

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:

04/29/2014

Document Number:

400598293

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 46685 Contact Person: Jeff Stewart
Company Name: KINDER MORGAN CO2 CO LP Phone: (970) 799-1133
Address: 17801 HWY 491 Fax: (970) 882-5520
City: CORTEZ State: CO Zip: 81321 Email: jeff_stewart@kindermorgan.com
API #: 05 - 083 - 06713 - 00 Facility ID: _____ Location ID: _____
Facility Name: CA 6
Sec: 25 Twp: 39N Range: 19W QtrQtr: NWSW Lat: 37.607810 Long: -108.902550

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 05/02/2014 Time: 08:00 (HH:MM)

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: Jeff Stewart Email: jeff_stewart@kindermorgan.com
Signature: _____ Title: Drilling supervisor Date: 04/29/2014