

FORM
42
Rev
01/21

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

08/15/2023

Document Number:

403496523

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>96850</u>	Contact Person: <u>Nate Lenard</u>	
Company Name: <u>TEP ROCKY MOUNTAIN LLC</u>	Phone: <u>(970) 9484275</u>	
Address: <u>1058 COUNTY ROAD 215</u>	Fax: <u>()</u>	
City: <u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</u>	Email: <u>liquidunloads@terraep.com</u>	
API #: <u>05 - 045 - 16350 - 00</u>	Facility ID: <u>297238</u>	Location ID: <u>334811</u>
Facility Name: <u>PUCKETT GM 311-6</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>6</u> Twp: <u>7S</u> Range: <u>96W</u> QtrQtr: <u>SWNW</u>	Lat: <u>39.469544</u>	Long: <u>-108.154863</u>

NOTICE OF WELL LIQUIDS UNLOADING – Prior Notice Required

Start Date: 08/11/2023

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

48 HOUR NOTICE

OR

2 HOUR NOTICE. Start Time: 16:30 (HH:MM)

Is the estimated duration of the Well Liquids Unloading anticipated to last for longer than one day? No

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

[Empty text box for describing duration]

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

Print Name: Shuree Simpson Email: liquidunloads@terraep.com

Signature: _____ Title: _____ Date: 08/15/2023