

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:

09/18/2014

Document Number:

400690451

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.hesseltine@anadarko.com</u>
API #: <u>05 - 123 - 38184 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>KERBS 32C-14HZ</u> <input checked="" type="checkbox"/> Submit By Other Operator	
Sec: <u>13</u> Twp: <u>3N</u> Range: <u>68W</u> QtrQtr: <u>SENE</u>	Lat: <u>40.228429</u> Long: <u>-104.942864</u>

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 09/19/2014 Time: 08:00 (HH:MM) Anticipated Date of flowback: 10/02/2014

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: <u>Kayla Hamilton</u>	Email: <u>kayla.hesseltine@anadarko.com</u>
Signature: _____	Title: <u>Regulatory Specialist</u> Date: <u>09/18/2014</u>