

FORM  
42  
Rev  
03/12



OGCC RECEPTION

Receive Date:  
**09/06/2012**

Document Number:  
**400324168**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 47120 Contact Person: Cheryl Light  
Company Name: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6461  
Address: P O BOX 173779 Fax: (720) 929-7461  
City: DENVER State: CO Zip: 80217-3779 Email: cheryl.light@anadarko.com  
API #: 05 - 123 - 35761 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: THOMASON 35C-15HZ  
Sec: 15 Twp: 2N Range: 65W QtrQtr: NENW Lat: 40.145290 Long: -104.654674

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

Test Date: 09/06/2012 Time: 08:00 (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: Cheryl Light Email: DJRegulatory@anadarko.com  
Signature: \_\_\_\_\_ Title: Sr. Regulatory Analyst Date: 09/06/2012