

FORM  
42  
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OGCC RECEPTION

Receive Date:  
**02/04/2014**

Document Number:  
**400550164**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10456 Contact Person: Steve Schmitz  
Company Name: CAERUS PICEANCE LLC Phone: (720) 880-6412  
Address: 600 17TH STREET #1600N Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: sschmitz@caerusoilandgas.com  
API #: 05 - 045 - 22300 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: NOLTE 14C-13  
Sec: 14 Twp: 7S Range: 96W QtrQtr: SESE Lat: 39.432369 Long: -108.069214

**NOTICE TO RUN AND CEMENT CASING – 24-hour notice**

Start Date: 02/05/2014 Time: 09:00 (HH:MM) String: CONDUCTOR

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: Steve Schmitz Email: sschmitz@caerusoilandgas.com  
Signature: Steve Schmitz Title: Sr Operations Engineer Date: 02/04/2014