

FORM
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OGCC RECEPTION
Receive Date:
12/11/2013
Document Number:
400525222

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10110 Contact Person: Shannon Hartnett
Company Name: GREAT WESTERN OPERATING COMPANY LLC Phone: (303) 398-0351
Address: 1801 BROADWAY #500 Fax: ()
City: DENVER State: CO Zip: 80202 Email: regulatorypermitting@gwogco.com
API #: 05 - 123 - 36594 - 00 Facility ID: _____ Location ID: _____
Facility Name: Land JG 31-24D
Sec: 31 Twp: 2N Range: 64W QtrQtr: Lot 2 Lat: 40.088156 Long: -104.599353

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 12/13/2013 Time: 08:00 (HH:MM) Anticipated Date of flowback: 12/14/2013

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: Shannon Hartnett Email: regulatorypermitting@gwogco.com
Signature: _____ Title: Reg. Compl. Spec. Date: 12/11/2013