

FORM  
42

Rev  
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State of Colorado  
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>10084</u>	Contact Person: <u>Vince Santistevan</u>
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API #: <u>05 - 071 - 08606 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>SUPERNOVA 44-3</u> <input type="checkbox"/> Submit By Other Operator	
Sec: <u>3</u> Twp: <u>32S</u> Range: <u>67W</u> QtrQtr: <u>SESE</u>	Lat: <u>37.284050</u> Long: <u>-104.868860</u>

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 03/02/2015 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? No

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>Judy Glinisty</u>	Email: <u>Judy.Glinisty@pxd.com</u>
Signature: _____	Title: <u>Lead Engineering Tech</u> Date: <u>02/18/2015</u>