

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

08/17/2012

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 16700 Contact Person: DIANE PETERSON
Company Name: CHEVRON PRODUCTION COMPANY Phone: (970) 675-3842
Address: 100 CHEVRON RD Fax: (970) 675-3800
City: RANGELY State: CO Zip: 81648 Email: DLPE@CHEVRON.COM
API #: 05 - 103 - 05559 - 00 Facility ID: _____ Location ID: _____
Facility Name: CARNEY 4-34
Sec: 34 Twp: 2N Range: 102W QtrQtr: NENE Lat: 40.105159 Long: -108.822629

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 08/24/2012 Time: 10:00 (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: DIANE L PETERSON Email: DLPE@CHEVRON.COM
Signature: DIANE L PETERSON Title: REGULATORY SPECIALIST Date: 08/17/2012