

FORM  
42

Rev  
03/12

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:

02/03/2014

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 49100 Contact Person: Janni Keidel  
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API #: 05 - 103 - 09894 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: WRD DOW 20-22  
Sec: 20 Twp: 2N Range: 96W QtrQtr: SENW Lat: 40.129262 Long: -108.191188

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

Test Date: 02/04/2014 Time: 09:00 (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: Janni Keidel Email: janni.keidel@kochind.com  
Signature: Janni Keidel Title: Ops/Reg Coordinator Date: 02/03/2014