

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:
12/18/2014

Document Number:
400756112

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>100185</u>	Contact Person: <u>Bonnie Lamond</u>
Company Name: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(720) 876-5156</u>
Address: <u>370 17TH ST STE 1700</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u>	Email: <u>bonnie.lamond@encana.com</u>
API #: <u>05 - 123 - 39723 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>Dale 4E-20H-O264</u>	<input type="checkbox"/> Submit By Other Operator
Sec: <u>20</u> Twp: <u>2N</u> Range: <u>64W</u> QtrQtr: <u>SWSE</u>	Lat: <u>40.117641</u> Long: <u>-104.571914</u>

OTHER – AS SPECIFIED BY PERMIT CONDITION add (2/2A)

Describe Permit Condition: Offset operator mitigated well (P&A'd) per Dale 20H-O264 COA

Date: 12/18/2014 Time: 12:00 (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: Bonnie Lamond Email: bonnie.lamond@encana.com

Signature: Bonnie Lamond Title: Regulatory Analyst Date: 12/18/2014