

**FORM**  
**42**  
Rev  
01/21

**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:  
**02/17/2021**  
Document Number:  
**402601899**

**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: 10456 Contact Person: Holly Hill  
Company Name: CAERUS PICEANCE LLC Phone: (720) 547-8746  
Address: 1001 17TH STREET #1600 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: regulatory@caerusoilandgas.com

API #: 05 - 045 - 14499 - 00 Facility ID: \_\_\_\_\_ Location ID: 334707  
Facility Name: MAP LLC 11-9BB(PI11)  Submit By Other Operator  
Sec: 11 Twp: 7S Range: 95W QtrQtr: NESE Lat: 39.449680 Long: -107.958500

**NOTICE OF WELL LIQUIDS UNLOADING – Prior Notice Required**

Start Date: 02/23/2021

Check appropriate box for timing of notice below. (Only 1 box may be checked.)

48 HOUR NOTICE  
OR

2 HOUR NOTICE. Start Time: \_\_\_\_\_ (HH:MM)

Is the estimated duration of the Well Liquids Unloading anticipated to last for longer than one day? Yes

If YES, describe the estimated anticipated duration of these operations:

Caerus Piceance LLC intends to swab this well at ~2PM on February 22nd, which may require two days to complete.

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

Print Name: Derek Molde Email: dmolde@caerusoilandgas.com  
Signature: \_\_\_\_\_ Title: Superintendent Date: 02/17/2021