

State of Colorado  
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OGCC RECEPTION

Receive Date:

06/30/2014

Document Number:

400635551

## NOTICE OF NOTIFICATION

Entity Information

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API #: 05 - 123 - 20504 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: STATE 5519 8D  
Sec: 8 Twp: 5N Range: 63W QtrQtr: NW Lat: 40.417390 Long: -104.465560

MECHANICAL INTEGRITY TEST – 10-DAY NOTICETest Date: 07/07/2014 Time: 06:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: Jenifer Hakkarinen Email: Jenifer.Hakkarinen@pdce.com  
Signature: Jenifer Hakkarinen Title: Regulatory Tech Date: 06/30/2014