below:  No
SANDOVAL, SYLVESTER PO BOX 3765	OT HW 8> PO
FARMINGTON, NM 87499	3. Service Type  Certified Mail®  Registered  Insured Mail  Collect on Defivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number ((Transfer from service label) 7014 1	820 0001 7496 3571
PS Form 3811, July 2013 Domestic Ret	urn Receipt



57	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® RECEIPT
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	Street & Apt. No.	HCR 79 BOX 3044
<u>r</u> ~	or PU Box No.	
	City, State, ZIP+-	CUBA, NM 87013
	PS Form 3800,	[

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addresses  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery  C. Date of Delivery	
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
SANDOVAL, VIRGINIA T		
CUBA, NM 87013	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label)	1820 0001 7496 3557	
PS Form 3811, July 2013 Domestic Ref	um Receipt	



33	U.S. Postal Service <sup>TM</sup> CERTIFIED MAIL® RECEIPT Domestic Mail Only MILE	
35	For delivery information, visit ENCANA/BLANCO WASH	4
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7496	Postage \$ (Co)	
	Certified Fee	
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	Restricted Delivery Fee (Endorsement Required)	
1820	Total Postage & Fees \$	_
<b>=</b>	SCOTT, EDDIE D	
7074	Street & Apt. No. POROX 2173	- 1
<u>~</u>	or PO Box No. City, State, ZIP.  BLOOMFIELD, NM 87413	
	PS Form 3800	

<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> A. Signature X D. Is deliven	Agent   Addressee     Addres
item 4 if Restricted Delivery is desired.  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:  SANDOVAL, VITTORIO T  1612 31ST STREET SE  RIO RANCHO, NM 87124  3. Service T  ☐ Certifit ☐ Regist	Agent   Addressee     Addres
SANDOVAL, VITTORIO T  1612 31ST STREET SE RIO RANCHO, NM 87124  3. Service T  Pregist	nter delivery address below:   No
☐ Certifi	ino :
Instance	ed Mali® Priority Mail Express® tered Return Receipt for Merchandise
4. Restricte	d Delivery? (Extra Fee) ☐ Yes
2. Article Number ((Transfer from service label)	1001 7496 3540
SENDER: COMPLETE THIS SECTION COMPLE	TE THIS SECTION ON DELIVERY
Attach this card to the back of the mailpiece, or on the front if space permits.	Ved by (Printed Name)  Quantary  C. Date of Delivery  Quantary
1 Article Addressed to:	very address different from item 1?
SCOTT, EDDIE D PO BOX 2173	die Seott
BLOOMFIELD, NM 87413	rtified Maii <sup>a</sup>
	cted Delivery? (Extra Fee)

(Transfer from service label)
PS Form 3811, July 2013

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT 352E Domestic Mail Only MHF ENCANA/BLANCO WASH For delivery information, visit 7496 Postage Certified Fee 0007 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 믾 Total Postage & Fees \$ 437 SCOTT, LAUREL Sent To 7034 232 S 12TH AVE Street & Apt. No., or PO Box No. PHOENIX, AZ 85007 City, State, ZIP+4 PS Form 3800,

3519	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® RECEIPT
	For delivery Informa	
2014 1820 0001 7496	Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees Sent To Street & Apt. No.	\$ Postmark A Here V Postmark COTT, QUENBY D
~	City, State, ZIP4	ST MICHEALS, AZ 86511

2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Z Agent
1. Article Addressed to:SCOTT, LAUREL	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
PHOENIX, AZ 85007	3. Service Type  Cartified Mail® Priority Mail Express™  Registered Plant Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	1820 0001 7496 3526
PS Form 3811, July 2013 Domestic Re	um neceipt
■ Complete items * 2 and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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:  SCOTT, QUENBY D PO®BOX 765 ST MICHEALS, AZ 86511	A. Signature  X. Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:  3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

7014 1820 0001 7496 3519

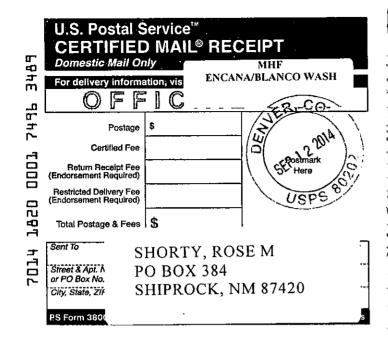
Domestic Return Receipt

🗆 Yes



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	Restricted Delivery Fee (Endorsement Required)			USPS P	()
182	Total Postage & Fees	\$			
4	Sent To	SHONI	E, CAR	MINIA A	
7014	Street & Apl. No., or PO Box No.	РО ВО	X 251		
•	City, State, ZIP+4	PINON	, AZ 8	5510	
	PS Form 3800, 4				

	<u> </u>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature    Agent   Addressee     Addressee     B. Received by (Printed Name)   C. Date of Delivery
SERAFIN, MAXINE PO BOX 102	· · · · · · · · · · · · · · · · · · ·
DULCE, NM 87528	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service tabel) 118:	20.0000173496,3502 <sup>113</sup>
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY  A. Signature
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	B. Received by (Printed Name)  C. Date of Delivery  PLACED Y  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
SHONE, CARMINIA A PO BOX 251 PINON, AZ 85510	3. Service Type  Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
Article Number  (Transfer from service label)	
PS Form 3811, July 2013 Domestic Re	eturn Receipt

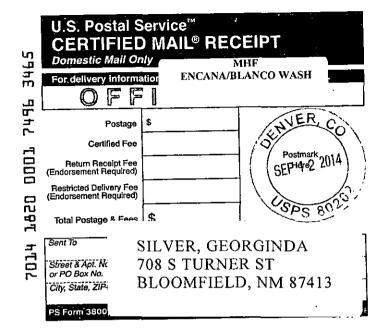


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  Addressee  B. Received by (Finited Name)  D. Is delivery address different from item 1?   Yes
Article Addressed to:	If YES, enter delivery address below:
	t t
SHORTY, ROSE M	٩
PO BOX 384	
SHIPROCK, NM 87420	3. Service Type
إسسان المحادية المسائد الماء الماء الماء	☐ Certified Mail ☐ Priority Mall Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7814 1.	820 0001 7496 3489
PS Form 3811, July 2013 Domestic Ret	urn Receipt
	_ • . <u>.</u>

75	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® RECEIPT	
1820 0001 7496 34	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	s ENCANA/BLANCO WASH  SEPOSTMARK Here  USPS	
70ጌ4	Street & Apt. No I or PO Box No.	SIFUENTES, IVA M PO BOX 45033 RIO RANCHO, NM 87174	

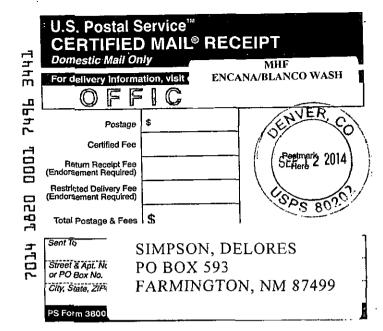
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A: Signature  X  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery	
1. Article Addressed to:  SIFUENTES, IVA M PO BOX 45033	D. Is delivery address different from item 19 No P No P No P No P No P No P No P No	
RIO RANCHO, NM 87174	3. Service Type  Certified Mail® Priority Mail Express®  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery	
2. Article Number (Transfer from service label) 7014	4. Restricted Delivery? (Extra Fee) Yes	
PS Form 3811, July 2013 Domestic Ret	urn Receipt	

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58	U.S. Postal S CERTIFIEL Domestic Mail On	O MAIL® RECEIPT	
34	For delivery inform	ation, ENCANA/BLANCO WASH	
ف	OFF	" VER	
7496	Postage	5 OF NVER, CO	$\sqrt{}$
	Certified Fee	( SEPSIT 2x 2014)	
1000	Return Receipt Fee (Endorsement Required)	Here	J
디	Restricted Delivery Fee (Endorsement Required)	SPS 80707	_
182	Total Postage & Fees	\$	
<b>_</b>	Sent To	SIMPSON, AARON D	_
7014	Street & Apt. N	PO BOX 593 FARMINGTON, NM 87499	-
	PS Form 3800		,

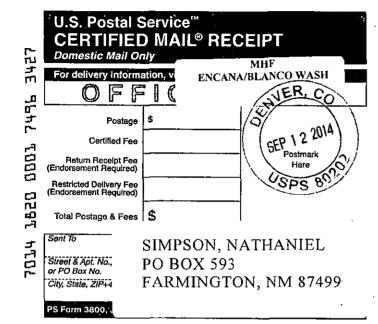
·	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>SIMPSON, AARON D</li> </ul>	A. Signature  X
' PO BOX 593	
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1820 0001 7496 3458	
PS Form 3811, July 2013 Domestic Ret	urn Receipt



hEhE F	U.S. Postal S CERTIFIED Domestic Mail Or For delivery information	D MAIL® RECEIPT
7496	Postage	\$
_	Certified Fee	(2) 22 201A)
1000	Return Receipt Fee (Endorsement Required)	Bosthark St Here
Lu Lu	Restricted Delivery Fee (Endorsement Required)	USPS 860
100	Total Postage & Fees	l <b>s</b>
<u> </u>	Sent To	SIMPSON, GLEN
7014	Street & Apt. No., or PO Box No.	PO BOX 393
•	City, State, ZIP+4	FRUITLAND, NM 87416
	PS Form 3800, J	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Agent  Addressee  B. Received by (Printed Name) GT (Q) Date of Delivery  D. Is delivery address different from them 17 (E) Yes
SIMPSON, DELORES PO BOX 593	If YES, enter delivery address below: 150 No
FARMINGTON, NM 87499	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 3441
PS Form 3811, July 2013 Domestic Re	turn Receipt

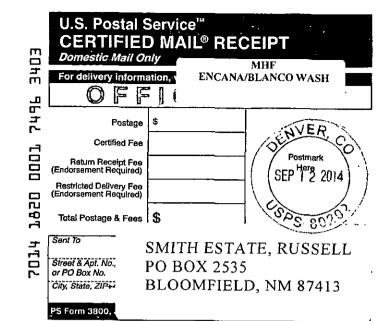
	744.3.4
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Separative Agent  X Coll Coll Coll College Agent  B. Received by (Printed Name)  Belinda Simpson  College Agent  College Ag
1. Article Addressed to: SIMPSON, GLEN	D. Is delivery address different from item 1?
PO BOX 393 FRUITLAND, NM 87416	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014	1820 0001 7496 3434
PS Form 3811, July 2013 Domestic Retu	ırn Receipt



6 3410	U.S. Postal S CERTIFIED Domestic Mail On For delivery Information	O MAIL® REC	MHF A/BLANCO WASH	
0001 7496	Postage Certified Fee Return Receipt Fee (Endorsement Required)	\$	DEN CO Postmark Here	CER CO
1.820	Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	\$	60202	<i>/</i>
7 <b>0</b> 14	Street & Apt. No or PO Box No.	SIMPSON, TR PO BOX 593 FARMINGTO		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY .	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  G COpte of Delivery  D is delivery address different from item 47	
1. Article Addressed to: SIMPSON, NATHANIEL PO:BOX 593	D. Is delivery address different from item 47 (1) (2) If YES, enter delivery address below 5 (2) (3) (3) (5) (5) (5) (5) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6	
FARMINGTON, NM 87499	3. Service Type  Certified Mail* Priority Mall Express* Registered Return Receipt for Merchandise Insured Mail Collect on Delivery	
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee)	
PS Form 3811, July 2013 Domestic Return Receipt		

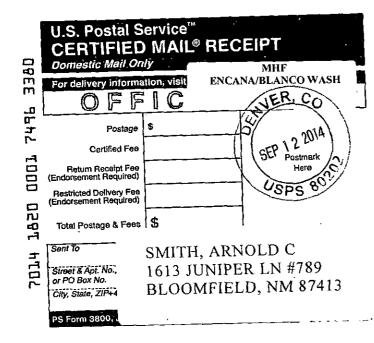
The state of the s		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul> SIMPSON, TRACIE N	A. Signature  X	
PO BOX 593	Was .	
FARMINGTON, NM 87499	3. Service Type  Gretified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Collect on Delivery	
<u> </u>	4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number 7014 18	320 0001 7496 3410	
PS Form 3811, July 2013 Domestic Return Receipt		



	U.S. Postal S	Service™
	CERTIFIED	MAIL® RECEIPT
97	Domestic Mall Or	
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<u></u>	<u>OFF</u>	VER, CO
7496	Postage	s on4
	Certified Fee	SEP 12 2014
1000	Return Receipt Fee (Endorsement Required)	Here
	Restricted Delivery Fee (Endorsement Required)	USPS 80
1820	Total Postage & Fees	\$
7	Sent To	SMITH, ALFRED
7014	I OF PU DUX INO.	PO BOX 1406
	City, State, ZIP+4	BLOOMFIELD, NM 87413
	PS Form 3800, 2	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by Printed Name  C. Date of Delivery  D. Is delivery address different from item 1?
SMITH ESTATE, RUSSELL PO BOX 2535	If YES, enter delivery address below:   9/15/14
BLOOMFIELD, NM 87413	3. Service Type ☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7.014 1.82 (Transfer from service label)	20 0001 7496 3403
PS Form 3811, July 2013 Domestic Ref	turn Receipt

<u> </u>	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  (C) Addresse  B. Received by (Printed Name)  C. Date of Deliver  9-16-19
1. Article Addressed to:  SMITH, ALFRED PO BOX 1406	D. Is delivery address different from item 1?  If YES, enter delivery address below:  If No
BLOOMFIELD, NM 87413	3. Service Type  Gertified Mail* Priority Mail Express* Registered Return Receipt for Merchandis Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number 7014 1	B20 0001 7496 3397



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to: SMJTH, ARNOLD C	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
1613 JUNIPER LN #789	<u> </u>
BEOOMFIELD, NM 87413	3. Service Type  Gretified Mail* Priority Mail Express**  Gregistered Return Receipt for Merchandise  Gretinal Mail* Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	14 1820 0001 7496 3380

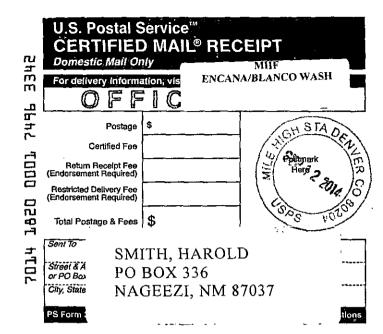
73	U.S. Postal S CERTIFIED Domestic Mail On	D MAIL® RECEIPT	. 3
EU.	For delivery informa	ation, vi ENCANA/BLANCO WASH	
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구나라	Postage	\$ OFT	(G) /
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0007	Return Receipt Fee ( (Endorsement Required)	Here	ムノ
3 02	Restricted Delivery Fee (Endorsement Required)	SPS 80	
1.65	Total Postage & Fees	ls .	٠_
#	Sent To S	SMITH, BERTHA M	
7014	Street & Apt. N 3	309 N 3RD ST SP #56	-1
<b>!~</b>	or PO Box No. City, State, ZIP	BLOOMFIELD, NM 87413	-
	PS Form 3800		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4-if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Storature  A. Storature  A. Storature  A. Storature  A. Storature  A. Storature  Agent  D. Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. 18 / U  D. 18 delivery address different from item 1?  Yes
1. Article Addressed to:  SMITH, BERTHA M 309 N 3RD ST SP #56	if YES, enter delivery address below:
BLOOMFIELD, NM 87413	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Marchandise ☐ Insured Mail ☐ Collect on Delivery ; %  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	1820 0001 7496 3373
PS Form 3811, July 2013 Domestic Reto	urn Receipt



59	U.S. Postal Service <sup>TO</sup> CERTIFIED MAIL® RECEIPT Domestic Mail Only
Ę	For delivery information, visit ou ENCANA/BLANCO WASH
<u> </u>	<u> </u>
7496	Postage \$
1000	Postage \$ Certified Fee Return Receipt Fee (Endorsament Required) Restricted Delivery Fee
1820	Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$
7034	Sent To Street & Api. No. or PO Box No. City, State, ZiP4 PS Form 3800 SMITH, EDDIE L PO BOX 1987 BLOOMFIELD, NM 87413

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Chystine Levalo  Agent  C. Date of Delivery	
Article Addressed to:	D. Is delivery address different from Item 17 💆 Yes	
	If YES, enter delivery address below:   No	
SMITH, CHRISTINE M PO BOX 1191 IGNACIO, CO 81137	3. Service Type	
1017/1010, 00 8(1)3/	☐ Certiffed Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) Yes	
2. Article Number (Transfer from service label) 7014	1820 0001 7496 3366	
SENDER: COMPLETE THIS SECTION  ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ 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  A. Signature  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  If YES, enter delivery address below:	
SMITH, EDDIE L PO BOX 1987	3. Service Type	
BLOOMFIELD, NM 87413	☐ Certified Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number (Transfer from service label) (Transfer from service label)		
PS Form 3811, July 2013 Domestic Re	turn Receint	

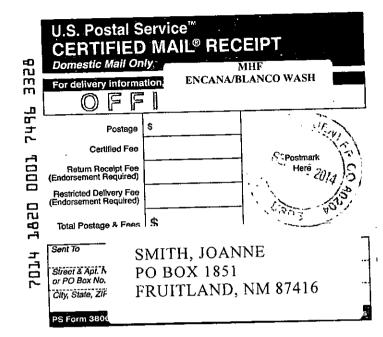


35	U.S. Postal S CERTIFIED Domestic Mail On	MAIL® RECEIPT
E E	For delivery informa	
	OFF	
구나라	Postage	\$
	Certified Fee	
0001	Return Receipt Fee (Endorsement Required)	Postmark Here
	Restricted Delivery Fee (Endorsement Required)	\$ 13
1620	Total Postage & Fees	s
		MITH, HOWARD
7014	I Street & ADL I	O LEVI SMITH
7	************	O BOX 405
	City, State, ZI	AGEEZI, NM 87037
	es Form 380	າຮຸ

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete: item 4 if Restricted Delivery Is desired.  ■ 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:  SMITH, HAROLD PO BOX 336 NAGEEZI, NM 87037	A. Signature  X. Cacal Stant B. Addressee  B. Received by (Printed Name)
(Transfer from service label) 7014 1820 0001 7496 3342	
PS Form 3811, July 2013 Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  SMITH, HOWARD C/O LEVI SMITH PO BOX 405 NAGEEZI, NM 87037	A. Signature  X. fem B. Fm   Agent   Addressee  B. Received by (Printed Name)   C. Date of Delivery  IEN 15.   MITH   MILLY  D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:   No  3. Service Type    Certified Mail   Priority Mail Express*     Registered   Return Receipt for Merchandise   Insured Mail   Collect on Delivery
·	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 701,4 182 (Transfer from service label)	0 0001 7496 3335
PS Form 3811, July 2013 Domestic Retu	urn Receipt

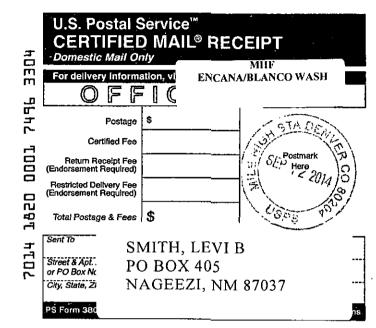




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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Ol.   G. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1?
SMITH, JOANNE	
PO BOX 1851 FRUITLAND, NM 87416	3. Service Type  Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 1	856 9642 TOOO 058
PS Form 3811, July 2013 Domestic Reti	urn Receipt

3311	U.S. Postal Service™  CERTIFIED MAIL® RECEIPT  Domestic Mail Only  For delivery information,	
	OFFIL	
구나님	Postage \$	`
1000	Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	
1820	Total Postage & Fees \$	7
7014	SMITH, JOHNATHAN  Street & Apt. 1 or PO Box No. City, State, Zii  ALAMOSA, CO 81101	
	PS Form 380	s

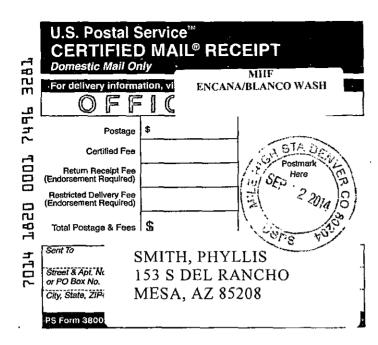




98	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only MHF	
33	For delivery information, vis ENCANA/BLANCO WASH	
	OFFIC	
구부되면	Postage \$	
	Certified Fee	12/
1000	Return Receipt Fee (Endorsement Required)	1)8)
	Restricted Delivery Fee (Endorsement Required)	ξ <sup>8</sup> /
1.620	Total Postage & Fees \$	
7014	SMITH, MAE L	]
Ë	Street & Apt. N or PO Box No. PO BOX 161	1
. –	City, State, ZIP NAGEEZI, NM 87037	٦
	PS Form 3800	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  SMITH_LEVIB	A. Signature  X. Jew B. Swith Addressee  B. Received by (Printed Name)  C. Date of Delivery  LEV S. Swith H. Pres  If YES, enter delivery address below:  No
PO BOX 405	3. Service Type
NAGEEZI, NM 87037	☐ Registered ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014 18	20 0001 7496 3304
PS Form 3811, July 2013 Domestic Ret	urn Recelpt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X JOHN SMITH Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  AMD SMITH
Article Addressed to:	D√Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
SMITH, MAE L PO BOX 161	
NAGEEZI, NM 87037	3. Service Type  Certified Mail* Priority Meil Express** Registered Return Receipt for Merchandise Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 18	20 0001 7496 3298
PS Form 3811, July 2013 Domestic Ret	urn Receipt



3274	U.S. Postal Service CERTIFIED MAIL® RECEIPT  Domestic Mail Only	
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	Certified Fee Return Receipt Fee	
1000	(Endorsement Required)	١
	Restricted Delivery Fee (Endorsement Required)	
1.820	Total Postage & Fees \$	_
Ŧ,	SMITH, ROLAND	1
7074	Street & Apr. No or PO BOX 1676	
	City, State, ZiP+ CROWNPOINT, INIVI 67313 PS Form 3800,	

<b>3</b> .	· Variable American
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X.
SMITH, ROLAND PO BOX 1676 CROWNPOINT, NM 87313	3. Service Type Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise Insured Mail
المسارة فما المائية المائية المائية المائية	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7014 1	820:0001/7,498 3274/
PS Form 3811, July 2013 Domestic R	eturn Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only MHF For delivery information, vi-ENCANA/BLANCO WASH 74 Postage Certified Fee Postmarki Here 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1820 Total Postage & Fees \$ Sent To SMITH, STANLEY Street & Apt. No., PO BOX 1943 or PO Box No. BLOOMFIELD, NM 87413 City, State, ZIP+4 PS Form 3800,

3250	U.S. Postal S CERTIFIED Domestic Mail Or For delivery informa	D MAIL® RECEIPT  MHF  ENCANA/BLANCO WASH
<b>기사</b>	Postage	\$ (31+DEV)
	Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	SEP Postmark (1) (1) Here 2014
	Restricted Delivery Fee (Endorsement Required)	750
7.85	Total Postage & Fees	s GPS
<u> </u>	Sent To	SOCE, ELEANOR G
7014	Street & Apt. No., or PO Box No.	818 EAST MAIN #22
~	City, State, ZIP+4	FARMINGTON, NM 87401
	PS Form 3800 -1	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  A A A A A A A A A A A A A A A A A A A
Article Addressed to:	D. Is delivery address different from item 1? Des If YES, enter delivery address below:
SMITH, STANLEY PO BOX 1943;	
BLOOMFIRED; NM 87413	3. Service Type  Certified Mail® Priority Mail Express®  Registered Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	1820 10001 17498 3267.
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X JUNOT SCC   D. Agent  D. Addressee  B. Received by (Printed Name)  D. Date of Delivery  D. C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
SOCE, ELEANOR G 818 EAST MAIN #22	SEP SEP
FARMINGTON, NM 87401	3. Service Type (Z)

☐ Certified Man Priority Mail Express"
☐ Registered ☐ Repure Registered ☐ Insured Mail ☐ Collect on Delivery

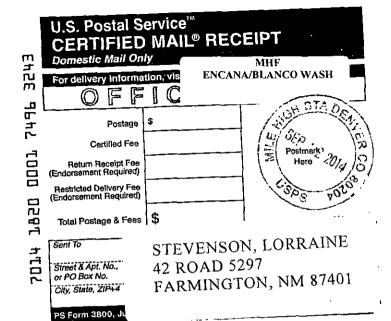
4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Transfer from service label)

7014 1820 0001 7496 3250

PS Form 3811, July 2013



323 <b>6</b>	U.S. Postal S CERTIFIED Domestic Mail On For delivery informa	MAIL® REC	EIPT MHF BLANCO WASH
	OFF	. 15	
구나되면	Postage	\$	LIGH STA DE
	Certified Fee		Postmark P
1000	Return Receipt Fee (Endorsement Required)		Here 2014 C
	Restricted Delivery Fee (Endorsement Required)		1000 VOE VOE VOE
1,820	Total Postage & Fees	\$	
4	Sent To	STRUBLE, SI	HARON A
7014		10606 TRIGG SAN ANTON	

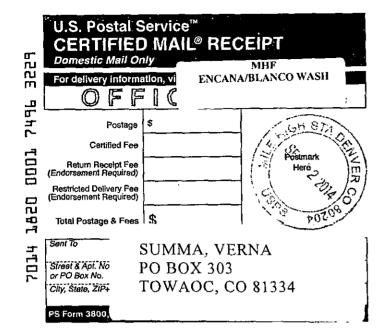
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  STEVENSON, LORRAINE	A. Signature    Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     L. M. C.   C. Date of Delivery     D. Is delivery address different from item 17   Ses     If YES, enter delivery address Delow:   L. N. C.     Agent   Addressee     Agent   Addressee     Addressee
· 42 ROAD 5297 蟹	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
FARMINGTON, NM 87401 =.	3. Service Type
	☐ Certified Mail* ☐ Priority Mail Express** ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
, I	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7014 18 ((Transfer from service label) PS Form 3811, July 2013  Domestic Ret	20 0001 7496 3243 urn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
, 1. Article Addressed to:	D. Is delivery address different from item 1?
STRUBIE, SHARON A	

2. Article Number (Transfer from service label)

7014 1820 0001 7496 3236

- PS Form 3811, July 2013

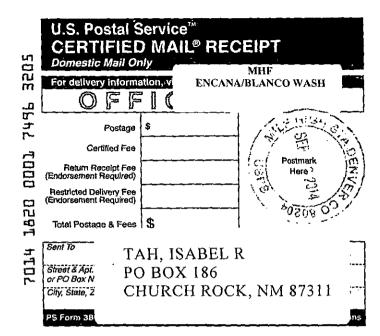
SAN ANTONIO, TX 78254



3212	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® RECEIPT
<u>п</u>	For delivery informa	tion, ENCANA/BLANCO WASH
구나님은	Postage	s HIGH STA
	Certified Fee	1/4000 1901
1000	Return Receipt Fee (Endorsement Required)	Rostmark Here
	Restricted Delivery Fee (Endorsement Required)	15 %
1820	Total Postage & Foes	\$ 70708
ᠴ	Sent To	TACHINE, ANNA ROSE
7014	or PO Boy No	PO BOX 69 CUBA, NM 87013
	PS Form 3800,	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
SUMMA, VERNA PO BOX 303	
TOWAOC, CO 81334	3. Service Type  Gertifled Mall* Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
****	4. Restricted Delivery? (Extra Fee)
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A Signature
so that we can return the card to you.  Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Deliver
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.	X Constant   Agent   Addresse   B. Received by (Printed Name)   C. Date of Deliver
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:  TACHINE, ANNA ROSE PO-BOX 69	X Church Tachery ☐ Agent ☐ Addresse  B. Received by (Printed Name) ☐ Date of Deliver  Anna Tacher ☐ 17 ☐ Yes  If YES, enter delivery address below: ☐ No
<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> <li></li></ul>	X Constant ☐ Agent ☐ Addresse  B. Received by (Printed Name) ☐ Date of Deliver  Anna Tach ne 7 19—14  D. Is delivery address different from item 1? ☐ Yes
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:  TACHINE, ANNA ROSE PO-BOX 69	Agent Addresse B. Received by (Printed Name) C. Date of Delivery Anna Tachine D. Is delivery address different from item 1? Wes If YES, enter delivery address below:  3. Service Type Certified Mail Registered Return Receipt for Merchandise
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:  TACHINE, ANNA ROSE PO BOX 69  CURA, NM 87013	X Constant □ Addresse      B. Received by (Printed Name) □ C. Date of Deliver      Anna Tachine □ Priority Mail Express* □ Registered □ Return Receipt for Merchandis □ Insured Mail □ Collect on Delivery      □ Addresse □ Addresse □ Addresse □ Addresse □ Addresse □ No      Service Type □ Certified Mail* □ Priority Mail Express* □ Registered □ Return Receipt for Merchandis □ Insured Mail □ Collect on Delivery





7,9	Domestic Mail Only
	ENCANA/BLANCO WASH
L.	
74 AF	Postage \$
7	Certified Fee
0007	Return Receipt Fee (Endorsement Required) Postmark
20	Restricted Delivery Fee (Endorsement Required)
7	Total Postage & Faes \$
≢	Sent To
7014	TALAMANTE, MARILYN L or PO BOX No. PO BOX 921
	City, State, ZIP+ AZTEC, NM 87410
	PS Form 3800;

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  - IS-(4)		
Article Addressed to:	D. Is delivery address different from item 17 D Yes  If YES, enter delivery address below: D No		
TAH, ISABEL R PO BOX 186 CHURCH ROCK, NM 87311	3. Service Type  G Certified Mali® Priority Mali Express™  Registered Return Receipt for Merchandise  I Insured Mall Collect on Delivery		
	4. Restricted Delivery? (Extra Fee)		
2. Article Number (Transfer from service label) 7014 1820 0001 7496 3205 PS Form 3811, July 2013 Domestic Return Receipt			
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY  A. Signature		
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Natural)  C. Date of Delivery		
TALAMANTE, MARILYN L PO BOX 921	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: D No  SEP 1 7 2014		
AZTEC, NM 87410	3. Service Type  Gertified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)		
2. Article Number			
(Transfer from service label) 7 [] ], 4 ], 5	320 0001 7496 3199		

PS Form 3811, July 2013

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT Domestic Mail Only 3182 MHF ENCANA/BLANCO WASH For delivery information, 7496 Postage Certifled Fee 1000 Postmark-USPS Return Receipt Fee (Endorsement Required) Here. Restricted Delivery Fee (Endorsement Required) 1820 Total Postage & Fees \$ TALLWOOD, CLAUDEEN Sent To 7014 PO BOX 944 Street & Apt. No., or PO Box No. NAVAJO, NM 87328 City, State, ZIP+4 PS Form 3800, J

ιη	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® RECEIPT
3175		WINT
m	For delivery informa	tion, ENCANA/BLANCO WASH
	OFF	
1964	Postage	s USA STA ORA
	Certified Fee	1 10 10 10 10 10 10 10 10 10 10 10 10 10
0003	Return Receipt Fee (Endorsement Required)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Restricted Delivery Fee (Endorsement Required)	Gos votos
1.820	Total Postage & Fran	le l
7074	Sent To	THOMAS, EVELYN W
	Street & Apt. No.,	PO BOX 872
<b>L</b> ~	or PO Box No. City, State, ZIP+4	CHINLE, AZ 86503
	PS Form 3800, J	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>THOMAS, EVELYN W</li> <li>POBOX 872</li> </ul>	A. Signature    Agent   Addressee     Addressee   C. Date of Delivery     Addressee   C. Date of Deliv
CHINLE, AZ 86503	3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	11820 0001 24961/3175
PS Form 3811, July 2013 Domestic Ret	urn Receipt
· ••	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
Domestic Mail Only 3168 MHF For delivery information, visit ENCANA/BLANCO WASH 구나라 NGH STAO Postage Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1.820 Total Postage & Fees \$ Sent To 7014 THOMPSON, MAURICE Street & Apt. No or PO Box No. 1912 PROSPECT NW ALBUQUERQUE, NM 87104 City, State, ZiP+ PS Form 3800

3151	U.S. Postal S CERTIFIED Domestic Mail Or	D MAIL® RECEIPT
E I	For delivery inform	ation, visit ENCANA/BLANCO WASH
	OFF	S I C
<b>7</b> ዛግЬ	Postage	\$ DENVER CO
	Certified Fee	60
0007	Return Receipt Fee (Endorsement Required)	Postmark A C Postm
	Restricted Delivery Fee (Endorsement Required)	[重] //
7.82D	Total Postage & Fees	\$ 1977 11596
<u></u>	Sent To	THOMPSON, PAUL
ን በ ጌ ት	Street & Apt. No., or PO Box No.	BOX 1736
	City, State, ZIP+4	FARMINGTON, NM 87499
	DC Corre agon :	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X7  Agent  Mari Cello MpSin 9-16-14  D. Is delivery address different from item 1? 19 Yes  If YES, enter delivery address below: 2000 PAGENTAL PROPERTY
THOMPSON, MAURICE 1912 PROSPECTINW ALBUQUERQUE, NM 87104	3. Service Type  ☑ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number (Transfer from service label) 7014 1.8	4. Restricted Delivery? (Extra Fee)

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Du Mrup
Article Addressed to:	D. Is delivery address different from item 1?
THOMPSON: PAUL BOX 1736	S BUSE N
FARMINGTON NM 87499	3. Service Type  Certified Mail* Priority Mail Express*  Registered Receipt for Merchandise  Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014	1820 0001 7496 3151
PS Form 3811, July 2013 Domestic R	eturn Receipt

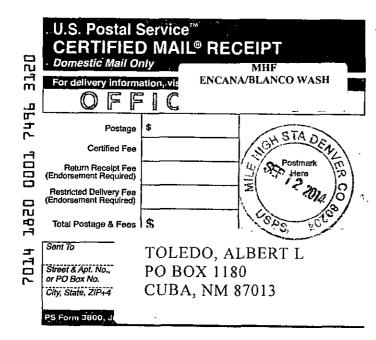


	PS Form 3800		ş
	U.S. Postal S	Service' <sup>™</sup> D MAIL® RECEIPT	
E L	Domestic Mail O		
<b>6</b> 3137	For delivery inform	STA DE	
7496	Postage Certified Fee	s , 3	
000	Return Receipt Fee (Endorsement Required)	Posithery O Here o	
1820	Restricted Delivery Fee (Endorsement Required)		•
	Total Postage & Fees Sent To	TOLEDO ESTATE,	1
7014	City State ZIP+	DALPHINE PO BOX 831 CUBA, NM 87013	

PS Form 3800,

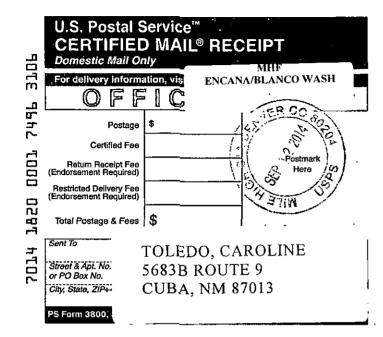
57 Talk berett	Carlo Barrer Barrer Carlo
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	B. Regelved by (Printed Name)  C. Date of Delivery  Des delivery address different from item 1? Yes  If YES, enter delivery address below:
TODACHEENE, LULA C 1676 HOLLYBERRY CT NE RIO RANCHO, NM 87144	3. Service Type  Certified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	1820 0001 7496 3144 "
PS Form 3811, July 2013 Domestic Ret	urn Receipt

REfurN



3113	U.S. Postal CERTIFIEI  Domestic Mail O	D MAIL® RECEIPT
M	For delivery inform	ation, vis ENCANA/BLANCO WASH
	OFF	I C
7476	Postage	\$ 3.30
	Certified Fee	
1000	Return Receipt Fee (Endorsement Required)	Postmark O Here
	Restricted Delivery Fee (Endorsement Required)	
1.8	Total Postage & Fees	s V5 V5
<u> </u>	Sent To	TOLEDO, ANDY
7074	Street & Apt. No., or PO Box No.	HCR 79 BOX 3089
	City, State, ZIP+4	CUBA, NM 87013
	PS Form 3800, J	

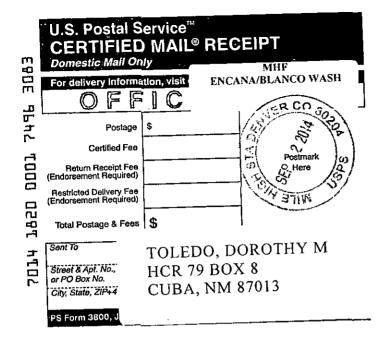
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  TOLEDO, ALBERT L PO BOX 1380	A. Signature  Agent Addressee  B. Received by (Printed Delivery  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:
CUBA, New 87013	3. Service Type  Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery Restricted Delivery? (Extra Fee)
(Transfer from service label) 7014 183	10 (0001 7496)(3120° ° '
PS Form 3811, July 2013 Domestic Ret	urn Receipt



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A.
1. Article Addressed to: TOLEDO, CAROLINE	If YES, enter delivery address below: ☐ No
5683B ROUTE 9 CUBA, NM 87013	3. Service Type Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	1820 DOD1 7496 3106
PS Form 3811, July 2013 Domestic Re	turn Recelpt

130	Domestic Mail Or	D MAIL® RECEIPT
E	For delivery informa	, ,, <del>_</del>
. ھ		
ንዛዋሴ	Postage	\$
	Certified Fee	Postmark Po
1000	Return Receipt Fee (Endorsement Required)	Postmark Postmark Heres
	Restricted Delivery Fee (Endorsement Required)	
1.82	Total Postage & Fees	Is Section
<b>-</b>	Sent To	TOLEDO, DAVID
7014	Street & Apt. No.,	C/O NELLIE TOLEDO POA
7	or PO Box No.	HCR 79 BOX 3065
	City, State, ZiP+4	CUBA, NM 87013
	PS Form 3800, Ju	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X
TOLEDO, DAVID C/O NELLIE TOLEDO POA HCR 79 BOX 3065 CUBA, NM 87013	3. Service Type
	☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014	1820 0001 7496 3090
PS Form 3811, July 2013 Domestic R	eturn Receipt



307b	U.S. Postal S CERTIFIED Domestic Mail Or	MAIL® RECEIPT
	For delivery informa	tion, vis ENCANA/BLANCO WASH
	OFF	
<u> </u>	Postage	s Cole
	Certified Fee	13/2
1000	Return Receipt Fee (Endorsement Required)	Postmark Here
	Restricted Delivery Fee (Endorsement Required)	10,88 /89/
1.820	Total Postage & Fees	\$ 37111
<b>=</b>	Sent To	TOLEDO, EVANGELINE
7014	Street & Apt. No., or PO Box No.	PO BOX 1781
<b>_</b>	City, State, ZIP+4	CUBA, NM 87013
	PS Form 3800, J	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X MAM Profile Agent  B. Received by (Printed Name)  C. Date of Deliver  Ryon Profile 5+ 9/15/14
Article Addressed to:	D. Is delivery address different from item 1? ☐ Xes  If YES, enter delivery address below: ☐ No
TOLEDO, DOROTHY M HCR 79 BOX 8	
CUBA, NM 87013	3. Service Type  ☐ Certifled Mail® ☐ Priority Mail Express® ☐ Registered ☐ Return Receipt for Merchandis ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7014	1010 0001 Tues 2012
(Transfer from service label)	1820 0001 7496 3083
PS Form 3811, July 2013 Domestic	Return Receipt
PS Form 3811, July 2013 Domestic SENDER: COMPLETE THIS SECTION	Return Receipt  COMPLETE THIS SECTION ON DELIVERY
PS Form 3811, July 2013  Domestic  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent Addresse B. Received by (Printed Name)  C. Date of Deliver
PS Form 3811, July 2013  Domestic  SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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,	COMPLETE THIS SECTION ON DELIVERY  A. Signature  Agent Addresse B. Received by (Printed Name)  C. Date of Deliver

3. Service Type
☐ Certified Mail\*
☐ Registered
☐ Insured Mail
☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

7014 1820 0001 7496 3076

(Transfer from service label)
PS Form 3811, July 2013

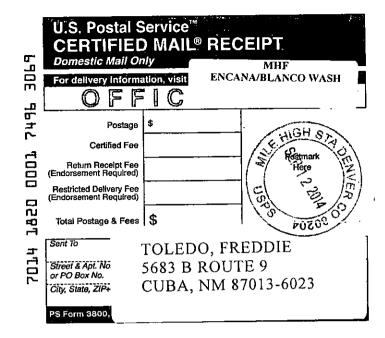
2. Article Number

CUBA, NM 87013

Domestic Return Receipt



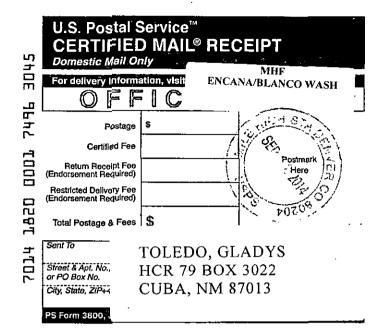
Yes



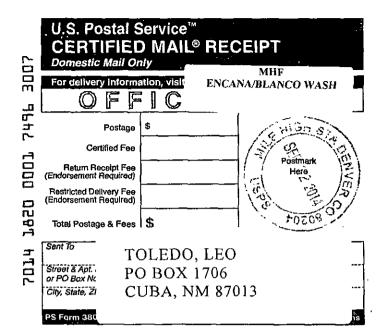
, 3052	U.S. Postal S CERTIFIE  Domestic Mail Of For delivery Inform	D MAIL® R	ECEIPT  MHF  ANA/BLANCO	WASH	
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	Certified Fee		1/9/	SS /	$\sigma/$
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	Restricted Delivery Fee (Endorsement Required)				<u> </u>
1820	Total Postage & Fees	\$	100	NE 00 30	<i>Y</i>
<u>+</u> 1	Sent To	OLEDO, C	GEORGE	В	٦
7034	F	O BOX 12			-
•	City, State, ZIP.	UBA, NM	87013		-
	PS Form 3800				

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Signature  A. Agent  A. Signature  A. Sig
TOLEDO, EREDDIE  5683 B ROUTE 9	If YES, enter delivery address below:   No
CUBA, NM: 87013-6023	3. Service Type  ☐ Certified Mail* ☐ Priority Mall Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mali ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 18	20, 0001 7496( 3069 *****
PS Form 3811, July 2013 Domestic Ro	eturn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the malipiece, or on the front if space permits.</li> </ul>	A. Signature  X (1001/1001112)
Article Addressed to:	D. is delivery address different from item 1?  If YES, enter delivery address below:  No
TOLEDO, GEORGE B	

Complete terms 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:	X (LOULANCE   Agent   Addressee  B. Received by (Printed Name)   C. Date of Delivery
TOLEDO, GEORGE B PO BOX-1255	
CUBANN 87013	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 701 (Transfer from service label)	4 1820 0001 7496 3052
- PS Form 3811, July 2013 Domestic Ret	turn Receipt

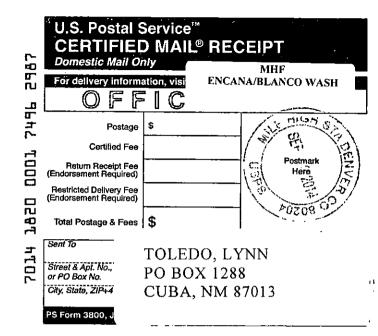


38	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
	For delivery information, visit ENCANA/BLANCO WASH	
م_	<u>OFFIC</u>	
구유하는	Fostage \$	
	Certified Fee  Return Receipt Fee	
0003	Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee	١
	Restricted Delivery Fee (Endorsement Required)	Į
1.62	Total Postage & Fees \$	
<u>+</u>	TOLEDO, JENNIE	
7014	Street & Apt. Ni or PO Box No. HCR 79 BOX 3011	•
1-	City, State, ZIP. CUBA, NM 87013	
	PS Form 3800	J



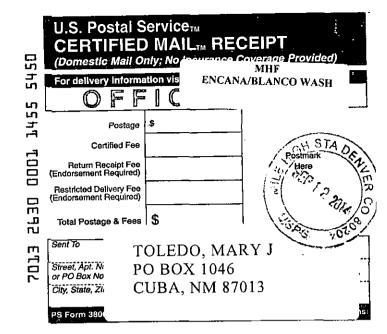
74	U.S. Postal S CERTIFIED  Domestic Mail On	MAIL® RECEIPT
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구사님	Postage	\$ 167.69
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1,000	Return Receipt Fee (Endorsement Required)	Postmark Here
$\Box$	Restricted Delivery Fee (Endorsement Regulred)	
1.67	Total Postage & Fees	\$ 10200
<u></u>	Sent To	ΓOLEDO, LORRAINE
7014	Street & Apt. No or PO Box No.	HCR 79 BOX 3021
•	City, State, ZIP+	CUBA, NM 87013
	PS Form 3800,	

·	<b>!</b>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X
TOLEDO, LEO PO BOX 1706 CUBA, NM 87013	If YES, enter delivery address below:  No  No  No  Service Type  Certified Mall* Priority Mail Express**
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
<u> </u>	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7014 185	20 0001 7496 3007
PS Form 3811, July 2013 Domestic Retu	urn Receipt



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0007	Return Receipt Fee (Endorsement Required)		אן עבשויו ויכן	
30 0	Restricted Delivery Fee (Endorsement Required)	<u></u>	And S	7
263	Total Postage & Fees	\$	Con Front	
щ	Sent To	TOLEDO, MA	.RILYN	1
7013	Street, Apt. No.; or PO Box No.	O BOX 1288		1
•	City, State, ZIP+	CUBA, NM 87	7013	1
	PS Form 3800, i			1

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3, Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X Manual Toldo Addressee  B. Received by (Printed Name) C. Date of Delivery  Mari (VII Toldo 9/15/14)  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
TOLEDO, LYNN PO BOX 1288 CUBA, NM 87013	3. Seprice Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 70141.	820 0001 7496 2987
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X MANIGHA TOLLAR Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  Arilyn Tolese  91514
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
TOLEDO, MARILYN	
PO BOX 1288	3. Service Type
CUBA, NM 87013	☐ Certified Mall* ☐ Priority Mall Express'* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7013	2630,0001 1442,0543
PS Form 3811, July 2013 Domestic Re	turn Receipt



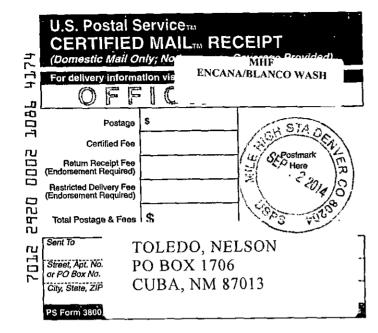
7 7	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT  Domestic Mail Only  MHF	
1820 0081 7496 3021	For delivery information, vi  OFFIC  Postage \$ Certified Fee  Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$	18
7014	TOLEDO, MICHAEL  Street & Apt. N or PO BOX 1706 CIB; State, ZIF  PS Form 3800	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  D. Agent  C. Date of Delivery  D. Is delivery address different from item 1?  Agent  D. Yes
Article Addressed to:	If YES, enter delivery address below:   No
TOLEDO, MARY J PO BOX H046	
CUBA, NM 87013	3. Service Type  Certified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
·	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	2630 0001 1455 5450
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse	A. Signature  X. M. Addressee
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.	B. Received by (Printed Name) C. Date of Delivery  Michael College 9/15/14
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
TOTATO MICHAEL	
TOLEDO, MICHAEL PO BOX 1706	
CUBA, NM 87013	3. Service Type  Grentified Mail® Priority Mail Express**  Registered Return Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
2. Article Number 7014 182 (Transfer from service label)	Insured Mail

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT 3014 Domestic Mail Only MHF ENCANA/BLANCO WASH For delivery information, visi 7496 Postage Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1820 Total Postage & Fees S Sent To TOLEDO, NATASHIA R 7034 Street & Apt. No., or PO Box No. PO BOX 2276 FARMINGTON, NM 87499 City, State, ZIP+4 PS Form 3800,

	U.S. Postal S	Service <sub>TM</sub> D MAIL <sub>TM</sub> RECEIPT
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0005	Return Receipt Fee (Endorsement Required)	S CH STA OF Postmark  Postmark  Postmark  R Postmark  R Postmark
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	Total Postage & Fees	
и	Sent To	TOLEDO, NELLIE
7012	l ar PO Box No.	HCR 79 BOX 3065
,-	City, State, ZIP+4	CUBA, NM 87013
	PS Form 3800, A	

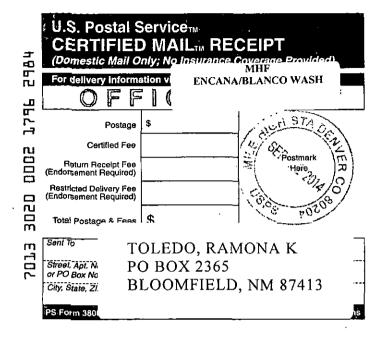
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Mulda Dir Male Agent  B. Received by (Printed Name)  C. Date of Delivery  Canelog Griffith
Article Addressed to:	D. Is delivery address different from item 1?
TOLEDO, NELLIE HCR 79 BOX 3065	
CUBA, NM 87013	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number (Transfer from service label) 7012 2	4. Restricted Delivery? (Extra Fee) ☐ Yes  920 0002 1086 4181
PS Form 3811, July 2013 Domestic Ret	urn Receipt



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. L. L. L. Agent  D. Addressee  B. Received by (Printed Name)  C. Date of Delivery  Michael Tolk 9115114
1. Article Addressed to: TOLEDO, NELSON	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
PO BOX 17.06 CUBA, NM 87013	3. Service Type  Certified Mall® Priority Mail Express® Priority Priority Mail Express® Priority Priority Mail Express® Priority Priority Mail Express® Priority P
2. Article Number (Transfer from service label) 7012 2	920 0002 1086 4174
PS Form 3811, July 2013 Domestic Re	turn Receipt

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(Endomement Required)	SPS VOTO	
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กบุ <sup>Sent To</sup> TO	LEDO, PETTERSON J	
Street, Apt. PO	BOX 2172	_
City, State, CU	JBA, NM 87013	╛
PS Form 3	or	18,

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mallpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1? Yes  If YES, enter delivery address below:
TOLEDO, RETTERSON J PO BOX 2472	
CUBA, NM 87013	3. Service Type  Certified Mail® Priority Mail Express®  Registered Return Receipt for Merchandise  Insured Mail
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7012	2920 0002 1086 4167
PS Form 3811, July 2013 Domestic Re	eturn Receipt



5 2 2 2	U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery Information visit  OFFICE	
1796	Postage \$ at STA Oa	
3050 0005	Postage \$ Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$	)
7013	Sent To  TOLEDO, RANDY  Street, Apt. 1 or PO Box N  City, State, 2  CUBA, NM 87013	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Loudy The Agent  Addressee  B. Boceived by (Printed Name)  C. Dale of Delivery  2 1919
1. Article Addressed to: TOLEDO, RANDY	D. Is delivery address different from item 1? ' Yes ' If YES, enter delivery address below: No
HCR 79 BOX 3010 CUBA, NM 87013	3. Service Type Contified Mail® Priority Mail Express** Registered Receipt for Marchandise Insured Mail
2. Article Number (Transfer from service label) ( 7013 30	4. Restricted Delivery? (Extra Fee) ☐ Yes 20 0002 1796 2977
PS Form 3811, July 2013 Domestic Ret	turn Receipt

U.S. Postal Service TEM CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) ENCANA/BLANCO WASH For delivery Information visit 2 7 Postage Certified Fee 2000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 3020 Total Postage & Fees S TOLEDO, RUDY ш 701 Street, Apt. No or PO Box No **BOX 1374** CUBA, NM 87013 City, State, Zi. PS Form 380

	COMPLETE THE CECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. M. August Agent Addressee  B. Received by (Printed Name) C. Date of Delivery  Mary Well—15_L_[
Article Addressed to:	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No
TOLEDO, RUDY BOX 1374 CUBA, NM 87013	3. Service Type  Cartified Mail® Priority Mail Express"  Registered Receipt for Merchandise
	☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013	3050 0005 1346 5460
PS Form 3811, July 2013 Domestic Re	turn Receipt

53		D MAIL RECEIPT Only; No Insurance Coverage Provided)
29	For delivery information	MHF ation visi ENCANA/BLANCO WASH
35	OFF	· I C
<b>1</b> ,796	Postage	\$ GH STA DEA
П	Certified Fee	1 3
0000	Return Receipt Fee (Endorsement Required)	Mary Ochhara 170
	Restricted Delivery Fee (Endorsement Required)	10/4/8/
302	Total Postage & Fees	\$ 5000 7000
ЪЭ	Sent To	OLEDO, THEDA J
7013	Street, Apt. No property or PO Box No.	O BOX 2712
l	City, State, ZIF F	ORT DEFIANCE, AZ 86504 🚽

U.S. Postal Service

PS Form 3800

	, tri e.
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name)  C. Date of Deliver
1. Article Addressed to:  TOLEDO, THEDA J PO BOX 2712	D. Is delivery address different from item 1?
FORT DEFIANCE, AZ 86504	3. Service Type  Certified Mail  Registered  Insured Mail  Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 3	D20 D002 1796 2953
PS Form 3811, July 2013 Domestic R	eturn Receipt

'U.S. Postal Service™ CERTIFIED MAILT RECEIPT 라마다 (Domestic Mail Only; No Insurance Coverage Provided) MHF ENCANA/BLANCO WASH For delivery information visit Postage HIGH STA H Certified Fee 5000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 3020 Total Postage & Fees \$ TRUJILLO JR, WILSON Sent To 7013 506 WEST MAPLE Street, Apt. No or PO Box No. FARMINGTON, NM 87401 City, State, ZIF PS Form 3800

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	Restricted Delivery Fee (Endorsement Required)	10 To 10 To
3028	Total Postage & Fees	\$ 707.00
m	Sent To	TRUJILLO, ALVIN
7013	Street, Apt. No.; or PO Box No.	45A RD 5295
. –	City, State, ZIP+4	FARMINGTON, NM 87401
	PS Form 3800, A	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    Agent
TRUJILLO JR, WILSON 506 WEST MAPLE	D. Is delivery address different from item 1?
FARMINGTON, NM 87401	3. Service Type  Gertified Mail* Priority Mail Express*  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 3	3020 0005 134P 544P
PS Form 3811, July 2013 Domestic Ret	urn Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is/delivery address different from item 1?   Yes
1. Article Addressed to:  TRUJILLO, ALVIN	If YES, enter delivery address below: No
45A RD.5295 FARMINGTON, NM 87401	3. Service Type  Certified Mail*  Priority Mail* Express  Registered  Return Receipt for Merchandise  Collect on Delivery
	4. Restricted Delivery? (Extra Fee)



2915	U.S. Postal Se CERTIFIED (Domestic Mail On For delivery Informal	nly; No Insurance Coverage Provided) MHF RION VIS ENCANA/BLANCO WASH	
2 1796	Postage Certified Fee	\$ Spostmark	\
3020 0205	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
7013 30	Sent To  Street, Apt. No., or PO Box No. City, State, ZIP+	TRUJILLO, ELENA 3805 S 100 W NIBLEY, UT 84321	
	PS Form 3800, A		

2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Subtly Burbine
Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below:  No
, TRUJILLO, ARNOLD C/O SUPERINTENDENT	
PO BOX 328 CROWNPOINT, NM 87313	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Coffect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
PS Form 3811, July 2013 Domestic Re	turn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	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
TRUJILLO, ELENA	<b>B</b>
3805 S 100 W NIBLEY, UT 84321	3. Service Type  2 Certified Mail®

Domestic Return Receipt

4. Restricted Delivery? (Extra Fee)

7013/3020/0002/1796/2915

☐ Yes

## U.S. Postal Service™ CERTIFIED MAIL RECEIPT MHF ENCANA/BLANCO WASH For delivery information vis 1,796 Postage Certified Fee 2000 Postmark Here (7) Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 3020 Total Postage & Fees \$ TRUJILLO, ELVINA B Sent To 7013 PO BOX 108 Street, Apt. No.; or PO Box No. NAGEEZI, NM 87037 City, State, ZiP+ PS Form 3800.

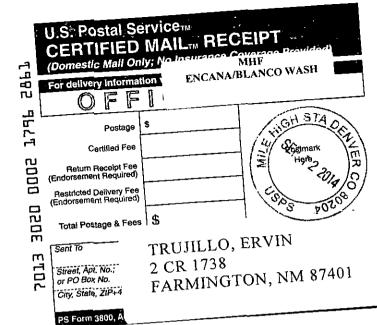
92	(Domestic Mail Or	MAILTH RECEIPT
다	For delivery informa	tion Vie ENCANA/BLANCO WASH
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	Certified Fee	Sportmark III
2000	Return Receipt Fee (Endorsement Required)	Here COIA CO
	Restricted Delivery Fee (Endorsement Required)	\$ \\ \tag{200}
302	Total Postage & Fees	1.6
m	Sent To	TRUJILLO, ELVIRA A
7013		PO BOX 108
7		NAGEEZI, NM 87037
	PS Form 3800.	

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  X
TRUJILLO, ELVINA B	If YES, enter delivery address below:
PO BOX 108 NAGEEZI, NM 87037	3. Service Type  Certified Mail® Priority Mail Express™ Registered Return Receipt for Merchandise  Insured Mail
	4. Restricted Delivery? (Extra Fee)
Article Number 7013 30 (Transfer from service label)	80 0002 1796 2908
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ 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. 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:
TRUJILLO, ELVIRA A PO BOX 108 NAGEEZI, NM 87037	3. Service Type Certified Mail®
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 303	
2. Article Number  i (Transfer from service label)  PS Form 3811. July 2013  Domestic Re	0 0002 1796 2892

U.S. Postal Service™ CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided). MHF 40 먑 For delivery Information vi ENCANA/BLANCO WASH 1796 Postage SIA Certified Fee ПЦ Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 3020 Total Postage & Fees \$ TRUJILLO, ENA H Sent To Ш 703 **PO BOX 108** Street, Apt. No.; or PO Box No. NAGEEZI, NM 87037 City, State, ZIP+ PS Form 3800,

2878	(Domestic Mail Or	MAILTM RECEIPT
<b>#</b> 1	For delivery Informa	NOT V ENCANA/BLANCO WASH
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1796 1	Postage	s join of the
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0005	Return Receipt Fee (Endorsement Required)	Here<0/4/0
	Restricted Delivery Fee (Endorsement Required)	CSS3 VOUS
3020	Total Postage & Fees	s
m	Sent To	TRUJILLO, ERNIE
7013	Street, Apt. No.; or PO Box No.	#18 RD 3935
Lon	City, State, ZIP+4	FARMINGTON, NM 87401
	PS Form 3800, A	

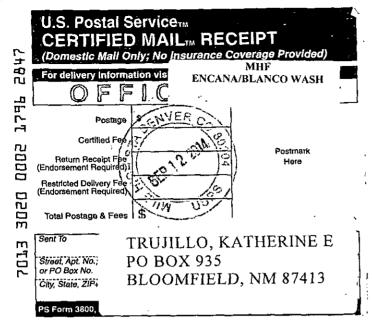
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1; 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. D. Addressee
Article Addressed to:	D. Is delivery address different from item 1?   If YES, enter delivery address below:   No
TRUJILLO, ENA H PO BOX 108	
NAGEEZI, NM 87037	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7013 30	120 0002 1796 2885
PS Form 3811, July 2013 Domestic Ret	urn Receipt

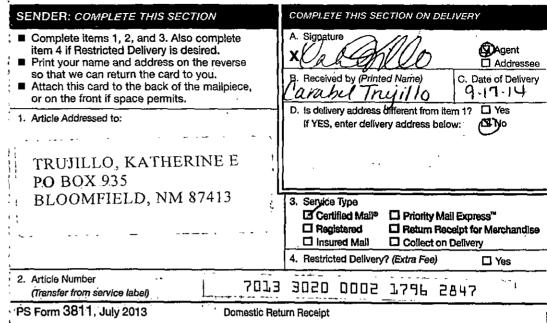


54	U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) MHF	
28.	For delivery information visit c ENCANA/BLANCO WASH	7
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	Restricted Delivery Fee (Endorsement Required)	/
3020	Taval Destage & Fees S	,. -
LU	TRUJILLO, IRENE	
щ	3704 LADERA ROAD	-
7013	Street, Apt. No.	٠ ،
L-	or PO Box No. APT 428 ALBUQUERQUE, NM 8712 ALBUQUERQUE, NM 8712	.U
	PO Form 0900	أسيب

	<u>'</u>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. signature    Agent   Addressee
Article Addressed to:	If YES, enter deliver teddings below: No
TRUJILLO, ERVIN 2 CR 1738	SEP SEP SEP SEP SEP SEP SEP SEP SEP SEP
FARMINGTON, NM 87401	3. Service Type  Cortified Mail  DIS Rolls Mail Express"  Registered  Return Receipt for Merchandise  Collect on Delivery
•	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 302	0 0005 154P SPPJ
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SECTION ON DELIVERY  A. Signature
<ul> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece or on the front if space permits.</li> </ul>	B. Receiver by (Printed Name) C Date of Delivery  D. Is delivery address different from item 17  Yes
Article Addressed to:	If YES, enter delivery address below:
TRUJILLO, IRENE 3704 LADERA ROAD	
APT 428 ALBUQUERQUE, NM 87120	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
,	4. Restricted Delivery? (Extra Fee)
	4. Restricted Delivery? (Extra Fee) Yes

. PS Form 3811, July 2013





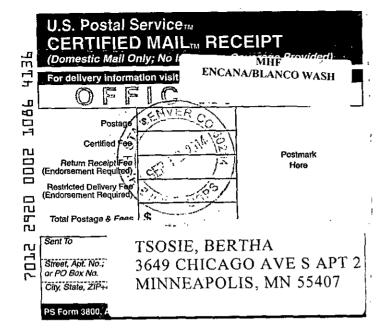


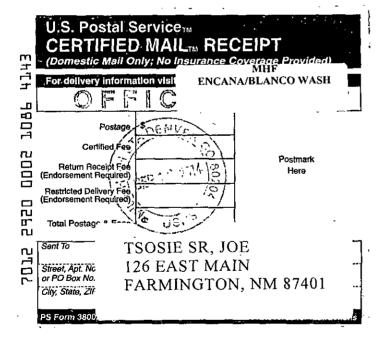
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
TSO, ANNETTE L PO BOX 1491	
PENA BLANCA, NM 87041	3. Sepice Type  C Certified Mail*  Priority Mail Express*  Registered  Recum Receipt for Merchandise  Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number: 7013 3	020 0002 1796 2830
PS Form 3811, July 2013 Domestic Retu	ım Receipt



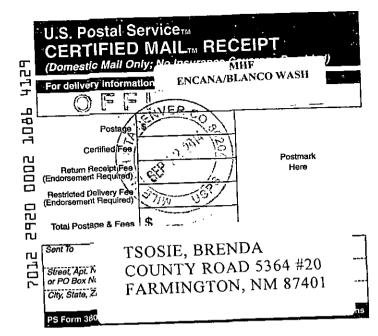
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ت		<u> </u>	
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7012	Street, Apt. No.; or PO Box No.	TSO, EITA M PO BOX 123 GAMERCO, N	IM 87317

, <i>*</i>	•	·
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVE	RY.
Complete items 1, 2, and 3. Also complete item 4-if Restricted Delivery is desired. Print-your name and address on the reverse	A. Signature  X. L.	☐ Agent
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.	Thelentuder son	. Date of Delivery
, 1. Article Addressed to:	D. Is delivery address different from item. If YES, enter delivery address below	NEW YES
	<u>(≥</u> 5	P 74
TSO, DOROTHY 2011 TROY KING RD	WE	1014
TRLR 200	3. Service Type  Certified Mali  Priority Mart	USP
FARMINGTON, NM 87401		t for Merchandise
	4. Restricted Delivery? (Extra Fee)	☐ Yes
2. Article Number (Transfer from service label) 7013	3050 0005 134P 59!	23
PS Form 3811, July 2013 Domestic Retu	ırn Receipt	





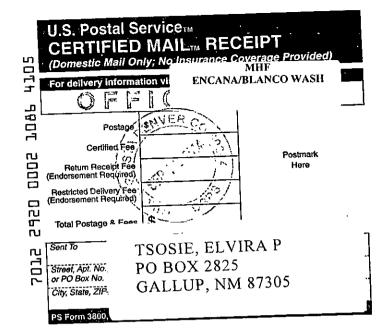
SENDER: COMPLETE THIS SECTION	
	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.	X ☐ Agent
■ Print your name and address on the reverse	☐ Address
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delive
<u> </u>	D. Is delivery address different from item 1?  Yes
Article Addressed to:	If YES, enter delivery address below: ☐ No
	<b>(</b>   .
	1) .
TSOSIE, BERTHA	
1! 3649 CHICAGO AVE S APT 2	3. Service Type
MINNEAPOLIS, MN 55407	Service type  Cartified Mail® Priority Mail Express®
/ WHITE HODIO, WHO	Registered Return Receipt for Merchandle
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1	4. Restricted Delivery? (Extra Fee)
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A Signatura
item 4 if Restricted Delivery is desired.	X Agent
■ 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,	B. Received by (Printed Name) C. Date of Delivery
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	Linearda Penera
or on the front if space permits.	D. Scelly address different from item 1?  Yes
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or on the front if space permits.  1. Article Addressed to:  TSOSIE SR, JOE  126 EAST MAIN	D. is delivery address different from item 1? Yes Str. ES, enter delivery address below: No
or on the front if space permits.  1. Article Addressed to:  TSOSIE:SR, JOE	D. is delivery address different from item 1? Yes Str. ES, enter delivery address below: No
or on the front if space permits.  1. Article Addressed to:  TSOSIE SR, JOE  126 EAST MAIN	D. As delivery address different from item 1?
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or on the front if space permits.  1. Article Addressed to:  TSOSIE SR, JOE  126 EAST MAIN	D. Scall Value address different from item 1? Yes St. ES, enter delivery address below: No  3. Service Type Gertified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail
or on the front if space permits.  1. Article Addressed to:  TSOSIE:SR, JOE 126 EAST MAIN FARMINGTON, NM 87401	D. Schillen address different from item 1?
or on the front if space permits.  1. Article Addressed to:  TSOSIE SR, JOE 126 EAST MAIN FARMINGTON, NM 87401	D. Scally address different from item 1? Yes St. ES, enter delivery address below: No  3. Service Type
or on the front if space permits.  1. Article Addressed to:  TSOSIE SR, JOE 126 EAST MAIN FARMINGTON, NM 87401	D. Scall Value address different from item 1? Yes St. ES, enter delivery address below: No  3. Service Type Gertified Mail* Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail

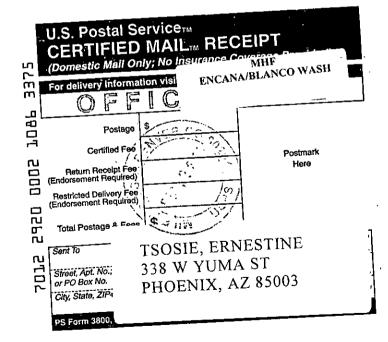


4 17 17 1	U.S. Postal Service <sub>TM</sub> CERTIFIED MAIL <sub>TM</sub> RECEIPT  (Domestic Mail Only; No Insurance Coverage Brovides MHF  Est delivery Information v  ENCANA/BLANCO WASH	
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- 1	OF FIVER CO	
20 0002 1086	Postage  Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	
U L	Total Postage & Fees   \$	-
7012 5	TSOSIE, CARLENE C/O ELVIRA P. TSOSIE PO BOX 2825 GALLUP, NM 87305	, as
	25 30(1) 30(5)	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  TSOSIE, BRENDA COUNTY ROAD 5364 #20 FARMINGTON, NM 87401	A. Signature  X. Brende Tovic
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7012 25	120 0002 1086 4129
PS Form 3811, July 2013 Domestic Reti	um Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
TSOSIE, CARLENE C/O ELVIRA P. TSOSIE PO BOX 2825 GALLUP, NM 87305	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7012	2920 0002 1086 4112
PS Form 3811, July 2013 Domestic Ret	urn Receipt





2. Article Number

(Transfer from service label)
PS Form 3811, July 2013

	1
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 17  Yes
Article Addressed to:	If YES, enter delivery address below:
TSOSIE, ELVIRA P	
PÓ BOX 2825 GALLUP, NM 87305	3. Service Type  Certified Mail® □ Priority Mail Express™ □ Registered □ Receipt for Merchandise □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
	2 2920'0002 1086 4105
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Church Turk Day C. Agent  B. Received by (Printed Name)  C. Catate on Valivery
1. Article Addressed to:	D. Is delivery address different from item 17  Yes of If YES, enter delivery address below: U No.
TSOSIE, ERNESTINE	
338 W YUMA ST PHOENIX, AZ 85003	3. Service Type  2 Certified Mail®

☐ Registered

Insured Mail

7012 2920 0002 1086 3375

Domestic Return Receipt

4. Restricted Delivery? (Extra Fee)

Return Receipt for Merchandise

☐ Yes

☐ Collect on Delivery

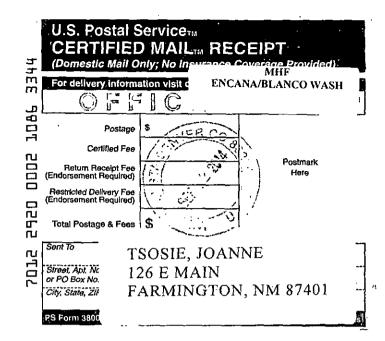


Ì	U.S. Postal Service TAT  CERTIFIED MAIL TATA RECEIPT  (Domestic Mail Only; No Insurance Constilled)	
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EE	For delivery information visit ENCANA/BLARCO	
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	Restricted Delivery Fee (Endorsement Required)	
920	Total Postage & Fpac S	-
П	TSOSIE, JERIMIAH	
7075	Street Ant No.: PO BOX 2825	ļ
7	or PO Box No. Gifty, State, ZiP4  GALLUP, NM 87305	,
	PS Form 3800,	_

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A? Stgribture  Agent  Agent  Addressee  B. Received by (Finted Name)  C. Date of Delivery  D. Is delivery addings different forton item 1?   Yes
TSOSIE, EVANGELINE PO BOX 2482 FARMINGTON, NM 87499	If YES, entercell very entriess brow:   19 2014  3. Service Type Certified Mail Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7012 2921 PS Form 3811, July 2013 Domestic Ret	J 0005 JÚ9P 33P9
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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  A. Signature  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?  Yes
TSOSIE, JERIMIAH PO BOX 2825 GALLUP, NM 87305	If YES, enter delivery address below: □ No  3. Service Type □ Certified Mail* □ Priority Mail Express** □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
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PS Form 3811, July 2013

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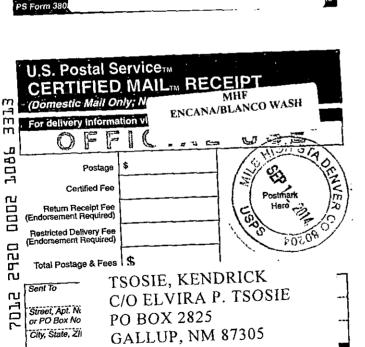


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5000	Return Receipt Fee (Endorsement Required)	Postmark Here	
	Restricted Delivery Fee (Endarsement Required)	(3/6)	
292	Total Postage & Fees	\$ 100	
ū	Sent To	SOSIE, JODY	٦
7012	Street, Apt. No. P	O BOX 2825	-
۲-		ALLUP, NM 87305	+
	PS Form 3800		

	+
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  X
TSOSIE, JOANNE 126 E MAIN FARMINGTON, NM 87401	D. Is delivery address different from item 1? Yes  Yes  Yes  Yes  No  Priority Mail Express*  Return Receipt for Merchandise  Insured Mail   Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7012 3	5450 0005 JOBP 33AA
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  D. Is delivery address different from item 1?   Yes
1. Article Addressed to:  TSOSIE, JODY PO BOX 2825	If YES, enter delivery address below:
GALLUP, NM 87305	3. Service Type  Certified Mail* Priority Mail Express* Prepared Receipt for Marchandise Insured Mail Collect on Delivery
2. Article Number	4. Restricted Delivery? (Extra Fee)

PS Form 3811, July 2013

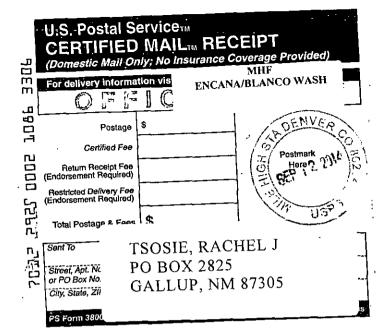




PS Form 380



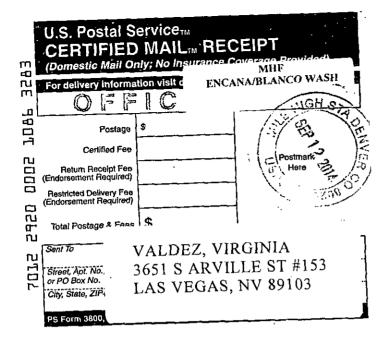
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:,</li> </ul>	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:
TSOSIE, KENDRICK C/O ELVIRATP. TSOSIE PO BOX 28259 GALLUP, NM 87305	3. Service Type  Certifled Mail® Control Mail Express**  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7012 29	5D DOOS JO8P 3373
PS Form 3811, July 2013 Domestic Retu	
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery	
Article Addressed to:	D. Is delivery address different from item 1?	
* * * * * * * * * * * * * * * * * * * *		
TSOSIE, RACHEL, J		
PO BOX 2825		
GALLUP, NM 87805	3. Service Type  ☐ Certified Mail³ ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number (Transfer from service label)		
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Domestic Mail Or	MAILTM RECEIPT  ily; No MHF  tlon vis ENCANA/BLANCO WASH
Postage Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage &	VALDEZ, MARILYN A PO BOX 1514 FARMINGTON, NM 87499
PS Form 3800, A	

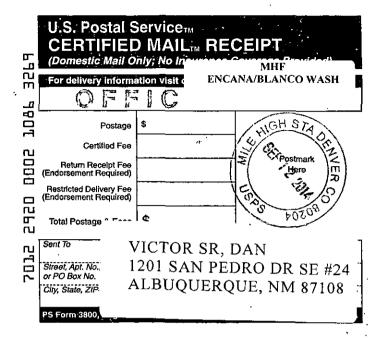
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:         <ul> <li>VALDEZ, MARILYN A</li> <li>PO BOX 1514</li> <li>FARMINGTON, NM 87499</li> </ul> </li> </ul>	A. Signature  X  Agent  Addressee  B. Repeived by (Printed Name)  D. Is delivery address different from item 1?   Yes  If YES and holiway address below:  No	
	3. Service Priority Mail Express  Certified Mail Priority Mail Express  Registered Return Receipt for Merchandise Collect on Delivery	
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)	
2. Article Number (Transfer from service label) 7012 2920 0002 1084 3290		
PS Form 3811, July 2013 Domestic Return Receipt		



7b	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL RECEIPT	
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	Restricted Delivery Fee (Endorsement Required)	000 7.7508	
2920	Total Postage & Fees	\$	
	Sent To V	AN WINKLE, INA	
7012	Street, Apt. ) P(	BOX 1336	
7		RUITLAND, NM 87416	
	PS Form 38		ons

	<u> </u>		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SEC	CTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  XTUDIA  B., Received by (Printe)  VI (711) A	Váldez -	lressee Jelivery
1. Article Addressed to:	D. Is delivery address of If YES, enter deliver		
VALDEZ, VIRGINIA 3651 S ARVILLE ST #153 LAS VEGAS, NV 89103	3. Service Type  Certified Mail®  Registered	☐ Priority Mail Express**	andise
	☐ Insured Mail  4. Restricted Delivery	Collect on Delivery 7 (Extra Fee)	<del></del>
	<del></del>		<del></del>
2. Article Number (Transfer from service label) PS Form 3811, July 2013 Domestic Retu		E85E 48	
(Transfer from service label) 7012 29		E85E 48	.,57
(Transfer from service label) 7012 29	rn Receipt	ECTION ON DELIVERY	
(Transfer from service label) 7012 25 PS Form 3811, July 2013 Domestic Return SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	COMPLETE THIS SE	an Wench a	dressee
(Transfer from service label) 7012 25  PS Form 3811, July 2013 Domestic Return SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	COMPLETE THIS SE  A. Signature  X. L. Na  B. Received by (Print  I. M. a. Van U	an Wenkh Acted Name)  AND  AND  AND	dressee
PS Form 3811, July 2013  PS Form 3811, July 2013  Domestic Return 1	COMPLETE THIS SE  A. Signature  X. L. Na  B. Received by (Prin  I. N. a. Van U.  D. Is delivery address	an Wench Acted Name)	dressee
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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.	COMPLETE THIS SE  A. Signature  X. L. Na  B. Received by (Prin  I. N. a. Van U.  D. Is delivery address	an Winh and Acted Name)  an In Clar AND  additional and AND  additional and AND  additional and AND  additional and AND  additional and AND  additional and AND  additional and AND  additional and AND  additional and AND	dressee

PS Form 3811, July 2013



8060	U.S. Postal Service TM CERTIFIED MAIL TM RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)		
2	For delivery informa	MHF ENCANA/BLANCO WASH	
	<u>O</u> FF	ENCANA/BLANCO WASH	٦
8862	Postage	\$ EHIGH STA	_
	Certified Fee	THE HIGH SAP OF	١
2003	Return Receipt Fee (Endorsement Required)	Postmark A Pere	}
	Restricted Delivery Fee (Endorsement Required)	130/	•
1710	Total Postaçe & Fees	\$ 80504	•
רַיו	Sent To VI	CTOR, CAROLINE	Ť
	Street, Apt. N 60	0 W BLANCO BLVD #29	
7	OF PO BOX NC	COMFIELD, NM 87413	
	PS Form 380		10

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	B. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:
VICTOR SR, DAN	•
120 SAN PEDRO DR SE #24 ALEUQUERQUE, NM 87108	3. Service Type  Certified Mail <sup>3</sup> Priority Mail Express <sup>34</sup> Registered Receipt for Merchandise  Insured Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7012 Domestic Ret	ntu Beceipt 35Pd 35Pd
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X. COWLINE VICTOR Agent  Algent
871 NFE 1009 NOTIFY SENDER OF NEW A VICTOR CAROLINE PO BOX 356 BLOOMFIELD NM 87413-03	 5140009/17:/14 NDDRESS

Haldadaladhalbillahalbaldalbaldhalbandh .7013 1710 0001 8862 0908

(Transfer from service label) PS Form 3811, July 2013

2. Article Number

BC: 87413035656

Domestic Return Receipt

oress"

ery ☐ Yes

for Merchandise

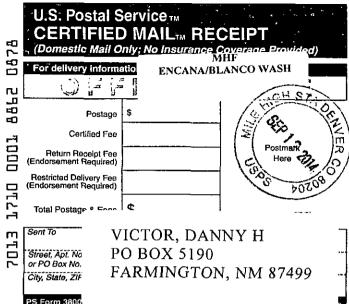
U.S. Postal Service™ CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 0.892 ENCANA/BLANCO WASH For delivery information visi 8862 Postage Certified Fee 0007 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1710 Total Postago P Engal VICTOR, DAN Sent To FIUL 1201 SAN PEDRO DR SE Street, Apt. No or PO Box No ALBUQUERQUE, NM 87108 City, State, Zi PS Form 380

85	U.S. Postal Service TM  CERTIFIED MAIL RECEIPT  (Domestic Mail Only; No Insurance Confident Provident Confedence Confident Provident Confedence Confident Confedence	
8	For delivery information v ENCANA/BLANCO WASH	_
_	OFFIC MGHS	
1710 0001 8862	Postage \$ Certified Fee Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)	ENVER CO
17	Total Postage & Face   C	-
m	Sent To VICTOR, DANNY	
7013	Street, Apt. Ni 126 EAST MAIN	
7[	City, State, Zi. FARMINGTON, NM 8740	
	PS Form 3800	ns

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
VICTOR, DAN 1201 SAN PEDRO DR SE	
ALBUQUERQUE, NM 87108	3. Service Type  Certified Mail*  Registered  Insured Mail  Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7013.1	710 0001 8862 0892
PS Form 3811, July 2013 Domestic Re	turn Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Stg. Addressee  B. Received by (Printed Name)  C. Date of Delivery
1. Article Addressed to:  VICTOR, DANNY  126 EAST MAIN	Types of the control
FARMINGTON, NM 87401	3. Seriog Type  ☐ Certifled Mall ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mall ☐ Collect on Delivery  4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number  Gransfer from service labell 7013	1710 0001 8862 0885

PS Form 3811, July 2013



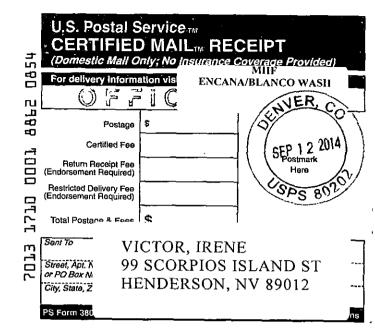
PS Form 3800	3
-	
U.S. Postal Service™	
CERTIFIED MAILTM RECEIPT	
(Domestic Mail Only; No MHF For delivery information vis ENCANA/BLANCO WASH	
OFFIC	
Postage \$ GH STA	•
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Return Receipt Fee Here	
Restricted Delivery Fee Endorsement Required)	
Total Postano & Engl	
VICTOR, DARLENE	$\neg$
Treel, Apr. 7 717 RUTH LN, APT 402	
BLOOMFIELD, NM 87413	

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PS Form 380

A Signature
B. Received by (Printed Name)  C. Date of Delivery  C. D. Is delivery address all flerent from item 1?   Yes
If YES, enter defived address below: LI No
SP 074 17 007
Service Type USP   Priority Mail Express™   Priority Mail Express™   Recurr Receipt for Merchandise   Insured Mail   Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes
10 0001 8862 0878

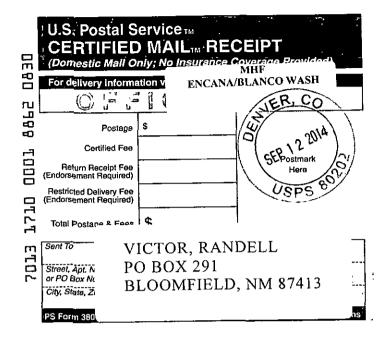
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  ■ Print your name and address on the reverse so that we can return the card to you.  ■ Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:  VICTOR, DARLENE  71-7 RETH LN, APT 402  BLOGMFIELD, NM 87413	A Signature  A Gent  Addressee  B Received by (Printed Name)  D. Is delivery address different from item 17  If YES, enter delivery address below:  No  Service Type	
	☐ Certified Mail® ☐ Priority Mail Express®☐ Registered ☐ Return Receipt for Merchandise☐ Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7013	1710 0001 8865 0861	
PS Form 3811, July 2013 Domestic Re	turn Receipt	
- · · · · · · · · · · · · · · · · · · ·		



t7	U.S. Postal S CERTIFIED (Domestic Mail C	D MAIL™ RECEIPT	:
	For delivery inform		
8862	Postage	\$ 657	
	Certified Fee	(a) 201A)	ì
0001	Return Receipt Fee (Endorsement Required)	SEPostmerk Here	٠.
	Restricted Delivery Fee (Endorsement Required)	USPS 800	)
1710	Total Postage & Fees	]	
m	Sent To VIC	CTOR, KENNETH	
7073	Street, Apt. PO	BOX 1072	
7	City, State, TE	ECNOSPOS, AZ 86514	
	PS Form 38	!	De.

	the facility of the state of th
SENDER: COMPLETE THIS SECTION	COMPLETE-THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1?
VICTOR, IRENE 99 SCORPIOS ISLAND ST HENDERSON, NV 89012	3. Service Type  Certified Mali® Priority Mail Express*
	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 171	0 0001 8862 0854
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  VICTOR, KENNETH PO BOX 1072 TEECNOSPOS AZ 06554	D. Is delivery address different from item 1?
TEECNOSPOS, AZ 86514	3. Service Type  ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
2. Article Number (Transfer from service label) 7013 1.7	4. Restricted Delivery? (Extra Fee) ☐ Yes  1.0 □□□1 8862 □847

PS Form 3811, July 2013

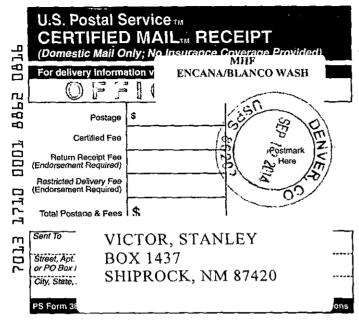


	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL™ RECEIPT	÷
08	For delivery Informa	tion ENCANA/BLANCO-WASH	
ก็	<u> </u>	DEN	
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٦	Certified Fee		
000	Return Receipt Fee (Endorsement Required)	Postmark U Heje	
	Restricted Delivery Fee (Endorsement Required)		
1710	Total Postage & Fees	<b> </b> \$	
ш	Sent To V	ICTOR, SAMUEL	$\neg$
7013	Street, Apt. No. P	O BOX 291	
۴-		LOOMFIELD, NM 87413	
	PS Form 3800		į

	i		
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A Signature  A Agent  A Agent  A Agent  A Addressee  B Received by (Printed Name)  C. Date of Delivery  A Addresse  1 - 15 - 14		
1. Article Addressed to:  VICTOR, RANDELL PO BOX 291	D. Is delivery address different from item 1?		
BLOOMFIELD, NM 87413	3. Service Type   ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery		
	4. Restricted Delivery? (Extra Fee)		
2. Article Number (Transfer from service label) 111 7013 1710 0001 8662 0830 PS Form 3811, July 2013 Domestic Return Receipt			
PS FORM SO LL. JUIV 2013 Domestic Retu	ITO RECEIDT		
PS Form 38 I I, July 2013 Domestic Retu	In Heceipt		
	Im Receipt		
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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:  VICTOR, SAMUEL	A. Signature  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Selivery address different from item 1?		
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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  A. Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Selivery address different from item 1?		
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  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:  VICTOR, SAMUEL PO BOX 291	A Signature  A Agent  Addressee  B Received by (Printed Name)  C. Date of Delivery  C. 5  D. Is delivery address different from item 1?  Yes  If YES, enter delivery address below:  3. Service Type  Certified Mail  Registered  Return Receipt for Merchandise		

- PS Form 3811, July 2013

33



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Stand, U.A. S
1. Article Addressed to:	D. Is delivery address different from item 1? LI Yes   If YES, enter delivery address below: D No
VICTOR, STANLEY BOX 1437 SHIPROCK, NM 87420	3. Service Type
to the same of the	☐ Certifled Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	13 1710 0001 8862 0816
PS Form 3811, July 2013 Domestic Retri	urn Receipt

U.S. Postal Service TM CERTIFIED MAILTM RECEIPT (Domestic Mail Only; No Insurance Coverage Brovided)	
For delivery information vi ENCANA/BLANCO WASH	
OFFIC DE	`
Postage \$	TE
Certified Fee	5
Return Receipt Fee (Endorsement Required)	Æ
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To VOLKER, VERNA N	
Street, Apt. No. 6021 14TH AVE SOUTH	
City, State, Zii MINNEAPOLIS, MN 55417	
PS Form 3800	.s
	CERTIFIED MAIL M RECEIPT (Domestic Mall Only; No Insurance Coverges Provided) MHF For delivery information v  Postage \$  Certified Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$  Sent To  VOLKER, VERNA N 6021 14TH AVE SOUTH MINNEAPOLIS, MN 55417

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from item 1?  Yes
1. Article Addressed to:  VOLKER. VERNA N	If YES, enter delivery address below:   No
6021 14TH AVE SOUTH MINNEAPOLIS, MN 55417	3. Service Type  Certifled Mail* Priority Mail Express*  Registered Return Receipt for Merchandise  Restricted Delivery? (Extra Fee) Yes
2. Article Number	AHRNEZBO GRAPINITA
(Transfer from service label)	<u>, , , , , , , , , , , , , , , , , , , </u>



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ш	0 1	7 7 63
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0007	Return Receipt Fee (Endorsement Required)	Posiman CO Here
	Restricted Delivery Fee (Endorsement Required)	(320)
1710	Total Postage & Face	4
m	Sent To	WAUNEKA, NELSON
707	Street, Apt. No.; or PO Box No.	PO BOX 756
,-	City, State, ZIP+	FORT DEFIANCE, AZ 86504 ;
	PS Form 3800, A	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X 1	
Article Addressed to:	If MES, enterchargery address below.	
WATSON, MARY H	5 2014	
PO BOX 658 AZTEC, NM 87410	3. Service Type Gertified Mail* D. Priority Mail Express* Registered D. Return Receipt for Merchandise Insured Mail Collect on Delivery	
	4. Restricted Delivery? (Extra Fee)   Yes	
2. Article Number  (Transfer from service label)  7013 1710 0001 8862 0793		
PS Form 3811, July 2013 Domestic Ref	turn Receipt	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the parties of the mailpless or on the front if space permits.  Article Addressed to:  WAUNEKA, NELSON	A. Signature  Agent  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?  If YES, enter delivery address below:  APPRAIA VAZZIE
PO BOX 756 FORT DEFIANCE, AZ 86504	Service Type  Certified Mail*  Priority Mail Express*  Registered  Return Receipt for Merchandise  Insured Mail  Collect on Delivery  Restricted Delivery? (Extra Fee)  Yes
2. Article Number (Transfer from service label) 7013	1710 0001 8865 0786
PS Form 3811, July 2013 Domestic Ret	urn Receipt

# U.S. Postal Service TM CERTIFIED MAILT RECEIPT (Doméstic Mail Only; No Insurance Coverage Provided) 6 For delivery information vis ENCANA/BLANCO-WASHſΨ 886 Postage 8020 Certified Fee 0001 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1710 Total Postage & Food & Sent To POLE WEEDER, ALICE Street, Apt. No.; or PO Box No. **PO BOX 286** LAGUNA, NM 87026 City, State, ZIP+ PS Form 3800,

5 0762	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL™ REG	CEIPT  MHF  BLANCO WASH
8862	Postage	\$	(50
	Certified Fee		(0) E /m/
1000	Return Receipt Fee (Endorsement Required)		8020 Postmark Pere
0 0	Restricted Delivery Fee (Endorsement Required)		(2) (3)
1710	Total Postage & Fees	\$	0.9
7013	Sent To	WERITO, RI	ΓΑ Α
	Street, Apt. No.; or PO Box No.	809 S MESA	VERDE AVE
	City, State, ZIP+4	<b>FARMINGTO</b>	)N, NM 87401
	PS Form 3800, At		

nature  Agent Addressee  Celved by (Printed Name)  C. Date of Delivery  Relivery address different from item 1?  Yes  TES, enter delivery address below:  No  Priority Mail Express**  Registered  Return Receipt for Merchandise  Insured Mail
Agent Addressee Celved by (Printed Name) C. Pate of Delivery Relivery address different from item 1? Yes Yes, enter delivery address below:  No  Priority Mail Express**  Registered Return Receipt for Merchandise
rvice Type Certified Mail®  C Priority Mail Express**  Registered  Return Receipt for Merchandise
Certified Mail®
stricted Delivery? (Extra Fee) Yes
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eceived by (Printed Name) C. Date of Delivery  D 50 W 7 W 9-16-19
delivery address elitatent top item 1?
ervice Type U.5
Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery

Domestic Return Receipt

PS Form 3811, July 2013



<b>₽</b>	U.S. Postal S CERTIFIED (Domestic Mall O	MAIL RECEIPT
	For delivery informa	atlon vis ENCANA/BLANCO WASH
П	OFF	ation vis ENCANA/BLANCO WASH
8 B E.	Postage	s /c/ (%) (2")
	Certified Fee	(S) Postmark (S) C
0007	Return Receipt Fee (Endorsement Required)	Postmark
	Restricted Delivery Fee (Endorsement Required)	\$00/
1770	Total Postage & Fees	\$
m	Sent To W	ESLEY, SAM
707	Street, Apt. No. C	O EASTERN NAVAJO AGENCY
7		O BOX 328
	City, State, ZIF C	ROWNPOINT, NM 87313
	PS Form 3800	s

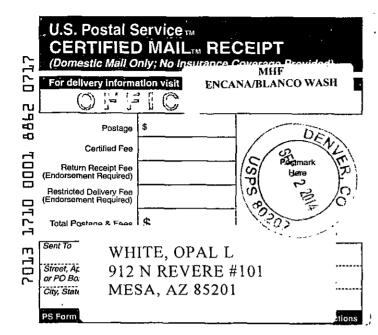
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:	A. Signature    Agent   Agent   Addressee     B. Received by (Printed Name)   C. Date of Delivery     Leve Ha   Day Local   9   16   14     D. Is delivery address different from item 1?   Yes     If YES, enter delivery address below:   No
WESLEY, SAM C/O EASTERN NAVAJO AGENCY PO BOX 328 CROWNPOINT, NM 87313	3. Service Type  Gentified Mail* Priority Mail Express**  Registered Return Receipt for Merchandise Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7013 171	
PS Form 3811, July 2013 Domestic Ret	urn Receipt



占		D MAILTM RECEIPT  only; No Insurance Coverage Provided)
07	For delivery informa	
пц	OFF	DENL
8 E	Postage	s (S)
-10	Certified Fee	US (2)
0007	Return Receipt Fee (Endorsement Required)	Postmark Here
	Restricted Delivery Fee (Endorsement Required)	2030
1710	Total Postage * F	le
	Sent To V	VHITE, GERALDINE
7013		O BOX 365
7.	or PO Box No. City, State, ZIP	RUITLAND, NM 87416
	PS Form 3800,	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:</li> </ul>	A. Signature  X  B. Received by Printed Name)  C. Date of Delivery  C. Date of Delivery  D. Is delivery address different from them 1?   Yes  If YES, enter delivery address below:
WHITE ESTATE, DOLLY N PO BOX 5701 FARMINGTON, NM 87499	Service Type
1	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	210 0001 8862 0731
PS Form 3811, July 2013 Domestic Ret	urn Receipt

SENDER: COMPLETE THIS SECTION .	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:  WHITE, GERALDINE PO BOX 365	D. Is delivery address different from item 1?   If YES, enter delivery address below:  ID No
FRUITLAND, NM 87416	3. Service Type  Certifled Mail <sup>2</sup> Priority Mall Express*  Registered Return Receipt for Merchandise  Collect on Delivery
· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7013 17	10 0001 89PS 0.55A
PS Form 3811, July 2013 Domestic Retu	ım Receipt



0 0001 8862 0700		D MAILTM RECEIPT  Only; No Insurance Coverage Broyided)	
1710	Total Postace & Fees		
7013	Street, Apt. N 63	HITEHORSE, PEARL CR 6480 NBU 44C RTLAND, NM 87417	ns

	·
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	B. 10 comes, decrees constraint to the constraint to
WHITE, OPAL L 912 N REVERE #101	Opel White Spican
MESA, AZ 85201	Service Type  Cartifled Mail  Registered  Return Receipt for Merchandise  Collect on Delivery
Borney .	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013	1710 0001 8862 0717
PS Form 3811, July 2013 Domestic Re	turn Receipt

■ Complete items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired.  ■ 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  A. Signature  A. Signature  A. Signature  Agent  Addressee  B. Received by (Printed Name)  Pear While Nore  D. Is delivery address different from Item 1?   Yes  If YES, enter delivery address below:  No
WHITEHORSE, PEARL 63 CR-6480 NBU 44C	in red, enter delivery address below.
KIRTLAND, NM 87417	3. Service Type  Certified Mail® Priority Mail Express®  Registered Return Receipt for Merchandise  Insured Mail Collect on Delivery
2. Article Number (Transfer from service label) 7013 17	4. Restricted Delivery? (Extra Fee)
PS Form 3811, July 2013 Domestic Retu	ım Receipt

## U.S. Postal Service CERTIFIED MAILM RECEIPT \* (Domestic Mail Only; No Insurance Coverage Provided) MHF ENCANA/BLANCO WASH For delivery information visit of - WIER, C Ш 886 Postage SEPstrhafk 2014 Certified Fee 0007 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1710 Total Postage & Fees \$ Sent To WILLIAMS, DEANDRA P m 701 Street, Apt. I or PO Box N PO BOX 1062 AUBURN, WA 98071 City, State, Z PS Form 380

<u> </u>	* - * ****
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front it space permits.</li> </ul>	A. Signature  X. Cufusta Tube Agent  B. Repetived by (Printed Name)  C. Date of Delivery
Article Addressed to:	D. Is delivery address different trong term 1?   Yes  If YES, enter delivery address below.  No
WILLIAMS, DEANDRA P	Le St. 5 10 00
PO BOX 1062 AUBURN, WA 98071	3. Service Type  Certified Mail*  Registered  Return Receipt for Merchandise  Collect on Delivery
The second secon	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 70131	710 0001 8862 0694
PS Form 3811, July 2013 Domestic Ret	urn Receipt

87	CERTIFIED (Domestic Mail O	MAIL MRECEIPT  nly; No Insurance Coverage Provided)	
8	For delivery informa	ation vi ENCANA/BLANCO WASH	
ļ	0 6		
8852	Postage	\$ 108 SdS/7	-
	Certified Fee	(S) (35)	
1000	Return Receipt Fee (Endorsement Required)	Total Here	
	Restricted Delivery Fee (Endorsement Required)	10 K3/K3/K3/K3/K3/K3/K3/K3/K3/K3/K3/K3/K3/K	
1710	Total Postage & Fees		
ш	Sent To V	VILLIE, IRA M	
7073	Street, Apt. No. 7	58 STAGECOACH TRL	
1.4	City, State, ZIP	OURANGO, CO 81301-8468	,

PS Form 3800

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> </ul>	A. Signature  X
WILLIE IRA M	If YES, enter delivery address below:
758 STAGECOACH TRL DURANGO, CO 81301-8468	3. Service Type  ☐ Certified Mail ☐ Priority Mail Express ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label)	1710 0001 8865 D687
PS Form 3811, July 2013 Domestic Re	turn Receipt

# U.S. Postal Service™ CERTIFIED MAILT RECEIPT (Domestic Mail Only; No Insurance Coverage For delivery information vis ENCANA/BLANCO WASH 885 Postage Certified Fee 1000 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 7013 Sent To WILSON, MARY HELEN WATSON Street, Apt. PO BOX 658 or PO Box I **AZTEC, NM 87410** City, State, PS Form 38

0663	U.S. Postal S CERTIFIED (Domestic Mail O	MAIL <sub>IM</sub> RECEIPT	
05	For delivery informa		
ш	OFF	DEN	
886	Postage	\$	ì
	Certified Fee	15/ 22/10	,
1000	Return Receipt Fee (Endorsement Required)	Postmark Here	
	Restricted Delivery Fee (Endorsement Required)		
1710	Total Postage & Fees	ls l	
	Sent To W	OODIE, JOHN A	$\neg$
7013	Street, Apt. PC	BOX 135	
<b>L</b> ~	or PO Box I	AGEEZI, NM 87037	
	PS Form 38		ns

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Gomplete items 1, 2, and 3, Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  HY NCUL DE QUE UN SU Agent  B. Received by (Printed Neuro)  C. Date of Delivery
1. Article Addressed to:  WIESON, MARY HELEN WATSON	D. Is delivery address different from item 1?
POBOX 658 AZTEC, NM 87410	3. Service 1989  Certified Mail*
* *** * * * * * * * * * * * * * * * * *	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7013	1710 0001 8862 0670
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. Caref Selon
1. Article Addressed to:	D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:  No
WOODIE, JOHN A PO BOX 135 NAGEEZI, NM 87037	3. Service Type  Contified Mail* Priority Mail Express*  Registered Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number  Gransfer from service lehell 7013	1710 0001 AAL2 OLL3

PS Form 3811, July 2013

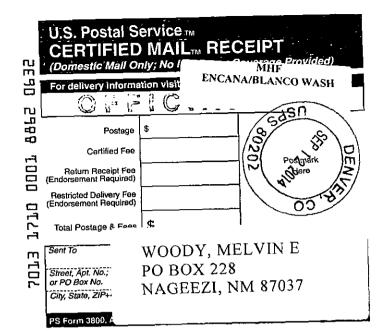
#### U.S. Postal Service™ CERTIFIED MAILT RECEIPT curance Coverage C (Domestic Mail Only; No In ENCANA/BLANCO WASH For delivery information visit DENI ш 86. Postage \$ αO. Postmark Certified Fee 0001 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1710 Total Postage & Face | \$ Sent To WOODY, LILLIAN ш 707 PO BOX 5095 Street, Apt. No.; or PO Box No. FARMINGTON, NM 87499 City, State, ZIP+4 PS Form 3800, A

0649		Service TM  D MAIL TM RECEIPT  THIS INSURANCE COVERAGE Provided)  MINISTRUMENTS	
믬	For delivery information	tilon vis ENCANA/BLANCO WASH	
	OFF		
8862	Postage	s solgn	
_	Certified Fee	Positriark Z. Here	<b>\</b>
0007	Return Receipt Fee (Endorsement Required)	20 Here	
	Restricted Delivery Fee (Endorsement Required)	1000	
1710	Total Postage & Fees		
ū		VOODY, LOUISE	1
7013	Street, Apt. No.	O BOX BLL – RRTP	1
<b>1</b> ~		CHINLE, AZ 86503	
	DC Form 2000		ı

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Oate of Delivery
1. Article Addressed to:  WOODY, LILLIAN	D. is delivery address different from item 1? These if YES, enter delivery address by the Land
PO BOX 5095 FARMINGTON, NM 87499	3. Service Type    Certified Mail®   Priority Mail Express®     Registered   Return Receipt for Merchandise     Insured Mail   Collect on Delivery
to	4. Restricted Delivery? (Extra Fee)
Article Number     (Transfer from service label)     701	.3 1710 0001 8862 0656
PS Form 3811, July 2013 Domestic R	eturn Receipt
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signisture  A. Addressee  B. Received by (Printed Name)  C. Date of Delivery  9-9-2014  D. Is delivery address different from item 12 Yes
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes ' If YES, enter delivery address below: ☐ No
WOODY LOUISE	II ·

WOODY, LOUISE PO BOX BLL – RRTP	
CHINLE, AZ.86503	3. Service Type  Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number  [ (Transfer from service label)	3 1710 0001 8862 0649

PS Form 3811, July 2013



25	(Domestic Mail O	MAILTM RECEIPT  Inly; No Insurance Coverage Broylded)  MHF
06	For delivery informa	lioi ENCANA/BLANCO WASH
រប		
aab	Postage	\$ SdSU
	Certified Fee	(a) § (c)
0007	Return Receipt Fee (Endorsement Required)	Postmark III Z
	Restricted Delivery Fee (Endorsement Required)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1730	Total Postage '	03
	Sent To	YAZZIE ESTATE, NORBERT
7073	Sireet, Apt. No.; or PO Box No. City, State, ZIP+	709 N. Buena Vista Ave. FARMINGTON, NM 87401
	DS Form 3800 Apparen	·

<u> </u>	J. Million (2004)
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X Frysc D
Article Addressed to:	D. Is delivery address different from item 1?   Yes  If YES, enter delivery address below:   No
WOODY, MELVIN E	
PO BOX 228 NAGEEZI, NM 87037	3. Service Type  Certified Mail Priority Mail Express Registered Return Receipt for Merchandise Collect on Delivery
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 17	70 0007 98PS OP35
PS Form 3811, July 2013 Domestic Ret	urn Røceipt



2 0601		MAIL <sub>TM</sub> RECEIPT  nly; No Insurance Coverage Provided  MHF  nllon vi ENCANA/BLANCO WASH
886	Postage	5 DENVER C
1000	Certified Fee  Return Receipt Fee (Endorsement Required)	(Seastmark 2014)
1710	Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees	\$ 80207
7013 l	Sent To Street, Apt. No.; or PO Box No.	YAZZIE, ANDREW PO BOX 1782 BLOOMFIELD, NM 87413
	City, State, ZIP4 PS Form 3800.	, , , , , , , , , , , , , , , , , , , ,

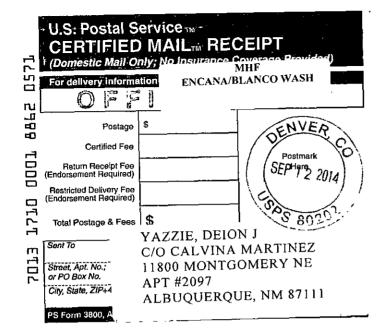
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Belivery
Article Addressed to: YAZZIE, ALFRED	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No .
1505 BLUFFVIEW AVENUE FARMINGTON, NM 87401	Service Type  Certified Mail*  Registered Insured Mail  Collect on Delivery
	4. Restricted Delivery? (Extra Fee) Yes
Article Number  Gransfer from service label) 7013 17	70 0007 88PS 0PJ8
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature
<ul> <li>so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) C. Date of Deliver ANDREW 472316 9-15-14
Attach this card to the back of the mailpiece,	Attended Manager Address
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name)  ANDREW YJZZIE 9-/5-/4  D. is delivery address different from item 17 Yes  If YES, enter delivery address below:  3. Service Type  Certified Mail  Registered  Return Receipt for Merchandi
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>1. Article Addressed to:  YAZZIE, ANDREW PO BOX 1782</li> </ul>	B. Received by (Printed Name)  AUDREW Ud Z ZIE 9-15-14  D. Is delivery address different from item 1? Tyes  If YES, enter delivery address below:  3. Service Type  Contifled Mall*  D Priority Mall Express**
TATISIS Numbers	B. Received by (Printed Name)  ANDREW 47.21e 9-/5-/ D. is delivery address different from item 1? 4 Yes If YES, enter delivery address below:  3. Service Type  Gertified Mall  Registered  Return Receipt for Merchand Insured Mail

## U.S. Postal Service™ CERTIFIED MAIL RECEIPT (Domestic Mall Only; No Insurance Coverage Provided) For delivery information v ENCANA/BLANCO WASH 8862 SASI 20202 \$ Postage Certified Fee 0001 Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1710 Total Postage & Fees \$ Sent To m YAZZIE, ANGELINA W 701 Street, Apt. No or PO Box No. PO BOX 2261 KIRTLAND, NM 87417 City, State, ZIP PS Form 3800.

.2 OSBB	U.S. Postal S CERTIFIED (Domestic Mail C	O MAILTM RECEIPT Only; No Insurance Coverage Provided ation v ENCANA/BLANCO WASH
8862	Postage	\$ DENVER
П	Certified Fee	
0001	Return Receipt Fee (Endorsement Required)	SEP getmark here 2014
	Restricted Delivery Fee (Endorsement Required)	G. Constitution of the con
1,710	Total Postage & Fees	\$ 80205
m	Sent To	YAZZIE, DAVID
707	Street, Apt. No.;	PO BOX 816
ር~	or PO Box No. City, State, ZIP+	BLOOMFIELD, NM 87413
	PS Form 3800.'A	}

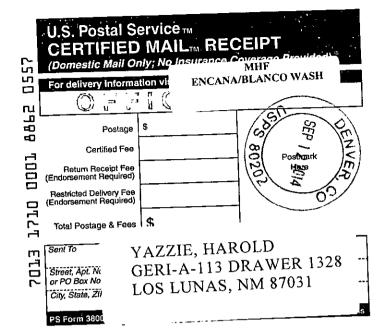
SENDER: COMPLETE THIS SECTION.	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature    A. Signature   A. Agent   Addressee     B. Repeived by (Printed Name)   Printed Name     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1?   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery address different from item 1.   Description     D. Is delivery addres
1. Article Addressed to:  YAZZIE, ANGELINA W PO BOX-2261 KIRTLAND, NM 87417	If YES, enter delivery address below:    Service Type
2. Article Number (Transfer from service label) 701	3 1710 0001 8862 0595
PS Form 3811, July 2013 Domestic Ret	urn Receipt

Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:    YAZZIE, DAVID PO BOX 816   BLOOMFIELD, NM 87413   B. Received by (Printed Name)   C. Date of Delivery 1.5   C. Date	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
YAZZIE, DAVID PO BOX 816 BLOOMFIELD, NM 87413  3. Service Type Certified Mail® Priority Mall Express® Registered Return Receipt for Merchandis Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes	item 4 if Restricted Delivery is desired.  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,	B. Received by (Printed Name)  C. Date of Delivery
PO BOX 816 BLOOMFIELD, NM 87413  3. Service Type Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandis Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes	. Article Addressed to:	If YES, enter delivery address below:   No
Registered	YAZZIE, DAVID PO BOX 816	
. Article Number	BLOOMFIELD, NM 87413	Certified Mail® Priority Mail Express**  Registered Receipt for Merchandise
2017 3010 0003 0017 0004	· · · · · · · · · · · · · · · · · · ·	4. Restricted Delivery? (Extra Fee)
The sold from Service labely		1710 0001 8862 0588



U564	U.S. Postal Service TM CERTIFIED MAILTH RECEIPT (Domestic Mail Only; No Insurance Coverage MHF For delivery information visit ENCANA/BLANCO WASH	Į
	For delivery information visit ENCANA/BLANCO WASA	ļ
	Orrib	
8862	Postage \$	
		[2]
1000	Return Receipt Fee (Endorsement Required)	(F)
	Restricted Delivery Fee (Endorsement Required)	
1710	Total Postage & Fees \$	
	Sent To YAZZIE, GENEVIEVE L	
7013	Street, Apr. or PO Box 1 City, State, BLOOMFIELD, NM 87413	
	PS Form 36	ons

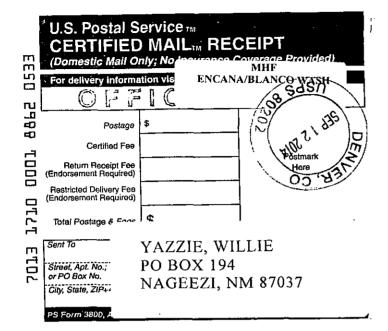
<u> </u>	5 g (6-6)
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Standard Agent  Agent  A. Standard Agent  Agent  A. Standard Agent  A
1. Article Addressed to:  YAZZIE, GENEVIEVE L BOX 2074	D. Is delivery address different from item 1? The stress of YES, enter delivery address below: No
BLOOMFIELD, NM 87413	3. Senice Type  Certified Mail* Priority Mall Express*  Registered Recum Receipt for Merchandise  Insured Mail Collect on Delivery  4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013	1710 0001 8862 0564
PS Form 3811, July 2013 Domestic Retu	ırn Receipt
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1		1 (08 SdS/)
8862	Postage	\$ 20 475
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	Restricted Delivery Fee (Endorsement Required)	
1710	Total Postage & Fees	IS
	Sent To	YAZZIE, THERESA A
7013	Street, Apt. No.; or PO Box No. City, State, ZIP+	PO BOX 1371 BLOOMFIELD, NM 87413
	PS Form 3800.	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1?  If YES, enter delivery address below:  No
YAZZIE, HAROLD	.[[
GERI-A-113 DRAWER 1328 LOS LUNAS, NM 87031	3. Service Type  Gertified Mail Registered Return Receipt for Merchandise Collect on Delivery
The same of the same of the same of the same of	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013	1710 0001 8862 0557
PS Form 3811, July 2013 Domestic R	etum Receipt





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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  D. Agent  Agent  C. Date of Delivery  D. Is delivery address different from item 1?  Yes
Article Addressed to:	If YES, enter delivery address below:
YAZZIE, WILLIE	
PO BOX 194 NAGEEZI, NM 87037	3. Service Type  ☐ Certified Mail* ☐ Priority Mail Express* ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7013	1710 0001 8862 0533
PS Form 3811, July 2013 Domestic Retu	ırn Receipt