

FORM
42
Rev
03/12



OGCC RECEPTION

Receive Date:
12/24/2013

Document Number:
400531933

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 19160 Contact Person: Justin Carlile
Company Name: CONOCO PHILLIPS COMPANY Phone: (281) 647-1857
Address: P O BOX 2197 Fax: (281) 647-1935
City: HOUSTON State: TX Zip: 77252-2197 Email: justin.carlile@conocophillips.com
API #: 05 - 005 - 07210 - 00 Facility ID: _____ Location ID: _____
Facility Name: Tebo 4 1H
Sec: 4 Twp: 5S Range: 64W QtrQtr: SWSW Lat: 39.640256 Long: -104.565450

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**

Spud Date: 12/26/2013 Time: 18:00 (HH:MM)
Rig Name: H&P 280

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: Justin Carlile Email: justin.carlile@conocophillips.com
Signature: Justin Carlile Title: Regulatory Specialist Date: 12/24/2013