

FORM
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Rev
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OGCC RECEPTION

Receive Date:
05/29/2012

Document Number:
400289895

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 19160 Contact Person: Donna Williams
Company Name: CONOCO PHILLIPS COMPANY Phone: (505) 326-9793
Address: P O BOX 2197 Fax: ()
City: HOUSTON State: TX Zip: 77252-2197 Email: Donna.J.Williams@Conocophillips.com
API #: 05 - 005 - 07165 - 00 Facility ID: _____ Location ID: _____
Facility Name: Tebo 29-1H
Sec: 29 Twp: 4S Range: 64W QtrQtr: SESE Lat: 39.667460 Long: -104.568360

NOTICE OF CONSTRUCTION OF A NEW LOCATION OR MAJOR CHANGE – 48-hour notice required

Start Date: 05/30/2012

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: Donna Williams Email: Donna.J.Williams@Conocophillips.com
Signature: Donna Williams Title: Sr. Regulatory Advisor Date: 05/29/2012