

FORM
42
Rev
03/15

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:

03/30/2015

Document Number:

400816828

FIELD OPERATIONS NOTICE

The Form 42 shall be submitted as required by Rule, Notice to Operators, Policy, or Condition of Approval. A Form 42 Update shall be submitted to revise the scheduled date or time on a previous Form 42 - Advance Notice of Field Operations. A Form 42 Update must be for the same well, location, or facility and for the same Field Operation as a previous Form 42. NOTE: Operator's Contact for Advance Notices of Field Operations should be available 24 hours a day, 7 days a week and should have the most current scheduling information for the operation. Operator's Contact for other notices should be able to respond to questions regarding the reported information.

Update of a previous Form 42 Notice NO

Entity Information

OGCC Operator Number: 8960 Contact Person: Steve Wolfe
Company Name: BONANZA CREEK ENERGY OPERATING COMPANY LLC Phone: (720) 440-6100
Address: 410 17TH STREET SUITE #1400 Fax: (720) 305-0804
City: DENVER State: CO Zip: 80202 Email: swolfe@bonanzacrck.com

API #: 05 - 123 - 41044 - 00 Facility ID: _____ Location ID: _____
Facility Name: State Antelope 11-41-2HNB Submit By Other Operator
Sec: 2 Twp: 5N Range: 62W QtrQtr: Lot 4 Lat: 40.433143 Long: -104.298655

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 04/03/2015 Time: 10:00 (HH:MM) Anticipated Date of Flowback: 04/10/2015

FOR GAS WELLS ONLY:

- This well is a Gas Well, anticipated to have a Gas-to-Oil Ratio (GOR) equal to or greater than 15,000 scf/bbl.
- This Form 42 is submitted to satisfy notification requirements under NSPS OOOO, 40 C.F.R. Part 60, &60.5420(a)(2)(i).

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct and complete.

Print Name: Hannah Larsen Email: hlarsen@bonanzacrck.com
Signature: _____ Title: Administrative Assistant Date: 03/30/2015