

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:

08/09/2013

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10071 Contact Person: Falon Casey
Company Name: BARRETT CORPORATION* BILL Phone: (303) 312-8762
Address: 1099 18TH ST STE 2300 Fax: ()
City: DENVER State: CO Zip: 80202 Email: fcasey@billbarrettcorp.com
API #: 05 - 123 - 37085 - 00 Facility ID: _____ Location ID: _____
Facility Name: CVR 5-63-32-1724BH
Sec: 32 Twp: 5N Range: 63W QtrQtr: NWSW Lat: 40.355190 Long: -104.468650

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 08/16/2013 Time: 06:00 (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: Falon Casey Email: fcasey@billbarrettcorp.com
Signature: Falon Casey Title: Operations Technician Date: 08/09/2013