



October 15, 2010

CERTIFIED MAIL

Alvin and Donna Dechant
11521 County Road 49
Hudson, CO 80642

Re: Notice of Intent to Conduct Surface Operations (Facilities)
DECHANT 27-12 Sec. 12: SENE DECHANT 17-12 Sec. 12: SENE
DECHANT 32-1 Sec. 1: NESW DECHANT 9-1 Sec.1: NESW
DECHANT 19-1 Sec. 1: NESW DECHANT 22-1 Sec.1: NESW
DECHANT 23-1 Sec. 1: NESW DECHANT 24-1 Sec.1: NESW
DECHANT 35-1 Sec. 1: NESW DECHANT 40-1 Sec.1: NESW
Township 2N, Range 65W
Weld County, Colorado

Ladies and Gentlemen:

The Colorado Oil and Gas Conservation Commission ("COGCC") has adopted guidelines and procedures regarding oil and gas activities affecting the surface. These rules stipulate that an affected surface owner must be given advance notice in writing by an operator at least thirty (30) days prior to drilling an oil and gas well.

Kerr-McGee Oil and Gas OnShore LP ("KMG") intends to begin operations to drill the above captioned oil and gas well(s) upon approval of title, receipt of permits from the COGCC prior to April 31, 2011. As the surface owner, it is your responsibility to notify the tenant farmer, if applicable, of this proposed operation.

A site diagram of the proposed location of the well and any associated roads and production facilities is enclosed. Should you have any questions and/or concerns, please contact me at (303) 655-4350 or my cell at (970) 590-6249.

Very truly yours,
KERR-MCGEE OIL AND GAS ONSHORE LP

David Bell
Landman

I/we waive the 30 day notice referenced above and approve of the operations commencing upon KMG's receipt of the drilling permit.

:cl
Enclosure

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,



Alvin and Donna Dechant
11521 County Road 49
Hudson, CO 80642

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

10-19-10

Address different from item 1? ☐ Yesor delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7010 0290 0001 4315 6890

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service TMCERTIFIED MAIL TM RECEIPT

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