

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:

04/12/2013

Document Number:

400403683

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 19160 Contact Person: Dollie Busse
Company Name: CONOCO PHILLIPS COMPANY Phone: (505) 324-6104
Address: P O BOX 2197 Fax: (505) 599-4062
City: HOUSTON State: TX Zip: 77252-2197 Email: Dollie.L.Busse@conocophillips.com
API #: 05 - 067 - 09383 - 00 Facility ID: _____ Location ID: _____
Facility Name: ARGENTA 34-10 32-2A
Sec: 32 Twp: 34N Range: 10W QtrQtr: NWSE Lat: 37.144480 Long: -107.954750

BRADENHEAD TEST – 48-hour Notice

Test Date: 04/16/2013 Time: 01:00 (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: Dollie Busse Email: Dollie.L.Busse@conocophillips.com
Signature: _____ Title: Staff Reg. Technician Date: 04/12/2013