



5/8/2014

VIA Certified Mail: 7013 2250 0001 4572 7343

Joe & Sandra Amen
3991 CR 47
Hudson, CO 80642-8901

RE: Rule 305.a.(2) Notification:

Amen 1 Well: 211' FNL, 851' FEL, Sec. 14-T1N-R65W, Weld County, Colorado
Amen 2 Well: 211' FNL, 836' FEL, Sec. 14-T1N-R65W, Weld County, Colorado
Amen 3 Well: 211' FNL, 821' FEL, Sec. 14-T1N-R65W, Weld County, Colorado
Amen 4 Well: 211' FNL, 806' FEL, Sec. 14-T1N-R65W, Weld County, Colorado
Amen 5 Well: 211' FNL, 791' FEL, Sec. 14-T1N-R65W, Weld County, Colorado

Joe & Sandra Amen,

You are being provided this as a mandatory notice. Verdad Oil & Gas Corp. (Verdad) is applying to the Colorado Oil and Gas Conservation Commission (COGCC) to drill the above referenced wells at the described surface location. Colorado Oil and Gas Conservation Commission Rule 305.a.(2), stipulates that for oil & gas locations that are proposed within the buffer zone (within 1000' of a building unit), the operator shall notify the owners of all Building Units within the 1000' radius that a permit to conduct Oil and Gas Operations is being sought. Your building unit lies within 1000' of the proposed location.

You are entitled to the following information:

a. Operator name and contact info:

Verdad Oil & Gas Corporation
5950 Cedar Springs Road, Suite 200
Dallas, TX 75235

b. Location and a general description of the proposed Well & facilities:

Five (5) well pad and associated production facilities located southwest of the intersection of CR 10 & CR 47 in Weld County, CO.

c. Anticipated date operations will commence:

Operations are planned to commence on Third Quarter of 2014. The exact date will vary based upon the rig availability and other operational factors.

d. The Local Governmental Designee (LGD) contact information:

David Bauer, County Engineer- Weld County
970-304-6496 ext. 3739
dbauer@co.weld.co.us

Mailing address:
Weld County
Attn: David Bauer
1111 H Street
Greeley, CO 80632



- e. As a building unit owner, you may request a meeting to discuss the proposed operations by contacting the LGD or Operator.
- f. "Notice of Comment Period" will be sent pursuant to Rule 305.c. when the public comment period commences. This notice will include additional information and an invitation to comment further.

You may contact the following individual concerning the proposed operations:

Clayton Duke
 1707 Cole Boulevard, Suite 200
 Golden, CO 80401
 720-420-5700

Thank you for your attention to this matter.

Sincerely,

Clayton L. Duke
 Senior Engineer
 Integrated Petroleum Technologies, Inc.
 Consultants to Verdad Oil & Gas Corp.

7343 7343 4572 2250 0001

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
HUDSON CO 80642 GOLDEN CO	
Postage	\$ 0.98
Certified Fee	\$ 3.30
Return Receipt Fee (Endorsement Required)	\$ 2.70
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 6.98

0218
 MAY - 8 2014
 Postmark Here
 USPS 80401-9998

Sent To	
JOE + SANDRA AMEN	
Street, Apt. No.; or PO Box No. 3991 C.R. 47	
City, State, ZIP+4 HUDSON, CO 80642-8901	

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>X <i>Jared Amen</i></p> <p>B. Received by (Printed Name) <i>Jared Amen</i></p> <p>C. Date of Delivery <i>5-8-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>JOE + SANDRA AMEN 3991 C.R. 47 HUDSON, CO 80642-8901</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7013 2250 0001 4572 7343</p>	

PS Form 3811, July 2013 Domestic Return Receipt