

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:
03/25/2021
Document Number:
402640226

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 YES

Entity Information

OGCC Operator Number: <u>16700</u>	Contact Person: <u>ANITA SANFORD</u>	
Company Name: <u>CHEVRON USA INC</u>	Phone: <u>(970) 675-3842</u>	
Address: <u>100 CHEVRON ROAD</u>	Fax: <u>()</u>	
City: <u>RANGELY</u> State: <u>CO</u> Zip: <u>81648</u>	Email: <u>ATLX@CHEVRON.COM</u>	
API #: <u>05 - 045 - 14402 - 00</u>	Facility ID: <u>291496</u>	Location ID: <u>336045</u>
Facility Name: <u>SKR 598-35-AV-01</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>35</u> Twp: <u>5S</u> Range: <u>98W</u> QtrQtr: <u>NWNE</u>	Lat: <u>39.574748</u>	Long: <u>-108.353692</u>

NOTICE OF WELL LIQUIDS UNLOADING – Prior Notice Required

Start Date: 03/30/2021

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:

WE ANTICIPATE ONE DAY BUT PLAN FOR TWO DAYS IN CAUSE OF UNFORSEEN ISSUES WITH THE SWABBING RIG.

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

Print Name: ANITA SANFORD Email: ATLX@CHEVRON.COM
Signature: _____ Title: REGULATORY TECH.ASSISTANT Date: 03/25/2021