

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:  
**07/02/2013**

Document Number:  
**400441858**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10439 Contact Person: Tina Taylor  
Company Name: CARRIZO NIOBRARA LLC 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 - 37243 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Shull 4-25-9-60  
Sec: 25 Twp: 9N Range: 60W QtrQtr: SWSE Lat: 40.714690 Long: -104.035220

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

Date of Treatment: 07/17/2013 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