

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:  
**04/07/2026**  
Document Number:  
**404609840**

**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>66190</u>	Contact Person: <u>Kelley Reinhardt</u>	
Company Name: <u>OMIMEX PETROLEUM INC</u>	Phone: <u>(970) 792-5298</u>	
Address: <u>100 CRESCENT CT SUITE700-#5528</u>	Fax: <u>( )</u>	
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75201</u>	Email: <u>kelley.reinhardt@state.co.us</u>	
API #: <u>05 - 095 - 06147 - 00</u>	Facility ID: <u>291623</u>	Location ID: <u>314056</u>
Facility Name: <u>WORLEY 6-24-7-45 (OWP)</u>	<input checked="" type="checkbox"/> Submit By Other Operator	
Sec: <u>24</u> Twp: <u>7N</u> Range: <u>45W</u> QtrQtr: <u>SENW</u>	Lat: <u>40.565020</u>	Long: <u>-102.331980</u>

**START OF PLUGGING OPERATIONS - 48-hour notice required**

Date: 04/08/2026 Time: 08:00 (HH:MM)

Are Plugging Operations for this Well anticipated to last for longer than one day? No

If YES, briefly describe the planned activities and the estimated duration of these operations:

[Empty text box for describing plugging operations]

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

Print Name: <u>Kelley Reinhardt</u>	Email: <u>kelley.reinhardt@state.co.us</u>
Signature: _____	Title: <u>OWP EFS</u> Date: <u>04/07/2026</u>