

FORM
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OGCC RECEPTION

Receive Date:
07/29/2012

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10335 Contact Person: Cindy Turner
Company Name: AXIA ENERGY LLC Phone: (720) 746-5209
Address: 1430 LARIMER STREET #400 Fax: (720) 746-5201
City: DENVER State: CO Zip: 80202 Email: cturner@axiaenergy.com
API #: 05 - 081 - 07729 - 00 Facility ID: _____ Location ID: _____
Facility Name: Bulldog 20-12H-892
Sec: 20 Twp: 8N Range: 92W QtrQtr: SWNW Lat: 40.632925 Long: -107.750883

BRADENHEAD TEST – 48-hour Notice

Test Date: 07/31/2012 Time: 06:00 (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: Cindy Turner Email: cturner@axiaenergy.com
Signature: _____ Title: Project Manager Date: 07/29/2012