

Wapiti Operating, LLC  
CWA-06-2014-1754

Attorney: Rusty Herbert

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REGIONAL HEARING CLERK  
EPA REGION VI



CWA-06-2014-1754 / Complaint / TX4010996

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"><li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can 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 <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to: <u>4050, area ZIP+4</u>		B. Received by (Printed Name) <u>Silva</u>	C. Date of Delivery <u>4-7</u>
Mr. Kyle Sanders, EHS Specialist Wapiti Operating, LLC 800 Gessner Road, Suite 700 Houston, TX 77024		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
		7005 1820 0003 7451 2779	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540