

**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:**  
**12/18/2015**  
**Document Number:**  
**400956746**

**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: 47120 Contact Person: HEATH POTTMEYER  
Company Name: KERR MCGEE OIL & GAS ONSHORE LP Phone: (740) 525-3445  
Address: P O BOX 173779 Fax: ( )  
City: DENVER State: CO Zip: 80217-3779 Email: heath.pottmeyer@anadarko.com

API #: 05 - 123 - 39708 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: FRONT RANGE FARMS 36N-14HZ  Submit By Other Operator  
Sec: 11 Twp: 1N Range: 68W QtrQtr: NWSE Lat: 40.065226 Long: -104.968150

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**  
Date of Treatment: 12/24/2015 Time: 08:00 (HH:MM) Anticipated Date of Flowback: 01/04/2016  
**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: ILA BEALE Email: ila.beale@anadarko.com  
Signature: \_\_\_\_\_ Title: STAFF REG. SPECIALIST Date: 12/18/2015