

FORM
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OGCC RECEPTION
Receive Date:
11/21/2013
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400516640

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10275 Contact Person: Loni Davis
Company Name: AUGUSTUS ENERGY PARTNERS LLC Phone: (970) 332-3585
Address: P O BOX 250 Fax: (970) 332-3587
City: WRAY State: CO Zip: 80758 Email: ldavis@augustusenergy.com
API #: 05 - 125 - 11875 - 00 Facility ID: _____ Location ID: _____
Facility Name: KGA 14-06
Sec: 14 Twp: 3N Range: 45W QtrQtr: SEnw Lat: 40.230590 Long: -102.370330

SITE READY FOR RECLAMATION INSPECTION : FINAL

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: Loni Davis Email: ldavis@augustusenergy.com
Signature: _____ Title: Oper Acctg & Reg Spec Date: 11/21/2013