

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:****01/16/2019****Document Number:****401907421****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**

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|---|---|
| OGCC Operator Number: <u>47120</u> | Contact Person: <u>SABRINA FRANTZ</u> |
| Company Name: <u>KERR MCGEE OIL & GAS ONSHORE LP</u> | Phone: <u>(970) 515-1141</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>SABRINA.FRANTZ@ANADARKO.COM</u> |

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|---|---|--------------------------|
| API #: <u>05 - 123 - 18014 - 00</u> | Facility ID: _____ | Location ID: _____ |
| Facility Name: <u>CAMENISCH 43-33</u> | <input type="checkbox"/> Submit By Other Operator | |
| Sec: <u>33</u> Twp: <u>4N</u> Range: <u>67W</u> QtrQtr: <u>NESE</u> | Lat: <u>40.267910</u> | Long: <u>-104.888100</u> |

MECHANICAL INTEGRITY TEST – 10-DAY NOTICETest Date: 01/28/2019 Time: 09:00 (HH:MM) Underground Injection Control(UIC) Well? No

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

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|---------------------------------|--|
| Print Name: <u>CHERYL LIGHT</u> | Email: <u>CHERYL.LIGHT@ANADARKO.COM</u> |
| Signature: _____ | Title: <u>STAFF REGULATORY ANALYST</u> Date: <u>01/16/2019</u> |