

FORM
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OGCC RECEPTION
Receive Date:
10/10/2013
Document Number:
400492989

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10338 Contact Person: kirk williams
Company Name: CARRIZO OIL & GAS INC Phone: (970) 441-0257
Address: 500 DALLAS STREET #2300 Fax: (970) 6879137
City: HOUSTON State: TX Zip: 77002 Email: k.williams@schneiderenergy.com
API #: 05 - 123 - 36578 - 00 Facility ID: _____ Location ID: _____
Facility Name: O'Hare 1-5-10-57
Sec: 5 Twp: 10N Range: 57W QtrQtr: Lot 3 Lat: 40.874430 Long: -103.778490

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 10/14/2013 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: kirk williams Email: k.williams@schneiderenergy.com
Signature: kirk williams Title: Well Site Supervisor Date: 10/10/2013