

**THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS**

2015-08-04 12:40:12  
Kansas Corporation Commission  
/s/ Amy L. Gilbert

Before Commissioners:                      Shari Feist Albrecht, Chair  
   Jay Scott Emler  
   Pat Apple

In the matter of the failure of Rick Housel dba	)	Docket No.: 15-CONS-927-CPEN
Rick's Well Service ("Operator") to report	)	
activity that occurred during the 2014	)	CONSERVATION DIVISION
calendar year in compliance with K.A.R. 82-	)	
<u>3-409.</u>	)	License No.: 33969

**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 3<sup>rd</sup> 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

## 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:

RICK HOUSEL dba RICK'S  
WELL SERVICE  
PO BOX 268  
CHERRYVALE KS 67335

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Rick Houzel*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Rick Houzel*

C. Date of Delivery

*6/10/15*D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No*PO Box 268*

3. Service Type

☒ Certified Mail®☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7014 2120 0004 1024 3638

PS Form 3811, July 2013

Domestic Return Receipt