

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**02/04/2013**  
Document Number:  
**400377636**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>10414</u>	Contact Person: <u>SAM SCHUESSLER</u>
Company Name: <u>CASCADE PETROLEUM LLC</u>	Phone: <u>(303) 407-6500</u>
Address: <u>1331 17TH STREET #400</u>	Fax: <u>(303) 407-6501</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>sschuessler@cascadepetroleum.com</u>
API #: <u>05 - 073 - 06497 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>FORRISTALL STATE 36-11S-56W-02</u>	
Sec: <u>36</u> Twp: <u>11S</u> Range: <u>56W</u> QtrQtr: <u>SWNE</u>	Lat: <u>39.047860</u> Long: <u>-103.618390</u>

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

Spud Date: 02/01/2013 Time: 07:00 (HH:MM)  
Rig Name: Schaal #1

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: <u>SAM SCHUESSLER</u>	Email: <u>sschuessler@cascadepetroleum.com</u>
Signature: <u>SAMUEL T SCHUESSLER</u>	Title: <u>ENGINEERING TECH</u> Date: <u>02/04/2013</u>