

FORM
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OGCC RECEPTION
Receive Date:
06/18/2013
Document Number:
400435058

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10411 Contact Person: Marco Silva
Company Name: ENDEAVOUR OPERATING CORPORATION Phone: (970) 361-328979-0700
Address: 1125 17TH STREET #1525 Fax: ()
City: DENVER State: CO Zip: 80202 Email: usscoldmtn@hotmail.com
API #: 05 - 103 - 11954 - 00 Facility ID: _____ Location ID: _____
Facility Name: Wiley 23-3-97-1
Sec: 23 Twp: 3N Range: 97W QtrQtr: SESE Lat: 40.209787 Long: -108.241080

FORMATION INTEGRITY TEST – 24-hour notice

Test Date: 06/18/2013 Time: 20:00 (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: Marco Silva Email: usscoldmtn@hotmail.com
Signature: _____ Title: _____ Date: 06/18/2013