

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:  
12/09/2014

Document Number:  
400748959

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>100322</u>	Contact Person: <u>Julie Webb</u>
Company Name: <u>NOBLE ENERGY INC</u>	Phone: <u>(720) 587-2316</u>
Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>jwebb@nobleenergyinc.com</u>
API #: <u>05 - 123 - 16669 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>BOHLENDER D 20-4</u>	<input type="checkbox"/> Submit By Other Operator
Sec: <u>20</u> Twp: <u>3N</u> Range: <u>64W</u> QtrQtr: <u>NWNW</u>	Lat: <u>40.216681</u> Long: <u>-104.582473</u>

**OFFSET MITIGATION COMPLETED**

This well was mitigated per the Offset Horizontal Policy. Permitted horizontal well requiring mitigation - API # 123-40089  
Appropriate documentation for mitigation has been/will be submitted.

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: Julie Webb Email: jwebb@nobleenergyinc.com  
Signature: \_\_\_\_\_ Title: Regulatory Analyst Date: 12/09/2014