

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:  
**01/21/2013**

Document Number:  
**400372298**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 100185 Contact Person: Clyde Marks  
Company Name: ENCANA OIL & GAS (USA) INC Phone: (970) 285-2681  
Address: 370 17TH ST STE 1700 Fax: ( )  
City: DENVER State: CO Zip: 80202-5632 Email: clyde.marks@encana.com

API #: 05 - 045 - 21039 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: SG 8514B-22 N22496  
Sec: 22 Twp: 4S Range: 96W QtrQtr: SESW Lat: 39.683789 Long: -108.157219

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 01/24/2013 Time: 08:00 (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: Marina Ayala Email: marina.ayala@encana.com  
Signature: \_\_\_\_\_ Title: Permitting Technician Date: 01/21/2013