

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** (CA/PS)

7008 3230 0003 0729 6046

Postage \$		01/08/2010	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			
<b>Total Post</b>	<b>Russell L. True, Area Manager</b>		
Send to:	<b>Roggen Gas Plant</b>		
Street, Apt. or PO Box #	35409 Weld County Road 18		
City, State, ZIP+4	Roggen, CO 80652		
	<b>DOCKET NO.: CAA-08-2010-0006</b>		

PS Form 3811, August 2004 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

Russell L. True, Area Manager  
 Roggen Gas Plant  
 35409 Weld County Road 18  
 Roggen, CO 80652  
 DOCKET NO.: CAA-08-2010-0006  
 JAN 8 2010  
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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*X [Signature]*

B. Received by (Printed Name)  Agent  Addressee  
*Em Eders*

C. Date of Delivery  
*1/11/10*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from 4) **7008 3230 0003 0729 6046**