



Receive Date:
07/10/2012

Document Number:
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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 19035 Contact Person: Gregory Pandolfo
Company Name: OVERLAND RESOURCES LLC Phone: (303) 800-6175
Address: 1376 S PERRY PARK RD Fax: (720) 204-4078
City: SEDALIA State: CO Zip: 80135 Email: greg@overlandresourcesllc.com

API #: 05 - 001 - 09745 - 00 Facility ID: _____ Location ID: _____
Facility Name: Handke 4
Sec: 10 Twp: 3S Range: 64W QtrQtr: NWSE Lat: 39.798414 Long: -104.529340

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 07/12/2012 Time: 10:00 (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: Robert Anderson Email: admin@overlandresourcesllc.com
Signature: Robert Anderson Title: Operations Manager Date: 07/10/2012