

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**08/14/2012**  
Document Number:  
**400315502**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10071 Contact Person: Barry Wilkinson  
Company Name: BARRETT CORPORATION\* BILL Phone: (970) 876-1959  
Address: 1099 18TH ST STE 2300 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: BWilkinson@billbarretcorp.com  
API #: 05 - 033 - 06147 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: FOSNOT 13H-6-39-17  
Sec: 6 Twp: 39N Range: 17W QtrQtr: LOT 21 Lat: 37.662697 Long: -108.772944

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 08/23/2012 Time: 10:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: Barry Wilkinson Email: bWilkinson@billbarretcorp.com  
Signature: \_\_\_\_\_ Title: Production Engineer Date: 08/14/2012