

FORM
42

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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:

01/14/2014

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 69175 Contact Person: Jenifer Hakkarinen
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City: DENVER State: CO Zip: 80203 Email: JEnifer.Hakkarinen@pdce.com
API #: 05 - 123 - 20024 - 00 Facility ID: _____ Location ID: _____
Facility Name: JACOBUCCI 13-32
Sec: 32 Twp: 1N Range: 67W QtrQtr: NWSW Lat: 40.006345 Long: -104.922105

OTHER – AS SPECIFIED BY PERMIT CONDITION add (2/2A)

Describe Permit Condition: well returned to production

Date: 01/14/2014 Time: 01:00 (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: 01/14/2014