

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

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

OFFICIAL USE

7012 2210 0000 5370 1964

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here
CFO 8/2/16

Cobra Oil & Gas Corporation
 CT Corporation System
 314 E. Thayer Avenue
 Bismarck, ND 58501
 CWA-08-2016-0009

Sent To
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

PS Form 3800, Au

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: **AUG 04 2016**

Cobra Oil & Gas Corporation
 CT Corporation System
 314 E. Thayer Avenue
 Bismarck, ND 58501
 CWA-08-2016-0009

A

2. Article Number
 (Transfer from service label)

7012 2210 0000 5370 1964

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [Signature] Agent Addressee
 B. Received by (Printed Name) C. Date of Delivery
[Signature] *8/2/16*

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