

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**11/26/2012**  
Document Number:  
**400349684**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 19160 Contact Person: Justin Carlile  
Company Name: CONOCO PHILLIPS COMPANY Phone: (432) 688-9165  
Address: P O BOX 2197 Fax: (432) 688-6019  
City: HOUSTON State: TX Zip: 77252-2197 Email: justin.carlile@conocophillips.com  
API #: 05 - 005 - 07197 - 01 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Tebo 3 1H  
Sec: 3 Twp: 5s Range: 64W QtrQtr: NENE Lat: 39.650019 Long: -104.529994

NOTICE TO RUN AND CEMENT CASING – 24-hour notice  
Start Date: 11/26/2012 Time: 07:00 (HH:MM) String: INTERMEDIATE

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: Justin Carlile Email: justin.carlile@conocophillips.com  
Signature: Justin Carlile Title: Regulatory Specialist Date: 11/26/2012