

FORM
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OGCC RECEPTION
Receive Date:
09/05/2013
Document Number:
400476561

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 16700 Contact Person: Julie Justus
Company Name: CHEVRON USA INC Phone: (970) 257-6042
Address: 6001 BOLLINGER CANYON RD Fax: (970) 245-6489
City: SAN RAMON State: CA Zip: 94583 Email: jjustus@chevron.com
API #: 05 - 045 - 15276 - 00 Facility ID: _____ Location ID: _____
Facility Name: SKR 598-25-BV-02
Sec: 25 Twp: 5S Range: 98W QtrQtr: SENW Lat: 39.586770 Long: -108.341000

BLOW OUT PREVENTER TEST – 24-Hour notice
Test Date: 09/06/2013 Time: 12:00 (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: Julie Justus Email: jjustus@chevron.com
Signature: Julie Justus Title: Regulatory Specialist Date: 09/05/2013