2015-08-04 12:08:14

THE STATE CORPORATION COMMISSION Kansas Corporation Commission OF THE STATE OF KANSAS

/s/ Amy L. Gilbert

| Before Commissioners: | Shari Feist Albrecht, Chair Jay Scott Emler | | | |
|--|--|------------------------------|--|--|
| | Pat Apple | | | |
| In the matter of the failure of Lew L ("Operator") to report activity that o | / | Docket No.: 15-CONS-907-CPEN | | |
| during the 2014 calendar year in conwith K.A.R. 82-3-409. | mpliance) | CONSERVATION DIVISION | | |
| |) | License No.: 5409 | | |

PROOF OF SERVICE

The undersigned attorney hereby records that, pursuant to the attached Domestic Return Receipt, the operator has received valid service of the Order in this docket.

Dated this 3rd day of August, 2015.

Respectfully submitted,

/s/ Jonathan R. Myers Jonathan R. Myers, S.Ct. #25975

Litigation Counsel **Kansas Corporation Commission** 266 N. Main Street, Suite 220 Wichita, Kansas 67202-1513 (316) 337-6200 (Telephone)

(316) 337-6106 (Facsimile)

For Commission Staff

| A Salar Annual Salar Sal | | |
|--|--|--|
| SENDER: COMPLETE THIS SECTION | N | COMPLETE THIS SECTION ON DELIVERY |
| Complete items 1, 2, and 3. Also contem 4 if Restricted Delivery is desired. Print your name and address on the so that we can return the card to your address. Attach this card to the back of the nor on the front if space permits. | Address W. Proposited by Printed Name) . S. Date of Deliv | |
| 1. Article Addressed to: LEW L. MARSHALL | . [| If YES, enter delivery address below: ☐ No |
| PO BOX 306 EUREKA KS 67045 | | 3. Service Type □ Certified Mail □ Priority Mail Express □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery 4. Restricted Delivery? (Extra Fee) □ Yes |
| Article Number (Transfer from service label) | 7014 2 | 2120 0004 1024 3188 |
| PS Form 3811, July 2013 | Domestic Re | eturn Receipt |