

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**05/10/2012**  
Document Number:  
**400283349**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 69175 Contact Person: Dominic Gardella  
Company Name: PETROLEUM DEVELOPMENT CORPORATION Phone: (304) 842-6256  
Address: 1775 SHERMAN STREET - STE 3000 Fax: ( )  
City: DENVER State: CO Zip: 80203 Email: dgardella@petd.com

API #: 05 - 123 - 21260 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: E.JOHNSON 2-21  
Sec: 2 Twp: 5N Range: 67W QtrQtr: NENW Lat: 40.434810 Long: -104.859610

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 05/16/2012 Time: 07:00 (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: Dom Email: dgardella@petd.com  
Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: 05/10/2012