



1099 18<sup>th</sup> Street • Denver, CO 80202 • 720-929-6000

July 19, 2010

CERTIFIED MAIL

Orville L., Karen, and Kendra Thomason  
20529 CR 22  
Hudson, CO 80642

Re: Notice of Intent to Conduct Surface Operations  
THOMASON 16-9 THOMASON 37-9  
THOMASON 38-9 THOMASON 39-9  
Township 2N, Range 65W, Section 9: SE/4SE/4  
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 December 19, 2010. 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*

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.

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: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.



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## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

address different from item 1? ☐ Yes  
or delivery address below: ☐ No

- ☒ 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)

7009 2820 0003 2817 9549

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service <sup>TM</sup>CERTIFIED MAIL <sup>TM</sup> RECEIPT

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(Endorsement Required)Postmark  
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C. Wallace



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PS Form 3800, August 2006

See Reverse for Instructions

7009 2820 0003 2817 9549