

FORM
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Rev
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OGCC RECEPTION
Receive Date:
12/04/2013
Document Number:
400522176

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 69175 Contact Person: Jenifer Hakkarinen
Company Name: PDC ENERGY INC Phone: (303) 860-5800
Address: 1775 SHERMAN STREET - STE 3000 Fax: ()
City: DENVER State: CO Zip: 80203 Email: Jenifer.Hakkarinen@pdce.com
API #: 05 - 123 - 13080 - 00 Facility ID: _____ Location ID: _____
Facility Name: PLUMB 4
Sec: 7 Twp: 5N Range: 64W QtrQtr: SWNE Lat: 40.415440 Long: -104.591140

OTHER – AS SPECIFIED BY PERMIT CONDITION add (2/2A)
Describe Permit Condition: Well ready to be returned to production
Date: 12/04/2013 Time: 09:00 (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: Jenifer Hakkarinen Email: Jenifer.Hakkarinen@pdce.com
Signature: Jenifer Hakkarinen Title: Regulatory TEch Date: 12/04/2013