



## Form 3E - Per Well Surface Designation

### Summary Information Overview

Form Name: **Form 3E - Per Well Surface Designation**  
Document Number: **402172401**  
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### Operator Information

Operator Number: **1810**  
Operator Name: **AMERICAN COMETRA INC**  
Operator Address: **500 THROCKMORTON ST SUITE 2500**  
Operator City: **FORT WORTH**  
Operator State: **TX**  
Operator Zip: **76102**  
First Name: **Jen**  
Last Name: **brainard**  
Contact Phone: **(303) 123-1234**  
Contact Email: **jennifer.brainard@state.co.us**

SUBMITTED

### Per Well Surface Designation

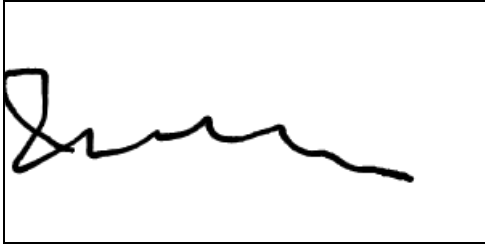
Well Designations:

Facility ID	API Number	Designation
228309	05-103-05140	Non-Irrigated
229816	05-103-07473	Non-Irrigated
230035	05-103-07694	Non-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: **more testing**  
Name: **Jen brainard**  
Title: **Application Development Coordinator**  
Email: **jennifer.brainard@state.co.us**  
Phone: **(303) 123-1234**  
Signature:

A rectangular box containing a handwritten signature in black ink. The signature is cursive and appears to be the name 'Julie Murphy'.

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