



May 4, 2011

CERTIFIED MAIL

Mr. Tim Kelly
Colorado State Board of Land Commissioners
1127 Sherman Street, Suite 300
Denver, CO 80203

Re: Notice of Intent to Conduct Surface Operations
STATE OF COLORADO 5-24HZ
Township 05 South, Range 65 West, Section 24
Arapahoe County, Colorado

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.

Anadarko E&P Company LP ("Anadarko") 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 December 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,
ANADARKO E&P COMPANY LP

A handwritten signature in cursive script that reads "David Bell".

David Bell
Landman

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

:cl
Enclosures

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:

Mr. Tim Kelly
Colorado State Board of Land
Commissioners
1127 Sherman Street, Suite 300
Denver, CO 80203

2. Article Number

(Transfer from service label)

7009 3410 0000 2374 3377

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Jolene Cabrera

C. Date of Delivery

5-5

D. Is delivery address different from item 1? ☐ YesIf YES, enter 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**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)For delivery information visit our website at www.usps.com**OFFICIAL USE**

Postage \$

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(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$

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MAY - 4 2011

Instructions