

014-09229

Basin Operating Company

370 17th Street, Suite 1800

Denver, CO 80202

Office 303/685-8000

Fax 303/685-8010



February 15, 1994

Registered

Mr. and Mrs. Earl Davis
200 West 160th Avenue
Broomfield, CO 80208

RE: Notice of Intent to Drill
Basin Operating Company Davis 43-6
NE/4SE/4 Section 6, T1S R68W
Adams County, Colorado

Dear Mr. and Mrs. Davis:

Please accept this letter as your thirty (30) day notice of Basin Operating Company's plans to drill a well on the above described property. This notice is in accordance with Rule 1002.a of the Wattenberg Special Area Rules as established by the Colorado Oil and Gas Conversation Commission as well as applicable City of Broomfield regulations.

During all phases of drilling activities, your contact with Basin will be as follows:

Basin Operating Company
370 17th Street, Suite 1800
Denver, CO 80202
303-685-8000

Monty W. Kastner
1430 West 116th, #15
Westminster, CO 80234
303-252-7415

Enclosed please find a self-addressed, stamped postcard indicating your preference to meet with the aforementioned representative to review Basin's proposed operations. Please complete the card and return it to the undersigned as soon as possible.

Along with the aforementioned requirements, Basin is responsible for posting a notice of intent to drill on the above described property. Please be aware of our obligation to post such notice on your property.

We look forward to meeting with you and working together to help minimize the disturbance associated with our drilling activities. Please contact the undersigned at your earliest convenience so we can meet to discuss the specifics involved in this location. Thank you for your time and cooperation in this matter.

Very truly yours,

A handwritten signature in cursive script that reads "Monty W. Kastner".
Monty W. Kastner, Agent
Basin Operating Company

Enclosure



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Mr. Mrs Earl Davis
 200 W 160th Avenue
 Broomfield, CO
 80008

4a. Article Number
 P037471608

4b. Service Type
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
 2/26/94

5. Signature (Addressee)
 Earl W. Davis

8. Addressee's Address (Only if requested and fee is paid)
 DAVIS 43-6, 44-6, 42-6,
 83-6, 82-6, 13-5, 12-5, 11-5

6. Signature (Agent)

Thank you for using Return Receipt Service.

HANDLER ENERGY, LLC
DAVIS - 43-6

