

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:

09/24/2014

Document Number:

400694447

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10071</u>	Contact Person: <u>Falon Casey</u>
Company Name: <u>BARRETT CORPORATION* BILL</u>	Phone: <u>(303) 3128762</u>
Address: <u>1099 18TH ST STE 2300</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>fcasey@billbarrettcorp.com</u>

API #: <u>05 - 123 - 39262 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>Fiducial 6-62-34-4841BH2</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>34</u> Twp: <u>6N</u> Range: <u>62W</u> QtrQtr: <u>NWSW</u>	Lat: <u>40.442956</u>	Long: <u>-104.317381</u>

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: <u>09/28/2014</u>	Time: <u>06:00</u> (HH:MM)	Anticipated Date of flowback: <u>09/30/2014</u>
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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>Falon Casey</u>	Email: <u>fcasey@billbarrettcorp.com</u>
Signature: <u>Falon Casey</u>	Title: <u>Ops Tech</u> Date: <u>09/24/2014</u>