

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:

10/29/2013

Document Number:

400504436

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10000 Contact Person: Patti Campbell
Company Name: BP AMERICA PRODUCTION COMPANY Phone: (970) 335-3828
Address: 501 WESTLAKE PARK BLVD Fax: (970) 335-3837
City: HOUSTON State: TX Zip: 77079 Email: patricia.campbell@bp.com
API #: 05 - 067 - 08999 - 00 Facility ID: _____ Location ID: _____
Facility Name: DULIN ROBERT GAS UNIT 2
Sec: 35 Twp: 35N Range: 7W QtrQtr: NWSW Lat: 37.254939 Long: -107.613462

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 11/13/2013 Time: 05:00 (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: Patricia Campbell Email: patricia.campbell@bp.com
Signature: _____ Title: Regulatory Analyst Date: 10/29/2013