

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:

07/02/2014

Document Number:

400638930

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>47120</u>	Contact Person: <u>Kayla Hamilton</u>
Company Name: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(720) 929-6552</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>kayla.hamilton@anadarko.com</u>

API #: <u>05 - 123 - 36553 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>MAVERICK 1N-13HZ</u>		
Sec: <u>13</u>	Twp: <u>3N</u>	Range: <u>66W</u> QtrQtr: <u>SWSE</u>
Lat: <u>40.218912</u>	Long: <u>-104.721431</u>	

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: <u>07/21/2014</u>	Time: <u>08:00</u> (HH:MM)	Anticipated Date of flowback: <u>07/22/2014</u>
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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>Kayla Hamilton</u>	Email: <u>kayla.hamilton@anadarko.com</u>
Signature: _____	Title: <u>Regulatory Specialist</u> Date: <u>07/02/2014</u>