

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:

04/15/2014

Document Number:

400590365

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 88925 Contact Person: Hannah Larsen
Company Name: TOMBERLIN* BILL Phone: (303) 0
Address: _____ Fax: ()
City: DENVER State: CO Zip: 80203 Email: HLarsen@bonanzacrk.com
API #: 05 - 123 - 05180 - 00 Facility ID: _____ Location ID: _____
Facility Name: MCPHERSON 2
Sec: 19 Twp: 5N Range: 61W QtrQtr: NWNE Lat: 40.391987 Long: -104.249875

OFFSET MITIGATION COMPLETED

This well was mitigated per the Offset Horizontal Policy. Permitted horizontal well requiring mitigation - API # 123-38974

Appropriate documentation for mitigation has been/will be submitted.

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: Hannah Larsen Email: HLarsen@bonanzacrk.com
Signature: offset operator submitting remediation Title: _____ Date: 04/15/2014