

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**04/05/2013**  
Document Number:  
**400400200**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10275 Contact Person: Loni Davis  
Company Name: AUGUSTUS ENERGY PARTNERS LLC Phone: (970) 332-3585  
Address: P O BOX 250 Fax: (970) 332-3587  
City: WRAY State: CO Zip: 80758 Email: ldavis@augustusenergy.com

API #: 05 - 125 - 12015 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Rockwell 14-13 1S45W  
Sec: 13 Twp: 1S Range: 45W QtrQtr: SWSW Lat: 39.963270 Long: -102.373170

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**

Spud Date: 04/14/2013 Time: 08:59 (HH:MM)  
Rig Name: Excell Services Rig #2

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: Loni Davis Email: ldavis@augustusenergy.com  
Signature: \_\_\_\_\_ Title: Oper Acctg & Reg Spec Date: 04/05/2013