

FORM
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Rev
03/12



OGCC RECEPTION
Receive Date:
11/18/2012
Document Number:
400347577

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10394</u>	Contact Person: <u>Angie Galvan</u>
Company Name: <u>CONDOR ENERGY TECHNOLOGY LLC</u>	Phone: <u>(281) 716-5730</u>
Address: <u>3315 HIGHWAY 50</u>	Fax: <u>(281) 815-2882</u>
City: <u>SILVER SPRINGS</u> State: <u>NV</u> Zip: <u>89429</u>	Email: <u>Angie.Galvan@stxra.com</u>
API #: <u>05 - 123 - 36243 - 00</u>	Facility ID: _____ Location ID: _____
Facility Name: <u>Waves 1H</u>	
Sec: <u>23</u> Twp: <u>7N</u> Range: <u>60W</u> QtrQtr: <u>SWSW</u>	Lat: <u>40.554040</u> Long: <u>-104.068900</u>

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**

Spud Date: 11/19/2012 Time: 07:00 (HH:MM)
Rig Name: Ensign 136

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: Angie Galvan Email: angie.galvan@stxra.com
Signature: _____ Title: Regulatory Analyst Date: 11/18/2012