

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:  
**10/28/2013**  
Document Number:  
**400503859**

**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 - 22096 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: SKR 598-08-BV 03  
Sec: 8 Twp: 5S Range: 98W QtrQtr: SESW Lat: 39.621672 Long: -108.414169

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

Date of Treatment: 11/02/2013 Time: 08:00 (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: 10/28/2013