

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 53255 Contact Person: Naomi Azulai
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City: IGNACIO State: CO Zip: 81137 Email: naomi@maralexinc.com
API #: 05 - 045 - 06742 - 00 Facility ID: _____ Location ID: _____
Facility Name: SOUTH SHALE RIDGE 1-8 ☒ Submit By Other Operator
Sec: 8 Twp: 8S Range: 98W QtrQtr: NENE Lat: 39.379430 Long: -108.343262

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 09/11/2014 Time: 09:00 (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: Naomi Azulai Email: naomi@maralexinc.com
Signature: naomi Title: Production Technician Date: 09/04/2014