

FORM  
42  
Rev  
03/12



OGCC RECEPTION

Receive Date:  
**01/21/2014**

Document Number:  
**400543063**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 39560 Contact Person: Paul Herring  
Company Name: TOP OPERATING COMPANY Phone: (303) 727-9915  
Address: 10881 ASBURY AVE STE 230 Fax: ( )  
City: LAKEWOOD State: CO Zip: 80227 Email: paul.herring@topoperating.com  
API #: 05 - 123 - 10297 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: COUNTER 3  
Sec: 30 Twp: 2N Range: 66W QtrQtr: SENE Lat: 40.112080 Long: -104.813030

**NOTICE OF INSPECTION CORRECTIVE ACTIONS PERFORMED**

Corrective Actions required by field inspection document # 671100580 have been performed on 01/16/2014  
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: Paul Herring Email: paul.herring@topoperating.com  
Signature: Paul Herring Title: Landman Date: 01/21/2014