

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:

S

XSR, Inc.
 Patrick Sweeney, Registered Agent
 100 North Center Street, Suite 300
 Casper, WY 82601

FEB 14 2012

2. Article Number

(Transfer from service label)

7009 3410 0000 2596 8761

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

P. Sweeney

C. Date of Delivery

02/17/12

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

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

United States Environmental
 Protection Agency
 Region 8
 1595 Wynkoop Street
 Denver, CO 80202

SDWA 98 2012 0010

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*Mc Caffrey
(new)*