

FORM
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OGCC RECEPTION
Receive Date:
06/29/2012
Document Number:
400300991

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 69175 Contact Person: Kelly Lewis
Company Name: PETROLEUM DEVELOPMENT CORPORATION Phone: (970) 227-8060
Address: 1775 SHERMAN STREET - STE 3000 Fax: ()
City: DENVER State: CO Zip: 80203 Email: klewis@petd.com

API #: 05 - 123 - 34709 - 00 Facility ID: _____ Location ID: _____
Facility Name: CARMICHAEL 26R-203
Sec: 26 Twp: 7N Range: 63W QtrQtr: NENE Lat: 40.551940 Long: -104.397870

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 07/09/2012 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: Kelly Lewis Email: klewis@petd.com
Signature: Kelly Lewis Title: Completions Supervisor Date: 06/29/2012