

**State of Colorado**  
**Energy & Carbon Management Commission**

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



**ECMC RECEPTION**

Receive Date:  
**05/14/2025**

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Document Number:  
**404204665**

**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**

|  |   |
|--|---|
| ECMC Operator Number: <u>10459</u>                     | Contact Person: <u>Fred Kayser</u>      |
| Company Name: <u>EXTRACTION OIL &amp; GAS INC</u>      | Phone: <u>(970) 396-4900</u>            |
| Address: <u>555 17TH STREET SUITE 3700</u>             | Fax: <u>( )</u>                         |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u> | Email: <u>fkayser@civiresources.com</u> |

|   |   |                            |
|---|---|----------------------------|
| API #: <u>05 - - -</u>  | Facility ID: <u>321462</u>                        | Location ID: <u>321462</u> |
| Facility Name: <u>HUANG-62N69W 33SESW</u>                           | <input type="checkbox"/> Submit By Other Operator |                            |
| Sec: <u>33</u> Twp: <u>2N</u> Range: <u>69W</u> QtrQtr: <u>SESW</u> | Lat: <u>40.088915</u>                             | Long: <u>-105.124766</u>   |

**NOTICE OF RETURN TO SERVICE**

Check the appropriate Box Below.

**Off-location Flowline Or Crude Oil Transfer Line**

The pressure test of the off-location flowline or crude oil transfer line is scheduled for this date: \_\_\_\_\_  
[See Rules 1102.o.(1)D and 1102.o.(2)C]

OR

The Location ID of the Oil & Gas Location nearest the point where the Pressure Test or Return-to-Service will occur is: 05/17/2025 [See Rule 1104.a.(2)B]

The Location ID of the Oil & Gas Location nearest the point where the Pressure Test or Return-to-Service will occur is: 321462

The API Number of the Well nearest the point where the Pressure Test or Return-to-Service will occur is: 013-06513

The latitude and longitude of the point where the Pressure Test or Return-to-Service will occur is:  
Latitude: 40.088915 Longitude: -105.124766

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

Print Name: Stephany Olsen Email: regulatory@civiresources.com  
Signature: \_\_\_\_\_ Title: Sr. Regulatory Analyst Date: 05/14/2025