

FORM

42

Rev
03/15State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

12/04/2016

Document Number:

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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>PRECISION 564</u> |
| Company Name: <u>KERR MCGEE OIL & GAS ONSHORE LP</u> | Phone: <u>(303) 910-3067</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>PRECISION564@GESMAIL.NET</u> |

| | | |
|--------------------------------------------------------------------|---------------------------------------------------|--------------------------|
| API #: <u>05 - 123 - 42620 - 00</u> | Facility ID: _____ | Location ID: _____ |
| Facility Name: <u>HIGHLANDS 27C-33HZ</u> | <input type="checkbox"/> Submit By Other Operator | |
| Sec: <u>9</u> Twp: <u>1N</u> Range: <u>66W</u> QtrQtr: <u>NENE</u> | Lat: <u>40.072076</u> | Long: <u>-104.776458</u> |

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**

| | |
|--------------------------------|----------------------------|
| Spud Date: <u>12/09/2016</u> | Time: <u>06:00</u> (HH:MM) |
| Rig Name: <u>PRECISION 564</u> | |

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

| | |
|-------------------------------------|-------------------------------------------------------------|
| Print Name: <u>MIKE MCCONAUGHEY</u> | Email: <u>MIKE.MCCONAUGHEY@ANADARKO.COM</u> |
| Signature: _____ | Title: <u>REGULATORY SUPERVISOR</u> Date: <u>12/04/2016</u> |