

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:

11/16/2014

Document Number:

400732724

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10500</u>	Contact Person: <u>Neyeska Mut</u>
Company Name: <u>COACHMAN ENERGY OPERATING COMPANY LLC</u>	Phone: <u>(303) 296-3535</u>
Address: <u>5251 DTC PARKWAY SUITE 200</u>	Fax: <u>(303) 296-3888</u>
City: <u>GREENWOOD VILLAGE</u> State: <u>CO</u> Zip: <u>80111</u>	Email: <u>neyeska@cynosure-energy.com</u>
API #: <u>05 - 045 - 22459 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>Federal 14/15-4-21</u> <input type="checkbox"/> Submit By Other Operator	
Sec: <u>21</u> Twp: <u>6S</u> Range: <u>91W</u> QtrQtr: <u>SENE</u>	Lat: <u>39.514420</u> Long: <u>-107.552479</u>

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 11/16/2014 Time: 07:00 (HH:MM)

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>Rick Obernolte</u>	Email: <u>rickobe1@aol.com</u>
Signature: <u>Rick Obernolte</u>	Title: <u>Agent</u> Date: <u>11/16/2014</u>