

FORM
42
Rev
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OGCC RECEPTION
Receive Date:
01/21/2014
Document Number:
400543376

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>42640</u>	Contact Person: <u>James Berger</u>
Company Name: <u>HYNDREX RESOURCES</u>	Phone: <u>(970) 336-8830</u>
Address: <u>300 E 16TH ST STE 201</u>	Fax: <u>()</u>
City: <u>GREELEY</u> State: <u>CO</u> Zip: <u>80631</u>	Email: <u>jamesberger2@aol.com</u>
API #: <u>05 - 001 - 08863 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>9 AMPET-AMOCO 1-1</u>	
Sec: <u>9</u> Twp: <u>2S</u> Range: <u>64W</u> QtrQtr: <u>N2SE</u>	Lat: <u>39.889460</u> Long: <u>-104.550480</u>

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 01/22/2014 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: James Berger Email: jamesberger2@aol.com

Signature: _____ Title: _____ Date: 01/21/2014