

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**07/02/2013**  
Document Number:  
**400441830**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10338 Contact Person: Tina Taylor  
Company Name: CARRIZO OIL & GAS INC Phone: (713) 328-1000  
Address: 500 DALLAS STREET #2300 Fax: (713) 328-1060  
City: HOUSTON State: TX Zip: 77002 Email: tina.taylor@crzo.net

API #: 05 - 123 - 36068 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Bringelson Ranch 2-20-11-9-58  
Sec: 20 Twp: 9N Range: 58W QtrQtr: NWNW Lat: 40.740410 Long: -103.896670

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**  
Date of Treatment: 07/09/2013 Time: 06:00 (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: Tina Taylor Email: tina.taylor@crzo.net  
Signature: \_\_\_\_\_ Title: Regulatory Compliance Date: 07/02/2013