

**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:

06/11/2019

Document Number:

402070572**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>8960</u>                               | Contact Person: <u>Kate Miller</u>     |
| Company Name: <u>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u> | Phone: <u>(720) 440-6116</u>           |
| Address: <u>410 17TH STREET SUITE #1400</u>                     | Fax: <u>( )</u>                        |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>          | Email: <u>regulatory@bonanzacr.com</u> |

|  |   |                          |
|--|---|--------------------------|
| API #: <u>05 - 123 - 47807 - 00</u>                                | Facility ID: _____                                | Location ID: _____       |
| Facility Name: <u>Wetco Farms A11-4-9MRLNB</u>                     | <input type="checkbox"/> Submit By Other Operator |                          |
| Sec: <u>4</u> Twp: <u>4N</u> Range: <u>63W</u> QtrQtr: <u>NWNW</u> | Lat: <u>40.347739</u>                             | Long: <u>-104.451679</u> |

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 06/13/2019 Time: 22:00 (HH:MM) Anticipated Date of Flowback: 06/24/2019

**FOR GAS WELLS ONLY:**

- ☐ This well is a Gas Well, anticipated to have a Gas-to-Oil Ratio (GOR) equal to or greater than 15,000 scf/bbl.
- ☐ This Form 42 is submitted to satisfy notification requirements under NSPS OOOO, 40 C.F.R. Part 60, &60.5420(a)(2)(i).

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

|                                  |  |
|----------------------------------|--|
| Print Name: <u>Aubrey Noonan</u> | Email: <u>regulatory@bonanzacr.com</u>                   |
| Signature: _____                 | Title: <u>Regulatory Analyst</u> Date: <u>06/11/2019</u> |