

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:

03/25/2014

Document Number:

400578615

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10446</u>	Contact Person: <u>Kimberly Rodell</u>
Company Name: <u>MUSTANG CREEK OPERATING LLC</u>	Phone: <u>(303) 942-0506</u>
Address: <u>5251 DTC PARKWAY #800</u>	Fax: <u>()</u>
City: <u>GREENWOOD VILLAGE</u> State: <u>CO</u> Zip: <u>80111</u>	Email: <u>krodell@upstreampm.com</u>
API #: <u>05 - 041 - 06082 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>Graham 1-13</u>	
Sec: <u>1</u> Twp: <u>13S</u> Range: <u>60W</u> QtrQtr: <u>NWSW</u>	Lat: <u>38.946070</u> Long: <u>-104.068480</u>

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 03/28/2014 Time: 08:00 (HH:MM) Anticipated Date of flowback: 03/30/2014

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>Kimberly Rodell</u>	Email: <u>krodell@upstreampm.com</u>
Signature: <u>Kimberly J. Rodell</u>	Title: <u>Permit Agent</u> Date: <u>03/25/2014</u>