

WM-23-309

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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.

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

Scott Korte

C. Date of Delivery

1/12

Is different from item 1?  Yes  
livery address below:  No

Solutions Inc  
Registered Agent for Asgard Resources LLC  
1709 N 19th St Ste 3  
Bismarck ND 58501-2121



9590 9402 7987 2305 9273 93

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

2. Article Number (Transfer from service label)

7022 3330 0000 7993 6309

Mail  
Mail Restricted Delivery  
0)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



9590 9402 7987 2305 9273 93



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

PUBLIC SERVICE COMMISSION  
600 E BOULEVARD AVE DEPT 408  
BISMARCK ND 58505-0480

RECEIVED

JAN 16 2024

NORTH DAKOTA  
PUBLIC SERVICE COMMISSION