

FORM  
42  
Rev  
03/12



OGCC RECEPTION

Receive Date:  
**08/09/2013**

Document Number:  
**400465569**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 46685 Contact Person: Andrew Antipas  
Company Name: KINDER MORGAN CO2 CO LP Phone: (970) 882-2464  
Address: 17801 HWY 491 Fax: (970) 882-5521  
City: CORTEZ State: CO Zip: 81321 Email: Andrew\_Antipas@kindermorgan.com  
API #: 05 - 033 - 06112 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: DC #10  
Sec: 8 Twp: 40N Range: 17W QtrQtr: NENE Lat: 37.747216 Long: -108.740423

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 08/28/2013 Time: 09:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: Andrew Antias Email: Andrew\_Antipas@kindermorgan.com  
Signature: AJA Title: Project Manager Date: 08/09/2013