

**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:****03/29/2019****Document Number:****401989133****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>Alyssa Beard</u>
Company Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Phone: <u>(303) 2448114</u>
Address: <u>5057 KELLER SPRINGS RD STE 650</u>	Fax: <u>( )</u>
City: <u>ADDISON</u> State: <u>TX</u> Zip: <u>75001</u>	Email: <u>regulatory@foundationenergy.com</u>

API #: <u>05 - 123 - 20902 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>HOFFMAN 34-1</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>34</u> Twp: <u>8N</u> Range: <u>60W</u> QtrQtr: <u>NENE</u>	Lat: <u>40.624360</u>	Long: <u>-104.070741</u>

**OFFSET MITIGATION COMPLETED**

This well was mitigated per the Horizontal Offset Policy. Permitted horizontal well requiring mitigation - API # 123-46182  
Appropriate documentation for mitigation has been/will be submitted.

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

Print Name: <u>Alyssa Beard</u>	Email: <u>regulatory@foundationenergy.com</u>
Signature: _____	Title: <u>HSE Manager</u> Date: <u>03/29/2019</u>