

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**04/09/2012**  
Document Number:  
**400269616**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10071 Contact Person: Curtis Crowton  
Company Name: BARRETT CORPORATION\* BILL Phone: (303) 353-5394  
Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420  
City: DENVER State: CO Zip: 80202 Email: pat313@billbarrettcorp.com  
API #: 05 - 045 - 21252 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: GGU SCOTT 24C-30-691  
Sec: 30 Twp: 6S Range: 91W QtrQtr: SWSW Lat: 39.492407 Long: -107.605271

**BLOW OUT PREVENTER TEST – 24-Hour notice**  
Test Date: 04/09/2012 Time: 05:00 (HH:MM)

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Curtis Crowton Email: pat313@billbarrettcorp.com  
Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: 04/09/2012