



NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>100185</u>	Contact Person: <u>Marco Silva</u>
Company Name: <u>ENCANA OIL & GAS (USA) INC</u>	Phone: <u>(303) 353-7854</u>
Address: <u>370 17TH ST STE 1700</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u>	Email: <u>marco.silva@encana.com</u>
API #: <u>05 - 045 - 21194 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>Federal 29-6B (PF-29)</u>	
Sec: <u>29</u> Twp: <u>7S</u> Range: <u>95W</u> QtrQtr: <u>SENW</u>	Lat: <u>39.410550</u> Long: <u>-108.024700</u>

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 06/03/2012 Time: 11:00 (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: Marco Silva Email: marco.silva@encana.com

Signature: _____ Title: _____ Date: 06/02/2012