

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**08/18/2012**  
Document Number:  
**400317720**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>78110</u>	Contact Person: <u>Jason Morris</u>
Company Name: <u>SWEPI LP</u>	Phone: <u>(970) 778-4345</u>
Address: <u>4582 S ULSTER ST PKWY #1400</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80237</u>	Email: <u>jason.morris@shell.com</u>
API #: <u>05 - 081 - 07720 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>North Castor Gulch 1-16</u>	
Sec: <u>16</u> Twp: <u>5N</u> Range: <u>91W</u> QtrQtr: <u>TR 66</u>	Lat: <u>40.392189</u> Long: <u>-107.605392</u>

**BLOW OUT PREVENTER TEST – 24-Hour notice**

Test Date: 08/19/2012 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: Jason Morris Email: jason.morris@shell.com

Signature: Jason Morris Title: Drilling Foreman Date: 08/18/2012