

FORM
42
Rev
03/12



OGCC RECEPTION

Receive Date:
08/16/2013

Document Number:
400468873

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10383 Contact Person: STEPHANIE CLASEN
Company Name: SOVEREIGN OPERATING COMPANY LLC Phone: (303) 297-0347
Address: 621 17TH STREET #950 Fax: ()
City: DENVER State: CO Zip: 80293 Email: sclasen@bsegllc.com
API #: 05 - 009 - 06252 - 00 Facility ID: _____ Location ID: _____
Facility Name: ELLIS 1-25
Sec: 25 Twp: 31S Range: 42W QtrQtr: NESW Lat: 37.316300 Long: -102.104820

NOTICE OF INSPECTION CORRECTIVE ACTIONS PERFORMED

Corrective Actions required by field inspection document # 668600984 have been performed on 07/17/2013
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: Stephanie Clasen Email: sclasen@bsegllc.com
Signature: Stephanice Clasen Title: C&R MGR Date: 08/16/2013