

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**05/24/2012**  
Document Number:  
**400288442**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10402 Contact Person: Terry Hoffman  
Company Name: MATRIX OIL CORPORATION Phone: (720) 542-8287  
Address: 104 W ANAPAMU STREET #C Fax: ( )  
City: SANTA BARBARA State: CA Zip: 93101 Email: terry@rockymountainpermitting.com  
API #: 05 - 103 - 11920 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Sheridan 11-2  
Sec: 11 Twp: 1N Range: 94W QtrQtr: TR 47A Lat: 40.066008 Long: -107.908008

NOTICE TO RUN AND CEMENT CASING – 24-hour notice  
Start Date: 05/26/2012 Time: 19:00 (HH:MM) String: SURFACE

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: Terry L. Hoffman Email: terry@rockymountainpermitting.com  
Signature: Terry L. Hoffman Title: Permit Agent Date: 05/24/2012