



Receive Date:
06/06/2012

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10394 Contact Person: Angie Galvan
Company Name: CONDOR ENERGY TECHNOLOGY LLC Phone: (281) 716-5730
Address: 3315 HIGHWAY 50 Fax: (281) 815-2882
City: SILVER SPRINGS State: NV Zip: 89429 Email: Angie.Galvan@stxra.com

API #: 05 - 123 - 35357 - 01 Facility ID: _____ Location ID: _____
Facility Name: Ford Family Trust 2H
Sec: 31 Twp: 7N Range: 59W QtrQtr: SWSW Lat: 40.525180 Long: -104.030850

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 06/11/2012 Time: 04:00 (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: Angelina Galvan Email: Angie.Galvan@stxra.com
Signature: Angelina Galvan Title: Regulatory Analyst Date: 06/06/2012