

FORM
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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:
11/07/2013

Document Number:
400509233

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 57667 Contact Person: CLAYTON DOKE
Company Name: MINERAL RESOURCES, INC. Phone: (720) 420-5700
Address: PO BOX 328 Fax: (720) 420-5800
City: GREELEY State: CO Zip: 80632 Email: cdoke@iptengineers.com

API #: 05 - 123 - 35502 - 00 Facility ID: _____ Location ID: _____
Facility Name: BESTWAY 6-11
Sec: 2 Twp: 5N Range: 66W QtrQtr: SENE Lat: 40.430710 Long: -104.739270

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 11/11/2013 Time: 05:00 (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: Clayton Doke Email: cdoke@iptengineers.com
Signature: Clayton Doke Title: Senior Engineer Date: 11/07/2013