

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:
01/27/2015

Document Number:
400781573

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 60890 Contact Person: Steve Matre
Company Name: MOUNTAIN PETROLEUM CORP Phone: (303) 296-1500
Address: 1801 BROADWAY STE 1250 Fax: (303) 296-2029
City: DENVER State: CO Zip: 80202 Email: matresr@qwestoffice.net
API #: 05 - 125 - 08006 - 00 Facility ID: _____ Location ID: _____
Facility Name: SIMMONS 5-19 Submit By Other Operator
Sec: 19 Twp: 2S Range: 43W QtrQtr: SWSW Lat: 39.863560 Long: -102.238610

START OF PLUGGING OPERATIONS - 48-hour notice required

Date: 01/29/2015 Time: 11:00 (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: Steve Matre Email: matresr@qwestoffice.net
Signature: Steven R. Matre Title: Vice President Date: 01/27/2015