



THE STATE
of **ALASKA**
GOVERNOR SEAN PARNELL

Department of Natural Resources

Division of Oil & Gas
Anchorage Office

550 W. 7th Avenue Suite 1100
Anchorage, Alaska 99501-3560
Main: 907.269.8800
Fax: 907.269.8939

October 23, 2012

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Damon Kade, President
Furie Operating Alaska, LLC
1029 West 3rd Ave., Ste. 500
Anchorage, AK 99501

Re: Kitchen Lights Unit

Dear Mr. Kade:

On June 30, 2009, the Department of Natural Resources, Division of Oil and Gas (Division) approved the Application for the Expansion of the Kitchen Unit Area to Form the Kitchen Lights Unit. Although the decision is implicitly retroactive to December 31, 2008, the decision did not specifically address the effective date. Therefore, the decision is amended to retroactively make the effective date of the decision December 31, 2008.

A person affected by this decision may appeal it, in accordance with 11 AAC 02. Any appeal must be received within 20 calendar days after the date of "issuance" of this decision, as defined in 11 AAC 02.040 (c) and (d), and may be mailed or delivered to Daniel S. Sullivan, Commissioner, DNR, 550 W. 7th Avenue, Suite 1400, Anchorage, Alaska 99501; faxed to (907) 269-8918, or sent by electronic mail to dnr.appeals@alaska.gov. This decision takes effect immediately. An eligible person must first appeal this decision in accordance with 11 AAC 02 before appealing this decision to Superior Court. A copy of 11 AAC 02 may be obtained from any regional information office of the Department of Natural Resources.

Sincerely,

A handwritten signature in black ink, appearing to read "W.C. Barron".

W.C. Barron
Director

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

7011 3500 0002 1236 3871

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

10/23
 KLM
 Postmark Here
 date

Damon Kade, President
 Furie Operating Alaska
 1029 W. 3rd Avenue, Ste 500
 Anchorage, AK 99501

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 X <i>Kim Dresnek</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Kim Dresnek</i></p> <p>C. Date of Delivery <i>10/25/12</i></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>1. Article Addressed to:</p> <p>Damon Kade, President Furie Operating Alaska 1029 W. 3rd Avenue, Ste 500 Anchorage, AK 99501</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p> <p>7011 3500 0002 1236 3871</p>	
PS Form 3811, February 2004	Domestic Return Receipt
	102595-02-M-1540