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This Form 5A is being submitted to report the Initial Fracture Treatment of the Codell formation 10/2007.

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

Signed: _____ Print Name: Scot Donato

Title: Regulatory Manager Date: _____ Email: regulatorypermitting@gwogco.com
:

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