

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

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

7008 3230 0003 0726 3529

**OFFICIAL USE** *status*

|   |    |                  |
|---|----|------------------|
| Postage   | \$ | <i>1/16/2014</i> |
| Certified Fee                                     |    |                  |
| Return Receipt Fee<br>(Endorsement Required)      |    |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |    |                  |

Postmark  
Here

**Daniel Schnee, Senior Counsel**  
 Total Legal Department El Paso Corp/Kinder Morgan  
 Two Nevada Avenue  
 Colorado Springs, CO 80903

Sent To \_\_\_\_\_  
 Street, or PO Box \_\_\_\_\_  
 City, St \_\_\_\_\_

DOCKET NO.: CAA-08-2013-0015

PS Form 3800, August 2006

See Reverse 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.

1. Article Addressed to: *JAN 17 2014*  
 Daniel Schnee, Senior Counsel  
 Legal Department El Paso Corp/Kinder Morgan  
 Two Nevada Avenue  
 Colorado Springs, CO 80903  
 DOCKET NO.: CAA-08-2013-0015

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[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  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. *7008 3230 0003 0726 3529*

*status*