

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:

01/09/2013

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: MARK BALDERSTON
Company Name: ENCANA OIL & GAS (USA) INC Phone: (970) 285-2692
Address: 370 17TH ST STE 1700 Fax: (720) 876-6060
City: DENVER State: CO Zip: 80202-5632 Email: MARK.BALDERSTON@ENCANA.COM

API #: 05 - 045 - 21621 - 00 Facility ID: _____ Location ID: _____
Facility Name: Shideler Fee 31-9BB (K31E)
Sec: 31 Twp: 7S Range: 92W QtrQtr: NESW Lat: 39.401697 Long: -107.709078

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 12/28/2012 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: RUTHANN MORSS Email: RUTHANN.MORSS@ENCANA.COM
Signature: _____ Title: REGULATORY ANALYST Date: 01/09/2013