

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

04/13/2014

Document Number:

400588992

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10439</u>	Contact Person: <u>kirk williams</u>
Company Name: <u>CARRIZO NIOBRARA LLC</u>	Phone: <u>(970) 441-0257</u>
Address: <u>500 DALLAS STREET #2300</u>	Fax: <u>(970) 867-9137</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77002</u>	Email: <u>k.williams@schneiderenergy.com</u>

API #: <u>05 - 123 - 38613 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>BRINGELSON RANCH 10-20-9-58</u>		
Sec: <u>20</u>	Twp: <u>9N</u>	Range: <u>58W</u> QtrQtr: <u>NWSW</u>
Lat: <u>40.734720</u>	Long: <u>-103.895620</u>	

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice requiredDate of Treatment: 04/28/2014 Time: 06:00 (HH:MM) Anticipated Date of flowback: 05/08/2014

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>kirk williams</u>	Email: <u>k.williams@schneiderenergy.com</u>
Signature: <u>Kirk Williams</u>	Title: <u>Well Site Supervisor</u> Date: <u>04/13/2014</u>