

7009 3410 0000 2594 7803

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**

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

8/26/11

Postmark  
Here

Total F

**Christopher W. Armstrong**  
**Assistant General Counsel - Environmental**

Sent To

**XTO Energy Inc.**  
810 Houston Street  
Fort Worth, TX 76102

Street, #

or PO B

City, Sta

CAA-08-2011-0018

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:

AUG 29 2011

**Christopher W. Armstrong**  
**Assistant General Counsel - Environmental**  
**XTO Energy Inc.**  
810 Houston Street  
Fort Worth, TX 76102

2. Article  
(Transit)

7009 3410 0000 2594 7803

PS Form 3811, February 2004

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Kenia Lacy - Brown

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

AUG 31 2011

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

CAA-08-2011-0018

X

CA/FO

102595-02-M-1540