

State of Colorado  
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:  
**08/07/2014**

Document Number:  
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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>10396</u>	Contact Person: <u>Cheryl Rowell</u>
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API #: <u>05 - 081 - 07282 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>NORTH FORK 43-12</u>	<input checked="" type="checkbox"/> Submit By Other Operator
Sec: <u>12</u> Twp: <u>7N</u> Range: <u>93W</u> QtrQtr: <u>NESE</u>	Lat: <u>40.570669</u> Long: <u>-107.775936</u>

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 08/18/2014 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: Cheryl Rowell Email: cheryl\_rowell@swn.com  
Signature: Cheryl Rowell Title: Sr. Staff Reg Analyst Date: 08/07/2014