

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

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

**OFFICIAL USE**

7009 3410 0000 2596 2189

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

*2/1/12*

Postmark  
Here

Total Postage: **Tony Lucero, Env. Health & Safety Coord.**

Sent To: **Enerplus Resources (USA) Corp.**  
 Street, Apt. No. or PO Box No: **950 17<sup>th</sup> Street, Suite 2200**  
 City, State, Zi: **Denver, CO 80202-2805**  
**DOCKET NO.: CAA-08-2011-0021**

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:

*FEB - 1 2012*

**Tony Lucero, Env. Health & Safety Coord.**  
**Enerplus Resources (USA) Corp.**  
 950 17<sup>th</sup> Street, Suite 2200  
 Denver, CO 80202-2805  
**DOCKET NO.: CAA-08-2011-0021**

*M*

2. Article #  
(Transfer)

7009 3410 0000 2596 2189

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) *Haley Mc* C. Date of Delivery *2/2/12*

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

*Corrected Signature*

7009 3410 0000 2596 2172

**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)

**OFFICIAL USE** *Amended Case*

Postage	\$	1/31/2012 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Postage: **Tony Lucero, Env. Health & Safety Coord.**

Sent To: **Enerplus Resources (USA) Corp.**  
 950 17<sup>th</sup> Street, Suite 2200  
 Denver, CO 80202-2805  
**DOCKET NO.: CAA-08-2011-0021**

PS Form 3800, August 2006 See Reverse for Instructions

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>	<p>A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Haley Mc</i> C. Date of Delivery <i>2/2/12</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No          If YES, enter delivery address below:</p>
<p>1. Article Addressed to: <i>FEB - 1 2012</i></p> <p><b>Tony Lucero, Env. Health &amp; Safety Coord.</b>  <b>Enerplus Resources (USA) Corp.</b>  <b>950 17<sup>th</sup> Street, Suite 2200</b>  <b>Denver, CO 80202-2805</b>  <b>DOCKET NO.: CAA-08-2011-0021</b></p>	<p>3. Service Type</p> <p><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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transit)</p> <p>7009 3410 0000 2596 2172</p>	<p><i>Amended Case</i></p>
PS Form 3811, February 2004	Domestic Return Receipt 102595-02-M-1540