

FORM
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OGCC RECEPTION

Receive Date:
12/13/2013

Document Number:
400526418

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10442 Contact Person: Mitch Steinke
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City: DENVER State: CO Zip: 80202 Email: mitch.steinke@encana.com
API #: 05 - 045 - 21131 - 00 Facility ID: _____ Location ID: _____
Facility Name: SG WD08A-19 C19495
Sec: 19 Twp: 4S Range: 95W QtrQtr: NENW Lat: 39.693111 Long: -108.098612

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 12/23/2013 Time: 00:00 (HH:MM) Underground Injection Control(UIC) Well? Yes

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: Amy Henline Email: amy.henline@encana.com
Signature: _____ Title: Permitting Analyst Date: 12/13/2013