



Receive Date:
01/18/2013

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NOTICE OF NOTIFICATION

Entity Information

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API #: <u>05 - 071 - 08160 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>MEAD 11-9</u>	
Sec: <u>9</u> Twp: <u>32S</u> Range: <u>65W</u> QtrQtr: <u>NWNW</u>	Lat: <u>37.277120</u> Long: <u>-104.684140</u>

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 01/29/2013 Time: 10:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: <u>Judy Glinisty</u>	Email: <u>Judy.Glinisty@pxd.com</u>
Signature: _____	Title: <u>Sr Staff Engineering Tech</u> Date: <u>01/18/2013</u>