

FORM  
42  
Rev  
03/12



OGCC RECEPTION

Receive Date:  
**01/13/2014**

Document Number:  
**400539155**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 3250 Contact Person: Jodi Keeler  
Company Name: ANTELOPE ENERGY COMPANY LLC Phone: (308) 235-466235-3338  
Address: P O BOX 577 Fax: (308) 235-4550  
City: KIMBALL State: NE Zip: 69145 Email: jodik@antelope-energy.com  
API #: 05 - 107 - 06223 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: BREEZE STATE 11-8  
Sec: 8 Twp: 6N Range: 89W QtrQtr: NESW Lat: 40.487780 Long: -107.401380

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 01/21/2014 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: Jodi Keeler Email: jodik@antelope-energy.com  
Signature: \_\_\_\_\_ Title: Production Manager Date: 01/13/2014