

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

02/19/2013

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10414 Contact Person: SAM SCHUESSLER
Company Name: CASCADE PETROLEUM LLC Phone: (303) 407-6500
Address: 1331 17TH STREET #400 Fax: (303) 407-6501
City: DENVER State: CO Zip: 80202 Email: sschuessler@cascadepetroleum.com
API #: 05 - 073 - 06501 - 00 Facility ID: _____ Location ID: _____
Facility Name: STATE 16-11S-55W-02
Sec: 16 Twp: 11S Range: 55W QtrQtr: SWSW Lat: 39.084950 Long: -103.569640

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

Spud Date: 02/14/2013 Time: 13:00 (HH:MM)
Rig Name: SCHALL 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: SAM SCHUESSLER Email: sschuessler@cascadepetroleum.com
Signature: SAMUEL T SCHUESSLER Title: ENGINEERING TECH Date: 02/19/2013