

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:

**08/15/2014**

Document Number:

**400665729**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 100322 Contact Person: Brian Pearson  
Company Name: NOBLE ENERGY INC Phone: (303) 710-1588  
Address: 1625 BROADWAY STE 2200 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: bpearson@nobleenergyinc.com  
API #: 05 - 123 - 38687 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Wells Ranch State AE31-69HNC ☒ Submit By Other Operator  
Sec: 29 Twp: 6N Range: 62W QtrQtr: SWSW Lat: 40.450840 Long: -104.356280

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

Date of Treatment: 08/19/2014 Time: 06:00 (HH:MM) Anticipated Date of flowback: 08/23/2014

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: Brian K Pearson Email: bpearson@nobleenergyinc.com  
Signature: Brian K Pearson Title: Stimulation Team Lead Date: 08/15/2014