

COGCC doc#2597096

9/12/2014

NOAV#200411870

077-08830

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|--|---|
| <ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so 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 <i>Linn R Wilson</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee |
| 1. Article Addressed to: <i>Petro Mex Resources</i> <i>888 CR 4990</i> <i>Bloomfield, NM 87413</i> | B. Received by (Printed Name) <i>Linn R Wilson</i> |
| 2. Article Number (Transfer from service label) | C. Date of Delivery <i>9-16-14</i> |
| PS Form 3811, July 2013 | D. Is delivery address different from Item 1? If YES, enter delivery address below: <input checked="" type="checkbox"/> No |
| 7013 2630 0000 5963 1561 | |
| Domestic Return Receipt | |

7013 2630 0000 5963 1561

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

BLOOMFIELD NM 87413

| | | |
|--|---------|--|
| Postage | \$ 0.49 | 0543 |
| Certified Fee | \$3.30 |  |
| Return Receipt Fee (Endorsement Required) | \$2.70 | |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 | |
| Total Postage & Fees | \$ 6.49 | |

Sent To *Petro Mex Resources*

Street, Apt. No., or PO Box No. *888 CR 4990*

City, State, ZIP+4 *Bloomfield NM 87413*

PS Form 3800, August 2006 See Reverse for Instructions