



Form 3E - Per Well Surface Designation

Summary Information Overview

Form Name: **Form 3E - Per Well Surface Designation**
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Operator Information

Operator Number: **1810**
Operator Name: **AMERICAN COMETRA INC**
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Operator Zip: **76102**
First Name: **Jennifer**
Last Name: **Brainard**
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SUBMITTED

Per Well Surface Designation

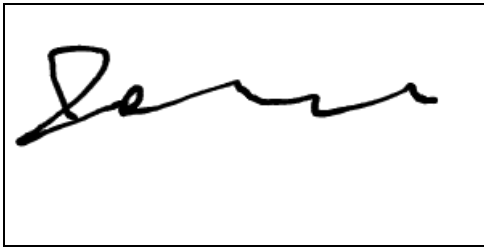
Well Designations:

Facility ID	API Number	Designation
228309	05-103-05140	Non-Irrigated
229816	05-103-07473	Irrigated
230035	05-103-07694	Irrigated

Signature and Certification

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

Operator Comments: **test test test**
Name: **Jen brainard**
Title: **Application Development Coordinator**
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Signature:

A rectangular box containing a handwritten signature in black ink. The signature is cursive and appears to be 'Jared S. Polis'.

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Jared S. Polis, Governor | Julie Murphy, Director | Scott Cuthbertson, Deputy Director Operations

