

FORM
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OGCC RECEPTION
Receive Date:
05/17/2012
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400285943

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: Mitch Steinke
Company Name: ENCANA OIL & GAS (USA) INC Phone: (303) 918-3844
Address: 370 17TH ST STE 1700 Fax: (970) 285-2619
City: DENVER State: CO Zip: 80202-5632 Email: mitch.steinke@encana.com
API #: 05 - 045 - 06913 - 00 Facility ID: _____ Location ID: _____
Facility Name: Standard Shale 6401
Sec: 9 Twp: 7S Range: 99W QtrQtr: NWNW Lat: 39.466290 Long: -108.452991

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 06/27/2012 Time: 10:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: Judith Walter Email: judith.walter@encana.com
Signature: _____ Title: Regulatory Analyst Date: 05/17/2012