

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:

05/07/2014

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>47120</u>	Contact Person: <u>Kenny Trueax</u>
Company Name: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 929-6383</u>
Address: <u>P O BOX 173779</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: <u>RSCDJPOSTDRILL@ANADARKO.COM</u>
API #: <u>05 - 123 - 20438 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>HSR-SHARKEY 8-34</u>	
Sec: <u>34</u> Twp: <u>4N</u> Range: <u>67W</u> QtrQtr: <u>SENE</u>	Lat: <u>40.270830</u> Long: <u>-104.869960</u>

OTHER – AS SPECIFIED BY PERMIT CONDITION add (2/2A)

Describe Permit Condition: Flood well return to production

Date: 05/09/2014 Time: 15:00 (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: KENNY TRUEAX

Email: RSCDJPOSTDRILL@ANADARKO.COM

Signature: _____

Title: SR. REGULATORY ANALYST

Date: 05/07/2014