

FORM

42

Rev  
01/21State of Colorado  
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

02/29/2024

Document Number:

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## 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 NOEntity Information

OGCC Operator Number: <u>96850</u>	Contact Person: <u>Chris Varner</u>
Company Name: <u>TEP ROCKY MOUNTAIN LLC</u>	Phone: <u>(970) 9484359</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 - 13278 - 00</u>	Facility ID: <u>288428</u>	Location ID: <u>334775</u>
Facility Name: <u>KNIGHT PA 22-3</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>3</u> Twp: <u>7S</u> Range: <u>95W</u> QtrQtr: <u>NENW</u>	Lat: <u>39.470227</u>	Long: <u>-107.986050</u>

NOTICE OF WELL LIQUIDS UNLOADING – Prior Notice RequiredStart Date: 02/12/2024

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

☐ 48 HOUR NOTICE

OR

☒ 2 HOUR NOTICE. Start Time: 14:13 (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:

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

Print Name: Shuree SimpsonEmail: liquidunloads@terraep.com

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: 02/29/2024