COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent X Print your name and address on the reverse □ Addressee B. Received by (Printed Name) so that we can return the card to you. C. Date of Delivery Attach this card to the back of the mailpiece. or on the front if space permits. ☐ Yes Is delivery address different from item 1? 1. Article Addressed to: 7/21/11 B.M. ☐ No If YES, enter delivery address below: PCB 2012-007 & PCB 2012-008 Mail Services Michael Kemp Bartlesville, OK WRB Refining LLC 404 Phillips Building Bartlesville, OK 74004 3. Service Type Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail COD. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7011 0110 0001 8269 8973 (Transfer from service label)

Domestic Return Receipt

102595-02-M-1540

PS Form 3811, February 2004