

FORM
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03/12



OGCC RECEPTION

Receive Date:
08/12/2013

Document Number:
400466773

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: Nick Ronan
Company Name: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3838
Address: 370 17TH ST STE 1700 Fax: (720) 876-6838
City: DENVER State: CO Zip: 80202-5632 Email: nicholas.ronan@encana.com

API #: 05 - 123 - 25452 - 00 Facility ID: _____ Location ID: _____
Facility Name: KENNEDY 41-21
Sec: 21 Twp: 2N Range: 68W QtrQtr: NENE Lat: 40.129170 Long: -105.000447

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 08/16/2013 Time: 08:00 (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: Jane Washburn Email: jane.washburn@encana.com
Signature: Jane Washburn Title: Operations Technologist Date: 08/12/2013