State of Utah
Department of Natural Resources
Division of Oil, Gas, & Mining
1588 West North Temple
Salt Lake City, Utah 84116

CLAIM CHECK NO.
602545

☐ HOLD

DATE
7-22

1ST NOTICE
JUL 27 1981

2ND NOTICE

RETURN

Detached from
PS Form 3849-A
May 1979

RETURNED TO SENDER

REASON CHECKED
Unclaimed ✓ Refused
Addressee unknown
Insufficient Address
No such street
No such office in state
Do not remail in this envelope

JUL 21 1981

SALT LAKE CITY UTAH
JUL 21 '81
U.S. POSTAGE
.20
P.O. 140789

Mr. Robert L. Gifford
A.U. Associates
860 West Columbia Lane, #30
Provo, Utah 84601

CERTIFIED MAIL
P20 0367528

PROVO, UT
JUL 22 1981
USPO

Last Notice JUL 27 1981

Oil, Gas & Mining

PS Form 3811, Apr. 1977 RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
- [X] Show to whom and date delivered ..... ____¢
- [ ] Show to whom, date, and address of delivery .. ____¢
- [ ] RESTRICTED DELIVERY
  Show to whom and date delivered ..... ____¢
- [ ] RESTRICTED DELIVERY
  Show to whom, date, and address of delivery . $____
  (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
Robert Gifford, A.U. Associates
860 West Columbia Lane, #30
Provo, Utah 84601

3. ARTICLE DESCRIPTION:

REGISTERED NO.	CERTIFIED NO.	INSURED NO.
	0367528	

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent

4. DATE OF DELIVERY

POSTMARK
7/14/81

5. ADDRESS *(Complete only if requested)*

6. UNABLE TO DELIVER BECAUSE:

CLERK'S INITIALS

☆GPO: 1977—0—249-595

P20 0367528

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Follow-up Tent. Apprv.-ACT/045/014

SENT TO
Robert Gifford-A.U. Assoc.

STREET AND NO.
860 W. Columbia Ln., #30

P.O., STATE AND ZIP CODE
Provo, Utah 84601

POSTAGE				$
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE			¢
	OPTIONAL SERVICES	SPECIAL DELIVERY		¢
		RESTRICTED DELIVERY		¢
		RETURN RECEIPT SERVICE	SHOW TO WHOM AND DATE DELIVERED	¢
			SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY	¢
			SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY	¢
			SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	¢
TOTAL POSTAGE AND FEES				$

POSTMARK OR DATE

7/14/81

PS Form 3800, Apr. 1976

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, **leaving the receipt attached**, and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified-mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in Item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.

☆ GPO : 1979 O - 289-363