



NOTICE OF NOTIFICATION

Entity Information

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|---|--|
| OGCC Operator Number: <u>10071</u> | Contact Person: <u>Cecil Crow</u> |
| Company Name: <u>BARRETT CORPORATION* BILL</u> | Phone: <u>(970) 987-4955</u> |
| Address: <u>1099 18TH ST STE 2300</u> | Fax: <u>()</u> |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u> | Email: <u>pat307@billbarrettcorp.com</u> |
| API #: <u>05 - 045 - 20949 - 00</u> Facility ID: _____ | Location ID: _____ |
| Facility Name: <u>EPPERLY 23D-23-692</u> | |
| Sec: <u>23</u> Twp: <u>6S</u> Range: <u>92W</u> QtrQtr: <u>NWSW</u> | Lat: <u>39.511858</u> Long: <u>-107.640604</u> |

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 04/25/2012 Time: 22:00 (HH:MM)

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Cecil E. Crow Email: pat307@billbarrettcorp.com

Signature: Cecil E. Crow Title: Drilling Supervisor Date: 04/24/2012