



Receive Date:  
**01/12/2014**

Document Number:  
**400538365**

**NOTICE OF NOTIFICATION**

**Entity Information**

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API #: <u>05 - 103 - 08600 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>FEDERAL J-29-3-101-S</u>	
Sec: <u>29</u> Twp: <u>3S</u> Range: <u>101W</u> QtrQtr: <u>NWSE</u>	Lat: <u>39.756681</u> Long: <u>-108.752339</u>

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 01/22/2014 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: <u>Tyson Foutz</u>	Email: <u>tyson@foutzconsulting.com</u>
Signature: <u>Tyson S. Foutz</u>	Title: <u>Consultant</u> Date: <u>01/12/2014</u>