

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:

04/30/2014

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>19160</u>	Contact Person: <u>Trey Sullivan</u>
Company Name: <u>CONOCO PHILLIPS COMPANY</u>	Phone: <u>(505) 320-3738</u>
Address: <u>P O BOX 2197</u>	Fax: <u>()</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77252-2197</u>	Email: <u>Trey.Sullivan@cop.com</u>

API #: <u>05 - 067 - 08201 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>SOUTHERN UTE 33-9 17-2</u>		
Sec: <u>17</u>	Twp: <u>33N</u>	Range: <u>9W</u> QtrQtr: <u>NWSE</u>
Lat: <u>37.100280</u>	Long: <u>-107.844960</u>	

BRADENHEAD TEST – 48-hour Notice

Test Date: 05/07/2014 Time: 10:00 (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: <u>Dollie L. Busse</u>	Email: <u>dollie.l.busse@cop.com</u>
Signature: _____	Title: <u>Staff Regulatory Tech</u> Date: <u>04/30/2014</u>