



Receive Date:  
**02/03/2014**

Document Number:  
**400549799**

**NOTICE OF NOTIFICATION**

**Entity Information**

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

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

Test Date: 02/14/2014 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: <u>Janni Keidel</u>	Email: <u>janni.keidel@kochind.com</u>
Signature: <u>Janni Keidel</u>	Title: <u>Ops/Reg Coordinator</u> Date: <u>02/03/2014</u>