



Ursa Operating Company LLC

792 Buckhorn Drive Rifle, CO 81650 – 970-625-9922

Gary L & Darlene A Burris
244 Smokey Hill Circle
Parachute, CO 81635

Certified Mail Return Receipt 10/27/2017

RE: Rule 305 a.(2) Notice of Intent to Conduct Oil & Gas Operations: BMC A Pad

Dear Mr. and Mrs. Burris:

Colorado Oil and Gas Conservation Commission (COGCC) regulations, effective August 1, 2013, require Ursa to notify Surface Owners and Building Owners with 1000' that a permit for oil and gas operations is being sought to construct a new well pad at the proposed BMC A location located at:

**SW/4SW/4 of Section 18, Township 7 South Range 95 West of the 6th P.M.
SE/4SE/4 of Section 13, Township 7 South Range 96 West of the 6th P.M.**

Typical facilities will include:

- Surface and Production Drilling Rigs (short-term)
- Wellheads with signage
- Completions Tanks and Equipment During Completions (short-term)
- Bermed production tanks and equipment (long-term)

If your property or building unit is within 500' of the location, you will receive a complete list of facilities upon a "Completeness Determination" under and Oil and Gas Location (OGLA) Assessment Notice and other information required by COGCC Rule 305.c (1). If you are within 500 - 1000' of the location you will receive similar information in accordance with COGCC Rule 305.c (2) unless you waive this requirement.

Operations are currently planned to begin at the location in the First quarter of 2018.

Under the COGCC rules, you have the right to request a meeting at any time to meet with Ursa, or the Local Government Designee (LGD), Kirby Wynn, Phone # 970-625-5905. You will receive a subsequent notice upon the Form 2A receiving a "Completeness Determination" unless you waive this requirement.

Should you decide to waive the meeting under this Pre-application Notification, or waive the "Completeness Determination", or subsequent notifications and Ursa has not received said waivers within 10 business days, it will be understood that you are expecting subsequent notifications.

I am available to answer any questions or concerns you may have, please contact me at your earliest convenience.

John Doose
Landman
Cell: (970) 379-0008
jdoose@ursaresources.com

WAIVERS

RE: Rule 305 a.(2) Notice of Intent to Conduct Oil & Gas Operations: BMC A Pad

Please initial by the following statements and sign below:

30 Day Waiting Period to Submit Form 2A Permit

_____ - I understand and authorize Ursa Operating Company LLC to submit any and all permit applications prior to the 30 day waiting period that is set forth in rule 305a.(1) and (2) of the COGCC's Form 2 and 2A Application Procedures, including the Pre-Application notifications.

Completeness Determination Notification

_____ - I understand and waive my right to receive the "OGLA/Completeness Determination" notification as described in Rule 305c.(1) of the COGCC's final setback rules, effective August 1, 2013.

Buffer Zone Notification

_____ - I understand and waive my right to receive the "Buffer Zone Notice" notification as described in Rule 305c.(2) of the COGCC's final setback rules, effective August 1, 2013.

Meeting with the Operator

_____ - I understand and waive my right to request a meeting with the operator concerning their intent to conduct oil and gas operations as described in Rule 306.e(3) of the COGCC's final setback rules, effective August 1, 2013

Name

Date

SENDER: COMPLETE THIS SECTION

Ensure items 1, 2, and 3 are completed.

Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Joshua Archuleta
210 Smokey Hill Circle
Parachute CO 81635-9564



9490 9118 9956 4630 5945 08

Article Number (Transfer from service label)

9414 7118 9956 4630 5945 28

Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

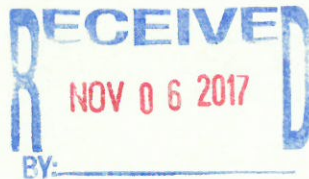
A. Signature: (☐ Addressee or ☐ Agent)

X *Joshua Archuleta*

B. Received By: (Printed Name)

C. Date of Delivery

11-3-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Gary L & Darlene A Burris
244 Smokey Hill Circle
Parachute CO 81635-9564



9490 9118 9956 4630 5408 26

2. Article Number (Transfer from service label)

9414 7118 9956 4630 5408 60

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

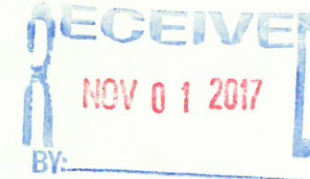
A. Signature: (☐ Addressee or ☐ Agent)

X *Gary Burris*

B. Received By: (Printed Name)

C. Date of Delivery

10/30

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

Ensure items 1, 2, and 3 are completed.

Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Richele Cain Trust
56 Smokey Hill Circle
Parachute CO 81635-9535



9490 9118 9956 4630 5169 51

Article Number (Transfer from service label)

9414 7118 9956 4630 5169 19

Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

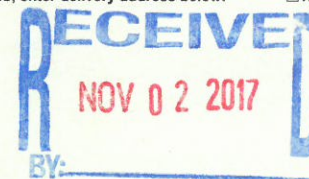
A. Signature: (☐ Addressee or ☐ Agent)

X *Richele Cain*

B. Received By: (Printed Name)

C. Date of Delivery

10-31-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Benjamin Castillo
2940 Lyle Drive
Grand Junction CO 81503-2436



9490 9118 9956 0863 5437 95

2. Article Number (Transfer from service label)

9414 7118 9956 0863 5437 08

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

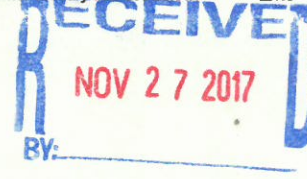
A. Signature: (☐ Addressee or ☐ Agent)

X *Linda Castillo*

B. Received By: (Printed Name)

C. Date of Delivery

10/30

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail®

U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 9487 85

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 9487 34

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Battlement Mesa Housing, LLC
55 Emerald Lane
Parachute CO 81635

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 9109 60

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 9109 26

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Paul E & Joyce J Rolston
27 West Emerald Lane
Parachute CO 81635-9550

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 4485 17

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 4485 59

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Julio Cruz
180 Smokey Hill Circle
Parachute CO 81635-9543

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 5704 30

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 5704 72

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Albert & Nobia Story
222 Smokey Hill Circle
Parachute CO 81635-9564

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 5417 13

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 5417 55

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Amanda & Tyler Hampton
256 Smokey Hill Circle
Parachute CO 81635-9564

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 7708 16

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 7708 58

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Shonna Jensen
78 Smokey Hill Circle
Parachute CO 81635-9535

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 7933 96

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 7933 45

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Joshua C Smith & Rolene Halbmeier
40 Smokey Hill Circle
Parachute CO 81635

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER

9414 7118 9956 4630 4577 31

RETURN RECEIPT TRACKING NUMBER

9490 9118 9956 4630 4577 73

FEES

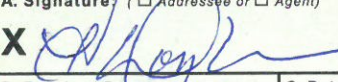
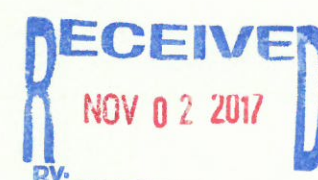
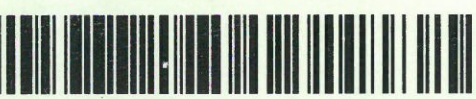
Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

William E Swanson, Jr
68 Silverton Circle
Parachute CO 81635-9577

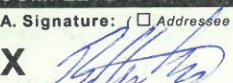


Postmark
Here



ENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Ensure items 1, 2, and 3 are completed. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent) X 	
		B. Received By: (Printed Name)	C. Date of Delivery 10-31-17
Article Addressed to: Holland Marie Doyle 43 Silverton Place Parachute CO 81635-9578		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 	
 9490 9118 9956 4630 1215 37		3. Service Type <input checked="" type="checkbox"/> Certified Mail®	
Article Number (Transfer from service label) 9414 7118 9956 4630 1215 88			

S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

ENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Ensure items 1, 2, and 3 are completed. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent) X 	
		B. Received By: (Printed Name)	C. Date of Delivery 10-31-17
Article Addressed to: Sam & Dira Hurley 105 Silverton Circle Parachute CO 81635-9577		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 	
 9490 9118 9956 4630 1918 82		3. Service Type <input checked="" type="checkbox"/> Certified Mail®	
Article Number (Transfer from service label) 9414 7118 9956 4630 1918 40			

S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Ensure items 1, 2, and 3 are completed. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent) X 	
		B. Received By: (Printed Name)	C. Date of Delivery 11-3-17
1. Article Addressed to: Deborah L Fawson 53 Silverton Place Parachute CO 81635-9578		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 	
 9490 9118 9956 4630 1688 53		3. Service Type <input checked="" type="checkbox"/> Certified Mail®	
2. Article Number (Transfer from service label) 9414 7118 9956 4630 1688 11			


PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Ensure items 1, 2, and 3 are completed. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent) X 	
		B. Received By: (Printed Name)	C. Date of Delivery
1. Article Addressed to: Bruce J Kettle 75 Silverton Circle Parachute CO 81635-9577		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No 	
 9490 9118 9956 4630 1971 05		3. Service Type <input checked="" type="checkbox"/> Certified Mail®	
2. Article Number (Transfer from service label) 9414 7118 9956 4630 1971 25			

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		B. Received By: (Printed Name)	C. Date of Delivery
			10/30
<p>1. Article Addressed to:</p> <p>Kenneth LaMarre 54 Emerald Lane Parachute CO 81635-9584</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 01 2017 BY: <i>[Signature]</i></p>	
 <p>9490 9118 9956 4630 4838 57</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 4838 15</p>			

S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		B. Received By: (Printed Name)	C. Date of Delivery
			11-3-17
<p>1. Article Addressed to:</p> <p>Norma A Martinez & Israel Armendaris 143 Smokey Hill Circle Parachute CO 81635-9543</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 06 2017 BY: <i>[Signature]</i></p>	
 <p>9490 9118 9956 4630 7168 18</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 7162 72</p>			


S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		B. Received By: (Printed Name)	C. Date of Delivery
		Sonia Loya	11/1/17
<p>1. Article Addressed to:</p> <p>Rosanna P Loya 37 West Emerald Lane Parachute CO 81635-9550</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 03 2017 BY: <i>[Signature]</i></p>	
 <p>9490 9118 9956 4630 9492 16</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 9115 78</p>			

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		B. Received By: (Printed Name)	C. Date of Delivery
			11-6-17
<p>1. Article Addressed to:</p> <p>Kathleen D McCulley 51 Silverton Circle Parachute CO 81635-9577</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 09 2017 BY: <i>[Signature]</i></p>	
 <p>9490 9118 9956 4630 1825 38</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 1825 89</p>			

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: (☐ Addressee or ☐ Agent)

X

B. Received By: (Printed Name)

BILL NELSON

C. Date of Delivery

10/30/17

1. Article Addressed to:

Bill Nelson
35 Locust Way
Parachute

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

RECEIVED
NOV 02 2017
BY: _____

3. Service Type

☒ Certified Mail®

9490 9118 9956 4636 4829 91

2. Article Number (Transfer from service label)

9414 7118 9956 4636 4829 04

S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature: (☐ Addressee or ☐ Agent)

X

B. Received By: (Printed Name)

THOMAS

C. Date of Delivery

10/31/17

1. Article Addressed to:

Kirby Wynn
195 West 14th Ste D
Rifle CO 81650-4717

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED
NOV 01 2017
BY: _____

3. Service Type

☒ Certified Mail®

9490 9118 9956 4630 9928 85

2. Article Number (Transfer from service label)

9414 7118 9956 4630 9928 43

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Carl M & Laura Metcalf
190 Silverton Court
Parachute CO 81635-9582



9490 9118 9956 4630 4212 00

2. Article Number (Transfer from service label)

9414 7118 9956 4630 4212 20

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

11-6-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED
NOV 06 2017
BY: _____

3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nolan Ogden
28 Smokey Hill Circle
Parachute CO 81635-9535



9490 9118 9956 4630 5733 74

2. Article Number (Transfer from service label)

9414 7118 9956 4630 5733 32

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

11-6-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED
NOV 09 2017
BY: _____

3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jeannette L Osmon
60 West Emerald Lane
Parachute CO 81635-9535



9490 9118 9956 4630 9156 17

2. Article Number (Transfer from service label)

9414 7118 9956 4630 9159 72

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

10/30

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED
NOV 01 2017
BY: _____

3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lamora & Christopher Roberts
56 Silverton Place
Parachute CO 81635-9578



9490 9118 9956 4630 1224 11

2. Article Number (Transfer from service label)

9414 7118 9956 4630 1220 73

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

11-6-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

RECEIVED
NOV 09 2017
BY: _____

3. Service Type

☒ Certified Mail®

U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER
9414 7118 9956 4630 1615 77

RETURN RECEIPT TRACKING NUMBER
9490 9118 9956 4630 1892 16

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

James Provost
137 Silverton Circle
Parachute CO 81635-9580

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER
9414 7118 9956 4630 4508 79

RETURN RECEIPT TRACKING NUMBER
9490 9118 9956 4630 4507 12

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

William E Swanson, Jr
157 Silverton Circle
Parachute CO 81635-9580

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER
9414 7118 9956 4630 9357 10

RETURN RECEIPT TRACKING NUMBER
9490 9118 9956 4630 9357 52

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Julio A & Amy Cruz
11 Emerald Lane
Parachute CO 81635-9584

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER
9414 7118 9956 4630 9395 10

RETURN RECEIPT TRACKING NUMBER
9490 9118 9956 4630 9395 52

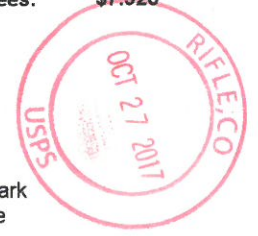
FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

James Warn
14 Emerald Lane
Parachute CO 81635-9584

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER
9414 7118 9956 4630 9455 04

RETURN RECEIPT TRACKING NUMBER
9490 9118 9956 4630 9455 91

FEES

Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Battlement Mesa Housing, LLC
23 Emerald Lane
Parachute CO 81635-9584

Postmark
Here



U.S. Postal Service
Certified Mail Receipt

OUTBOUND TRACKING NUMBER
9414 7118 9956 4630 9931 30

RETURN RECEIPT TRACKING NUMBER
9490 9118 9956 4630 9931 72

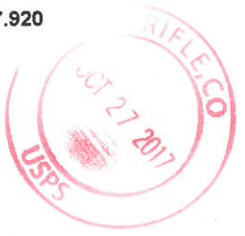
FEES


Postage per piece	\$1.820
Certified Fee	\$3.350
Return Receipt Fee	\$2.750
Total Postage & Fees:	\$7.920

ARTICLE ADDRESS TO:

Brent D Cole
19 West Emerald Lane
Parachute CO 81635-9550


Postmark
Here



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		<p>B. Received By: (Printed Name) C. Date of Delivery</p> <p>R-S. ROY 10-31-17</p>	
<p>1. Article Addressed to:</p> <p>Richard Roy 131 Smokey Hill Circle Parachute CO 81635-9543</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 02 2017 BY: _____</p>	
 <p>9490 9118 9956 4630 7747 02</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 7747 22</p>			

S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		<p>B. Received By: (Printed Name) C. Date of Delivery</p> <p>Paul Strahle 10/30</p>	
<p>1. Article Addressed to:</p> <p>Willa & Paul Strahle 49 West Emerald Lane Parachute CO 81635-9550</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 01 2017 BY: _____</p>	
 <p>9490 9118 9956 4630 9189 84</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 9189 42</p>			

S Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		<p>B. Received By: (Printed Name) C. Date of Delivery</p> <p>10-31-17</p>	
<p>1. Article Addressed to:</p> <p>William & Eunice Smith 61 West Emerald Lane Parachute CO 81635-9550</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 02 2017 BY: _____</p>	
 <p>9490 9118 9956 4630 9308 25</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 9308 69</p>			

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X <i>[Signature]</i></p>	
		<p>B. Received By: (Printed Name) C. Date of Delivery</p> <p>I. Harris 11/3/17</p>	
<p>1. Article Addressed to:</p> <p>Village HMC, LLC thwestern Hwy n Hills MI 48334-5900</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED NOV 03 2017 BY: _____</p>	
 <p>9490 9118 9956 4630 4179 20</p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 4179 64</p>			

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Celia Venegas & Fidel F Munoz
44 West Emerald Lane
Parachute CO 81635-9550



9490 9118 9956 4630 9315 63

2. Article Number (Transfer from service label)

9414 7118 9956 4630 9315 52

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)

X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

11-13-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No



3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Javier Vicencio
18 Silverton Place
Parachute CO 81635-9578



9490 9118 9956 4630 4530 41

2. Article Number (Transfer from service label)

9414 7118 9956 4630 4530 92

PS Form 3811 Facsimile, July 2015 (SDC 3930)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)

X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

10/30

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No



3. Service Type

☒ Certified Mail®

SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William & Devona Walter
122 Smokey Hill Circle
Parachute CO 81635-9553



9490 9118 9956 4630 7389 33

2. Article Number (Transfer from service label)

9414 7118 9956 4630 7389 84

PS Form 3811 Facsimile, July 2015 (SDC 3930)

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)

X *[Signature]*

B. Received By: (Printed Name)

C. Date of Delivery

10-30-17

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No



3. Service Type

☒ Certified Mail®

11 Silverton Circle



BEWARE
of DOGS

14 West Emerald





20 Smokey Hill Court

23 Silverton Circle



SENDER: COMPLETE THIS SECTION

■ Ensure items 1, 2, and 3 are completed.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
**Battlement Mesa Housing, LLC
23 Silverton Circle
Parachute CO 81635-9577**

2. Article Number (Transfer from service label)
9490 9118 9956 4630 7226 42
9414 7118 9956 4630 7226 93

PS Form 3811 Facsimile, July 2015 (RDC 3836)

CERTIFIED MAIL

COMPLETE THIS SECTION ON DELIVERY

A. Signature: () Addressee or () Agent
X

B. Received By: (Printed Name)
NOV 08 2017

C. Date of Delivery
☐ Yes
☒ No

D. Is delivery address different from item 1?
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail

RECEIVED
NOV 08 2017

CERTIFIED MAIL

\$7.92
US POSTAGE
FIRST CLASS
FOUR CLASS
10/27/2017
9490 9118 9956 4630 7226 42

9414 7118 9956 4630 7226 93
**Battlement Mesa Housing, LLC
23 Silverton Circle
Parachute CO 81635-9577**

ANK



26 Emerald Lane 2





26

26 Emerald Lane

32 Silverton Place



33 Silverton Place

33



36 Smokey Hill Court 2





36 Smokey Hill Court

39 Silverton Circle 2

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Ensure items 1, 2, and 3 are completed.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature: (<input type="checkbox"/> Addressee or <input type="checkbox"/> Agent)</p> <p>X</p>	
<p>1. Article Addressed to:</p> <p>Battlement Mesa Housing, LLC 39 Silverton Circle Parachute CO 81635-9577</p>		<p>B. Received By: (Printed Name)</p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>9414 7118 9956 4630 7921 15</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>IF YES, enter delivery address below:</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail®</p>		<p>Domestic Return Receipt</p>	

CERTIFIED MAIL

\$7.920
US POSTAGE
FIRST-CLASS
FROM 80202
10/27/2017
stamps.com

06250008606492

9414 7118 9956 4630 7921 15

Battlement Mesa Housing, LLC
39 Silverton Circle
Parachute CO 81635-9577

ANK

NIXIE 816353071-1N
RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD
RETURN TO SENDER
11/03/17

39 Silverton Circle





44 East Emerald Lane



45 Smokey Hill Circle

52 Smokey Hill Circle 2



52 Smokey Hill Circle

MANUAL PROC REQ 01593051
UNABLE TO FORWARD
RETURN TO SENDER
ATTEMPTED - NOT KNOWN
861 808 4C 1 NIXIE

CERTIFIED MAIL

COMPLETE THIS SECTION ON DELIVERY

A. Signature: (☐ Addressee or ☐ Agent)
X

B. Received By: (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

1. Article Addressed to:
Ronde Crawford
52 Smokey Hill Circle
Parachute CO 81635

2. Article Number (Transfer from service label)
9414 7118 9956 4630 7483 41

3. Service Type
☒ Certified Mail®

US POSTAGE
\$7.920
FIRST-CLASS
FROM 80202
10/27/2017
stamps.com

9414 7118 9956 4630 7483 41

Ronde Crawford
52 Smokey Hill Circle
Parachute CO 81635

81650
RTS

name
1st Notice
2nd Notice
Return

52



74 Silvertown Circle



792 Buckhorn
Rile 81050

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> Ensure items 1, 2, and 3 are completed. <input type="checkbox"/> Attach this card to the back of the envelope, or on the front if space permits.		A. Signature / (2 Address or ZIP code) <input checked="" type="checkbox"/> X	
1. Article Addressed to:		B. Received By: (Printed name)	
NIXIE 388 E2 L 8611/01/17		C. Date of Delivery	
RETURN TO SENDER NOT DELIVERABLE AS ADDRESSED UNABLE TO FORWARD		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
MANUAL PROC REQ 0159305161-01057		E. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
4420 8118 8956 4520 7234 56		F. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Article Number (Transfer from source code)		G. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8414 7110 8956 4520 7234 09		H. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

84 Silverton Circle

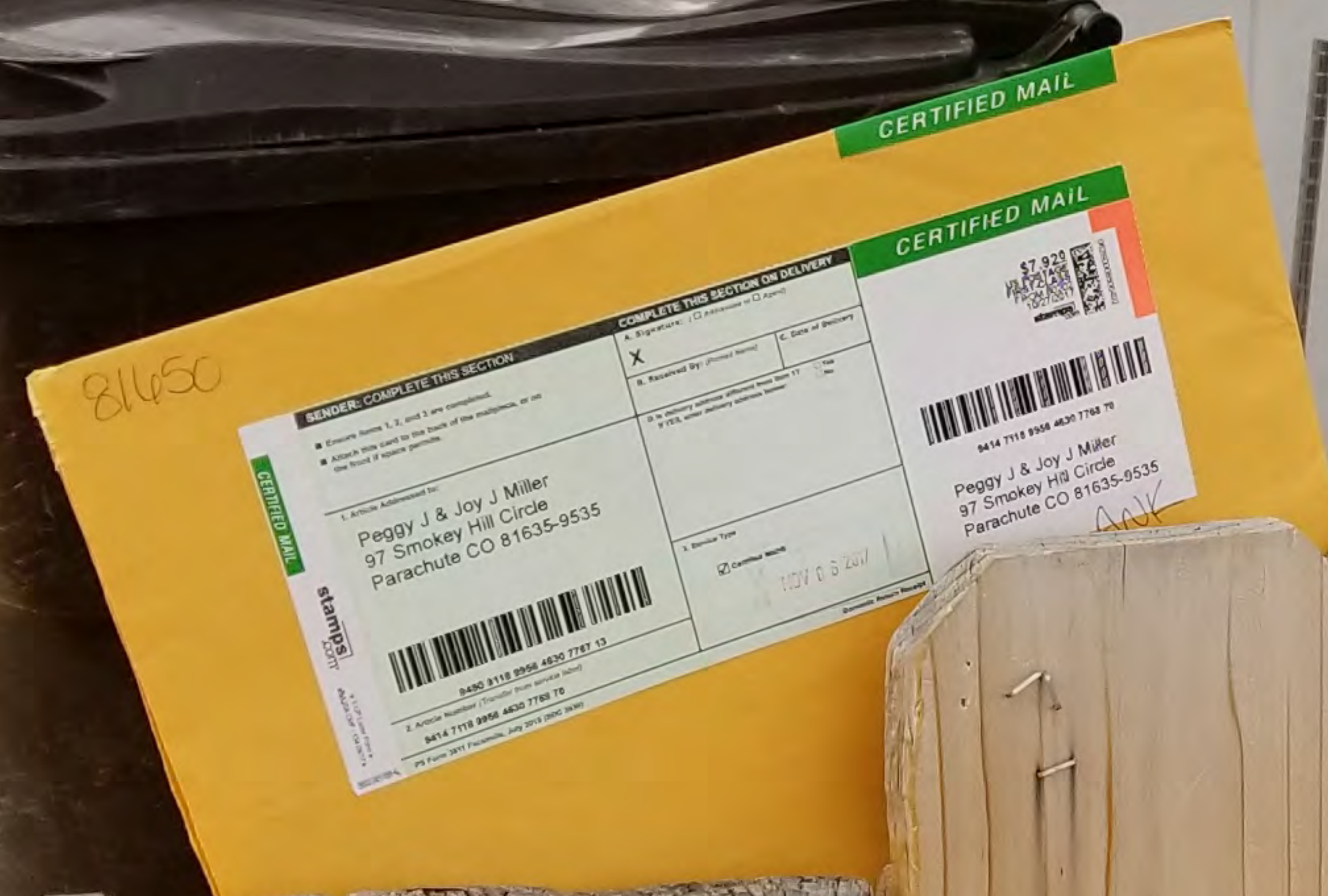


84



97 Smokey Hill Circle

97



125 Silverton Circle



125

CERTIFIED MAIL

95 003488

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Address (Required for delivery)</p> <p>Battlement Mesa Housing, LLC 125 Silverton Circle Parachute CO 81635-9580</p>		<p>2. Recipient (Required for delivery)</p> <p>X</p>	
<p>3. Return Address (Required for delivery)</p> <p>Battlement Mesa Housing, LLC 125 Silverton Circle Parachute CO 81635-9580</p>		<p>4. Delivery Instructions (Optional)</p> <p>RECEIVED NOV 11 2017</p>	
<p>5. Tracking Number (Optional)</p> <p>9500 8118 9585 9580 7815 21</p>		<p>6. Signature (Required for delivery)</p> <p>Signature</p>	

CERTIFIED MAIL

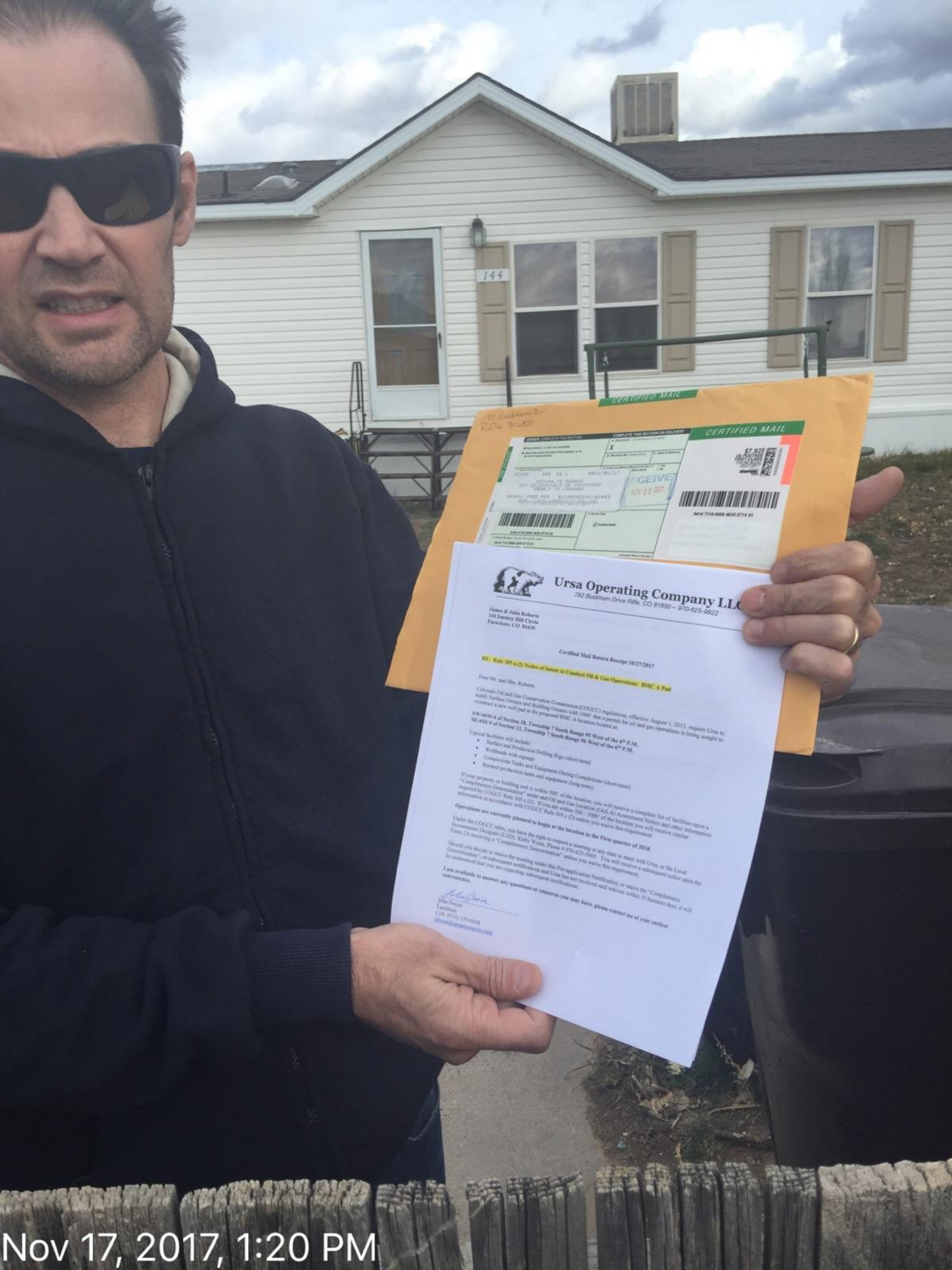


Battlement Mesa Housing, LLC
125 Silverton Circle
Parachute CO 81635-9580

11/07/17



Nov 17, 2017, 1:19 PM



792 Buckhorn Dr
Rifle, CO 81650

CERTIFIED MAIL

792 Buckhorn Dr
Rifle, CO 81650

CERTIFIED MAIL

57 920
10/27/2017
10:27 AM
Rifle, CO

0414 7118 8904 4630 8714 81

Ursa Operating Company LLC
792 Buckhorn Drive Rifle, CO 81650 - 970-825-9922

James & Julia Roberts
144 Smoky Hill Circle
Parachute, CO 81655

Certified Mail Return Receipt 10/27/2017

RE: Rule 305 a(2) Notice of Intent to Conduct Oil & Gas Operations: BMC A Pad

Dear Mr. and Mrs. Roberts:

Colorado Oil and Gas Conservation Commission (COGCC) regulations, effective August 1, 2013, require Ursa to notify Surface Owners and Building Owners with 1000' that a permit for oil and gas operations is being sought to construct a new well pad at the proposed BMC A location located at:

**SW/4SW/4 of Section 18, Township 7 South Range 95 West of the 6th P.M.
SE/4SE/4 of Section 13, Township 7 South Range 96 West of the 6th P.M.**

Typical facilities will include:

- Surface and Production Drilling Rigs (short-term)
- Wellheads with signage
- Completion Tanks and Equipment During Completions (short-term)
- Borehole production tanks and equipment (long-term)

If your property or building unit is within 500' of the location, you will receive a complete list of facilities upon a "Completeness Determination" under and Oil and Gas Location (OGLEA) Assessment Notice and other information required by COGCC Rule 305 c (1). If you are within 500' - 1000' of the location you will receive similar information in accordance with COGCC Rule 305 c (2) unless you waive this requirement.

Operations are currently planned to begin at the location in the first quarter of 2018.

Under the COGCC rules, you have the right to request a meeting at any time to meet with Ursa, or the Local Government Designee (LGD), Kirby Wynn, Phone: 970-625-3905. You will receive a subsequent notice upon the Form 2A receiving a "Completeness Determination" unless you waive this requirement.

Should you decide to waive the meeting under this Pre-application Notification, or waive the "Completeness Determination", or subsequent notifications and Ursa has not received said waivers within 10 business days, it will be understood that you are expecting subsequent notifications.

I am available to answer any questions or concerns you may have, please contact me at your earliest convenience.

John Deane
John Deane
Landman
Cell: (970) 779-0008
john@ursaoperating.com

Nov 17, 2017, 1:20 PM

163 Smokey Hill Circle

