

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:  
**08/11/2014**

Document Number:  
**400660687**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10456 Contact Person: Natalie Natalie  
Company Name: CAERUS PICEANCE LLC Phone: (303) 565-4600  
Address: 600 17TH STREET #1600N Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: nnaeve@caerusoilandgas.com

API #: 05 - 045 - 22310 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: NOLTE 14A-13  Submit By Other Operator  
Sec: 14 Twp: 7S Range: 96W QtrQtr: SESE Lat: 39.432408 Long: -108.069189

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

Date of Treatment: 08/11/2014 Time: 09:00 (HH:MM) Anticipated Date of flowback: 08/11/2014

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: Crissy Venturo Email: cventuro@progressivepcs.net  
Signature: Crissy Venturo Title: Permit Representative Date: 08/11/2014