

FORM
42
Rev
03/12



OGCC RECEPTION
Receive Date:
09/04/2012
Document Number:
400323321

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10412 Contact Person: CLAYTON DOKE
Company Name: AUS-TEX EXPLORATION INC Phone: (970) 669-7411
Address: 7985 W 16TH AVENUE Fax: (970) 669-4077
City: LAKEWOOD State: CO Zip: 80214 Email: cdoke@petersonenergy.com
API #: 05 - 043 - 06221 - 00 Facility ID: _____ Location ID: _____
Facility Name: PATHFINDER C 11-12 1HZ
Sec: 12 Twp: 20S Range: 70W QtrQtr: NWNW Lat: 38.328858 Long: -105.178654

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**
Spud Date: 08/29/2012 Time: 18:00 (HH:MM)
Rig Name: Les Wilson Rig #30

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: Clayton Doke Email: cdoke@petersonenergy.com
Signature: CLAYTON DOKE Title: Consultant Date: 09/04/2012