

FORM
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OGCC RECEPTION
Receive Date:
03/29/2013
Document Number:
400397624

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: Erasmus Parras
Company Name: ENCANA OIL & GAS (USA) INC Phone: (303) 353-7854
Address: 370 17TH ST STE 1700 Fax: ()
City: DENVER State: CO Zip: 80202-5632 Email: erasmo.parras@encana.com
API #: 05 - 045 - 21840 - 00 Facility ID: _____ Location ID: _____
Facility Name: Shideler 30-4A (O19EB)
Sec: 19 Twp: 7S Range: 92W QtrQtr: SWSE Lat: 39.426275 Long: -107.705084

BLOW OUT PREVENTER TEST – 24-Hour notice
Test Date: 03/31/2013 Time: 02:00 (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: Erasmus Parras Email: erasmo.parras@encana.com
Signature: Erasmus parras Title: Drilling Consultant Date: 03/29/2013