

FORM  
42  
Rev  
03/12



OGCC RECEPTION

Receive Date:  
**10/08/2013**

Document Number:  
**400491831**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 100322 Contact Person: HEATHER FOGEL  
Company Name: NOBLE ENERGY INC Phone: (303) 228-4000  
Address: 1625 BROADWAY STE 2200 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: HFOGEL@NOBLEENERGYINC.OM  
API #: 05 - 123 - 30543 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: FIVE RIVERS K 09-19  
Sec: 9 Twp: 4N Range: 66W QtrQtr: SENW Lat: 40.329160 Long: -104.787914

**OTHER – AS SPECIFIED BY PERMIT CONDITION add (2/2A)**

Describe Permit Condition: FLOOD START UP RETURN TO PRODUCTOIN  
Date: 10/11/2013 Time: 07:00 (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: HEATHER FOGEL Email: HFOGEL@NOBLEENERGYINC.COM  
Signature: HEATHER FOGEL Title: ENGINEERING TECH Date: 10/08/2013