

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:
10/10/2019
Document Number:
402206449

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: 100322 Contact Person: Benjamin Wood
Company Name: NOBLE ENERGY INC Phone: (970) 5188942
Address: 1001 NOBLE ENERGY WAY Fax: ()
City: HOUSTON State: TX Zip: 77070 Email: ben.wood@nblenergy.com

API #: 05 - 123 - 47110 - 00 Facility ID: _____ Location ID: _____
Facility Name: SLW RANCH STATE BB07-668 Submit By Other Operator
Sec: 7 Twp: 5N Range: 63W QtrQtr: Lot 2 Lat: 40.417000 Long: -104.485980

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 10/13/2019 Time: 08:00 (HH:MM) Anticipated Date of Flowback: 10/27/2019

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: Benjamin Wood Email: ben.wood@nblenergy.com
Signature: _____ Title: frac manager Date: 10/10/2019