

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:

**10/15/2014**

Document Number:

**400708952**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>8960</u>	Contact Person: <u>Bryan Brown</u>
Company Name: <u>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u>	Phone: <u>(720) 279-2330</u>
Address: <u>410 17TH STREET SUITE #1400</u>	Fax: <u>(720) 305-0804</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>bbrown@bonanzacrk.com</u>

  

API #: <u>05 - 123 - 39858 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>State Seventy Holes A-E-6HNB</u>		<input type="checkbox"/> Submit By Other Operator
Sec: <u>6</u>	Twp: <u>4N</u>	Range: <u>62W</u> QtrQtr: <u>Lot 2</u>
Lat: <u>40.346920</u>		Long: <u>-104.371400</u>

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

Date of Treatment: 10/20/2014 Time: 10:00 (HH:MM) Anticipated Date of flowback: 10/27/2014

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>Hannah Larsen</u>	Email: <u>hlarsen@bonanzacrk.com</u>
Signature: _____	Title: _____ Date: <u>10/15/2014</u>