

FORM
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Rev
03/12



OGCC RECEPTION

Receive Date:
01/03/2014

Document Number:
400534920

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100178 Contact Person: Chris Lopez
Company Name: SIMMONS, INC.* D. J. Phone: (505) 326-3753
Address: 1009 RIDGEWAY PL STE 200 Fax: (505) 327-4659
City: FARMINGTON State: NM Zip: 87401 Email: clopez@djsimmons.com
API #: 05 - 067 - 09196 - 00 Facility ID: _____ Location ID: _____
Facility Name: CHEVILLAR 32-32
Sec: 32 Twp: 34N Range: 12W QtrQtr: SWNE Lat: 37.150150 Long: -108.171155

NOTICE OF INSPECTION CORRECTIVE ACTIONS PERFORMED

Corrective Actions required by field inspection document # 667700105 have been performed on 01/02/2014
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: Chris Lopez Email: clopez@djsimmons.com
Signature: Chris S. Lopez Title: Regulatory Specialist Date: 01/03/2014