



SRC ENERGY

November 28, 2018

Ms. Julie Murphy, Director
Colorado Oil and Gas Conservation Commission
1120 Lincoln Street; Suite 801
Denver, Colorado 80203

RE: COGCC Rule 303.b. (3) J.iii. Evidence of Building Unit Owners Pre-Application Notification
Bernhardt 4-18 Pad: Lot 2: NW1/4 Section 18-T4N-R66W

Weld County, Colorado

Dear Ms. Murphy,

SRC Energy Inc, (SRC) has filed a Form 2A Oil and Gas Location Assessment (OGLA) for the Bernhardt 4-18 Pad.

SRC has provided the required Pre-Application Notifications to all Building Unit Owners within the Buffer Zone Setback pursuant to Colorado Oil and Gas Conservation Commission (COGCC) Rule 305.a. Pursuant to Rule 303.b.(3)J.iii., attached please find proof of delivery receipts for the Building Unit Owners. Please be advised that SRC certifies that Building Unit Owners within the Buffer Zone have received their pre-application notification and proof of receipt is attached to this letter.

Please note that all BU's have been notified and received their certified mailer, for all BU's, Surface Owner and LGD. Attached certified mailer proof to this letter on second page. There are 4 BU's within the Buffer 1000 feet zone of our proposed pad. The letters went out on October 22, 2018 or earlier.

SRC respectfully requests the COGCC approve the Form 2A for the Bernhardt 4-18 Pad.

If you should have any questions or require additional information, please do not hesitate contacting me at 720.616.4319 or via email at EEKBLAD@SRCENERGY.COM. Thank you for your consideration of this matter.

Sincerely,

Erin Ekblad

Erin Ekblad
Manager of Regulatory Affairs
SRC Energy Inc.
1675 Broadway; Suite 2600
Denver, CO 80202
720.616.4319 (direct)

LGD :

Surface Owner:

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <u>X</u> <u>Sheng</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <u>Jason Maxey</u> <u>1555 North 17th Ave.</u> <u>Greeley, CO 80631</u>		B. Received by (Printed Name) _____ C. Date of Delivery _____	
2. Article Number (Transfer from service label) <u>91 7199 9991 7038 8006 8817</u>		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature <u>X</u> <u>Sheng</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <u>Bernhardt Farms LLC</u> <u>12281 State Highway 60</u> <u>Milliken, CO 80543</u>		B. Received by (Printed Name) <u>Lyndee Long</u> C. Date of Delivery <u>10/29/18</u>	
2. Article Number (Transfer from service label) <u>7016 2140 0000 2238 9344</u>		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below: _____	
PS Form 3811, July 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
■ 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:

Herb Bernhardt
21564 County Rd. 25
Milliken, CO 80543



9590 9402 4087 8092 5978 16

7199 9991 7038 8006 8787

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
☒ Addressee
B. Received by (Printed Name) C. Date of Delivery
HERBERT BERNHARDT 10-13-18
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail (over \$500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

Building Unit Owners

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
■ 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:

Marilyn Joan Schneider
24987 County Road 25
Milliken, CO 80543



9590 9402 4087 8092 5978 09

2. Article Number (Transfer from service label)

91 7199 9991 7038 8006 8794

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
☒ Addressee
B. Received by (Printed Name) C. Date of Delivery
Marilyn Schneider 10-15-18
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail (over \$500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
■ 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:

Tracy and Clifford Betz
12484 County Rd 46
Milliken, CO 80543-9313



9590 9402 4087 8092 5977 86

2. Article Number (Transfer from service label)

91 7199 9991 7038 8006 8770

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent
☒ Addressee
B. Received by (Printed Name) C. Date of Delivery
Clifford H. Betz 10/15/18
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail (over \$500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt