

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

06/12/2012

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10340 Contact Person: Dean Rogers
Company Name: SUNDANCE ENERGY INC Phone: (303) 886-0186
Address: 633 17TH STREET #1950 Fax: (303) 543-5701
City: DENVER State: CO Zip: 80202 Email: drogers@sundanceenergy.net
API #: 05 - 123 - 34983 - 00 Facility ID: _____ Location ID: _____
Facility Name: Lamb 42-15
Sec: 15 Twp: 4N Range: 68W QtrQtr: NENE Lat: 40.317205 Long: -104.984495

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 06/13/2012 Time: 07:00 (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: Dean Rogers Email: drogers@sundanceenergy.net
Signature: Dean Rogers Title: Operations Engineer Date: 06/12/2012