

FORM
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OGCC RECEPTION

Receive Date:

12/27/2012

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10245 Contact Person: Tony Markve
Company Name: SINGLETREE RESOURCES INC Phone: (307) 316-0010
Address: 521 PROGRESS CIRCLE #1 Fax: ()
City: CHEYENNE State: WY Zip: 82007 Email: tony@singletreeresources.com
API #: 05 - 075 - - Facility ID: _____ Location ID: 430641
Facility Name: Haley Smith 215-19
Sec: 19 Twp: 11N Range: 53W QtrQtr: NENW Lat: 40.916970 Long: -103.336600

NOTICE OF CONSTRUCTION OF A NEW LOCATION OR MAJOR CHANGE – 48-hour notice required

Start Date: 12/26/2012

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: Tony Markve Email: tony@singletreeresources.com
Signature: Tony Markve Title: engineer Date: 12/27/2012