



OGCC RECEPTION
Receive Date:
07/26/2012
Document Number:
400309668

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: JOE KAUFFMANN
Company Name: ENCANA OIL & GAS (USA) INC Phone: (303) 774-3959
Address: 370 17TH ST STE 1700 Fax: ()
City: DENVER State: CO Zip: 80202-5632 Email: JOE.KAUFFMANN@ENCANA.COM

API #: 05 - 013 - 06631 - 00 Facility ID: _____ Location ID: _____
Facility Name: CANYON CREEK 34-13
Sec: 13 Twp: 1N Range: 69W QtrQtr: NWSE Lat: 40.049610 Long: -105.063200

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 07/31/2012 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: JENNIFER LIND Email: JENNIFER.LIND@ENCANA.COM
Signature: _____ Title: REGULATORY ANALYST Date: 07/26/2012