

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:

05/15/2013

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10110 Contact Person: Shannon Hartnett
Company Name: GREAT WESTERN OIL & GAS COMPANY LLC Phone: (303) 830-9893
Address: 1700 BROADWAY SUITE 650 Fax: ()
City: DENVER State: CO Zip: 80290 Email: shartnett@gwogco.com
API #: 05 - 123 - 35705 - 00 Facility ID: _____ Location ID: _____
Facility Name: Great Western 25-22-18
Sec: 25 Twp: 6N Range: 67W QtrQtr: NWSW Lat: 40.457067 Long: -104.847453

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 10/03/2012 Time: 05:15 (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: Shannon Hartnett Email: shartnett@gwogco.com
Signature: _____ Title: Reg. Compl. Spec. Date: 05/15/2013