

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**02/21/2013**  
Document Number:  
**400383697**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 95620 Contact Person: Steve James  
Company Name: WESTERN OPERATING COMPANY Phone: (303) 893-2438  
Address: 518 17TH ST STE 200 Fax: (303) 629-5735  
City: DENVER State: CO Zip: 80202 Email: s.d.james@att.net

API #: 05 - 073 - 06485 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: CULLEN BOYERO 1-30  
Sec: 30 Twp: 12S Range: 52W QtrQtr: NWNE Lat: 38.976810 Long: -103.262870

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

Spud Date: 12/04/2012 Time: 12:00 (HH:MM)  
Rig Name: Murfin Rig 25

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: Steven James Email: s.d.james@att.net  
Signature: Steven James Title: President Date: 02/21/2013