

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:

06/02/2014

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 16700 Contact Person: DIANE PETERSON
Company Name: CHEVRON PRODUCTION COMPANY Phone: (970) 675-3842
Address: 100 CHEVRON RD Fax: (970) 675-3800
City: RANGELY State: CO Zip: 81648 Email: DLPE@CHEVRON.COM
API #: 05 - 103 - 06200 - 00 Facility ID: _____ Location ID: _____
Facility Name: LARSON, M B D1-26-E
Sec: 26 Twp: 2N Range: 102W QtrQtr: SENW Lat: 40.115930 Long: -108.803800

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 06/12/2014 Time: 12:00 (HH:MM) Underground Injection Control(UIC) Well? Yes

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: DIANE PETERSON Email: DLPE@CHEVRON.COM
Signature: _____ Title: REGULATORY SPECIALIST Date: 06/02/2014