

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

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



OGCC RECEPTION

Receive Date:

04/30/2012

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 8960 Contact Person: Keith Caplan
Company Name: BONANZA CREEK ENERGY OPERATING COMPANY LLC Phone: (720) 440-6112
Address: P O BOX 21974 Fax: (720) 279-2331
City: BAKERSFIELD State: CA Zip: 93390 Email: KCaplan@BonanzaCrk.com
API #: 05 - 123 - 35276 - 00 Facility ID: _____ Location ID: _____
Facility Name: Pronghorn 31-34-15HZ
Sec: 15 Twp: 5N Range: 61W QtrQtr: NWNE Lat: 40.407840 Long: -104.192910

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 05/07/2012 Time: 06:00 (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: Keith Caplan Email: KCaplan@BonanzaCrk.com
Signature: _____ Title: Sr. Ops. Tech Date: 04/30/2012