

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:  
**10/22/2013**  
Document Number:  
**400500251**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 8960 Contact Person: Bryan Brown  
Company Name: BONANZA CREEK ENERGY OPERATING COMPANY LLC Phone: (720) 440-6100  
Address: 410 17TH STREET SUITE #1400 Fax: (720) 305-0804  
City: DENVER State: CO Zip: 80202 Email: bbrown@bonanzacrck.com  
API #: 05 - 123 - 37833 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: State Seventy Holes P-T-4HNB  
Sec: 4 Twp: 4N Range: 62W QtrQtr: NWNE Lat: 40.347880 Long: -104.327130

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 11/06/2013 Time: 10:00 (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: Hannah Larsen Email: hlarsen@bonanzacrck.com  
Signature: \_\_\_\_\_ Title: Operations Technician Date: 10/22/2013