



OGCC RECEPTION
Receive Date:
03/04/2013
Document Number:
400387309

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10347</u>	Contact Person: <u>Christi Scritchfield</u>
Company Name: <u>CONTINENTAL RESOURCES INC</u>	Phone: <u>(405) 234-9000</u>
Address: <u>PO BOX 269000</u>	Fax: <u>(405) 234-9562</u>
City: <u>OKLAHOMA CITY</u> State: <u>OK</u> Zip: <u>73126</u>	Email: <u>christi.scritchfield@clr.com</u>
API #: <u>05 - 123 - 35277 - 00</u>	Facility ID: _____ Location ID: _____
Facility Name: <u>Leggett 1-5H</u>	
Sec: <u>5</u> Twp: <u>7N</u> Range: <u>60W</u> QtrQtr: <u>NWSW</u>	Lat: <u>40.602362</u> Long: <u>-104.125416</u>

FORMATION INTEGRITY TEST – 24-hour notice

Test Date: 03/05/2013 Time: 18:00 (HH:MM)

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: Christi Scritchfield Email: christi.scritchfield@clr.com
Signature: _____ Title: Regulatory Compliance Date: 03/04/2013