

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:
12/01/2021
Document Number:
402884552

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: 10112 Contact Person: Wes Wickersham
Company Name: FOUNDATION ENERGY MANAGEMENT LLC Phone: (307) 3890073
Address: 5057 KELLER SPRINGS RD STE 650 Fax: ()
City: ADDISON State: TX Zip: 75001 Email: wwickersham@foundationenergy.com

API #: 05 - 125 - 07972 - 00 Facility ID: 254094 Location ID: 304120
Facility Name: ALLEN 23-24 Submit By Other Operator
Sec: 24 Twp: 4S Range: 44W QtrQtr: NESW Lat: 39.693141 Long: -102.247476

NOTICE OF MOVE-IN, RIG-UP

Start Date: 12/01/2021 Time: 12:00 (HH:MM)

Select the type of rig below. (Only 1 box may be checked)

- Drilling Rig (Spud Rig) – 2 Business Days Notice
- Drilling Rig – 2 Business Days Notice
- Work-Over Rig, Planned Operations – 2 Business Days Notice
- Work-Over Rig, Unplanned Operations – notify within 1 Business Day after start

Is the estimated duration of operations with this rig on this Location anticipated to last for longer than one day? Yes

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

1.5 - 2 day workover needed pre-MIT or RTP

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

Print Name: Alyssa Beard Email: regulatory@foundationenergy.com
Signature: _____ Title: EHSR Manager Date: 12/01/2021