

**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:**  
**03/24/2017**  
**Document Number:**  
**401243327**

**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>10112</u>	Contact Person: <u>Rachel Grant</u>	
Company Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Phone: <u>(918) 526-5592</u>	
Address: <u>16000 DALLAS PARKWAY #875</u>	Fax: <u>(918) 585-1660</u>	
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75248-6607</u>	Email: <u>regulatory@foundationenergy.com</u>	
API #: <u>05 - 125 - 08673 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>EBELER 44-31443</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>31</u> Twp: <u>4S</u> Range: <u>43W</u> QtrQtr: <u>SESE</u>	Lat: <u>39.661125</u>	Long: <u>-102.216992</u>

**START OF PLUGGING OPERATIONS** - 48-hour notice required  
Date: 03/28/2017 Time: 0800 (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>Rachel Grant</u>	Email: <u>regulatory@foundationenergy.com</u>
Signature: _____	Title: <u>HSE/Regulatory Manager</u> Date: <u>03/24/2017</u>