

**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:****08/20/2015****Document Number:****400887626****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: <u>47120</u>                          | Contact Person: <u>XTREME 23</u>   |
| Company Name: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u>    | Phone: <u>(970) 778-4227</u>       |
| Address: <u>P O BOX 173779</u>                              | Fax: <u>( )</u>                    |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u> | Email: <u>XTREME23@GESMAIL.NET</u> |

|   |   |                          |
|---|---|--------------------------|
| API #: <u>05 - 123 - 41555 - 00</u>                                 | Facility ID: _____                                | Location ID: _____       |
| Facility Name: <u>CARTER 36N-33HZ</u>                               | <input type="checkbox"/> Submit By Other Operator |                          |
| Sec: <u>33</u> Twp: <u>2N</u> Range: <u>66W</u> QtrQtr: <u>NENW</u> | Lat: <u>40.099581</u>                             | Long: <u>-104.786159</u> |

**BLOW OUT PREVENTER TEST – 24-Hour notice**Test Date: 08/23/2015 Time: 05:00 (HH:MM)

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

|                                 |  |
|---------------------------------|--|
| Print Name: <u>CHERYL LIGHT</u> | Email: <u>CHERYL.LIGHT@ANADARKO.COM</u>                      |
| Signature: _____                | Title: <u>SR. REGULATORY ANALYST</u> Date: <u>08/20/2015</u> |