

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:
11/21/2014

Document Number:
400738125

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10459 Contact Person: Taylor Heffner
Company Name: EXTRACTION OIL & GAS LLC Phone: (720) 9742019
Address: 1888 SHERMAN ST #200 Fax: ()
City: DENVER State: CO Zip: 80203 Email: theffner@extractionog.com
API #: 05 - 123 - 08275 - 00 Facility ID: _____ Location ID: _____
Facility Name: ROCKY MOUNTAIN FUEL 21-32 Submit By Other Operator
Sec: 32 Twp: 2N Range: 67W QtrQtr: NENW Lat: 40.100350 Long: -104.917190

START OF PLUGGING OPERATIONS - 48-hour notice required

Date: 11/25/2014 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: Taylor Heffner Email: theffner@extractionog.com
Signature: Taylor Heffner Title: Production Engineer Date: 11/21/2014