

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:

**06/19/2014**

Document Number:

**400629505**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10071 Contact Person: Falon Casey  
Company Name: BARRETT CORPORATION\* BILL Phone: (303) 312-8762  
Address: 1099 18TH ST STE 2300 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: fcasey@billbarrettcorp.com  
API #: 05 - 123 - 38963 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Anschutz State 4-62-2-1721CH2  
Sec: 2 Twp: 4N Range: 62W QtrQtr: SWNW Lat: 40.344700 Long: -104.301714

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 06/24/2014 Time: 06:00 (HH:MM) Anticipated Date of flowback: 06/26/2014

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: Falon Casey Email: fcasey@billbarrettcorp.com  
Signature: Falon Casey Title: Ops Tech Date: 06/19/2014