

FORM
42
Rev
03/12



OGCC RECEPTION

Receive Date:
06/10/2013

Document Number:
400429262

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 19160 Contact Person: Justin Carlile
Company Name: CONOCO PHILLIPS COMPANY Phone: (281) 293-1499
Address: P O BOX 2197 Fax: (432) 688-6019
City: HOUSTON State: TX Zip: 77252-2197 Email: justin.carlile@conocophillips.com
API #: 05 - 005 - 07197 - 00 Facility ID: _____ Location ID: _____
Facility Name: Tebo 3 1H
Sec: 3 Twp: 5s Range: 64W QtrQtr: NENE Lat: 39.650019 Long: -104.529994

NOTICE OF INSPECTION CORRECTIVE ACTIONS PERFORMED

Corrective Actions required by field inspection document # 668300147 have been performed on 06/03/2013
Site is ready for re-inspection.

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: Justin Carlile Email: justin.carlile@conocophillips.com
Signature: Justin Carlile Title: Regulatory Specialist Date: 06/10/2013