

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**11/07/2012**  
Document Number:  
**400344327**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 69175 Contact Person: Jeff Salen  
Company Name: PDC ENERGY INC Phone: (303) 885-5193  
Address: 1775 SHERMAN STREET - STE 3000 Fax: ( )  
City: DENVER State: CO Zip: 80203 Email: jeff.salen@pdce.com  
API #: 05 - 123 - 35721 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Riteaway 32M-243  
Sec: 32 Twp: 5N Range: 67W QtrQtr: NENW Lat: 40.362560 Long: -104.920080

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

Test Date: 11/08/2012 Time: 20:00 (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: Jodi Martinez Email: jodi.martinez@pdce.com  
Signature: JODI L MARTINEZ Title: Drilling Engineer Date: 11/07/2012