

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:  
**04/23/2013**  
Document Number:  
**400407828**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 100185 Contact Person: Kelvin Edsall  
Company Name: ENCANA OIL & GAS (USA) INC Phone: (303) 774-3912  
Address: 370 17TH ST STE 1700 Fax: ( )  
City: DENVER State: CO Zip: 80202-5632 Email: Kelvin.Edsall@Encana.com  
API #: 05 - 123 - 21362 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Rasmussen 12-28  
Sec: 28 Twp: 2N Range: 68W QtrQtr: SEnw Lat: 40.111500 Long: -105.011420

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 04/26/2013 Time: 07:00 (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: Sheilla Reed-High Email: sheilla.reedhigh@Encana.com  
Signature: \_\_\_\_\_ Title: Drilling and Compl. Tech. Date: 04/23/2013