

FORM  
42

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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

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 46290 Contact Person: Susana Lara-Mesa  
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API #: 05 - 123 - 08816 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: TOM L. RUSSELL 2  
Sec: 30 Twp: 2N Range: 67W QtrQtr: SENE Lat: 40.111534 Long: -104.926547

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 02/20/2014 Time: 09:00 (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: Susana Lara-Mesa Email: slaramesa@kpk.com  
Signature: Susana Lara-Mesa Title: Engineering Project Mgr Date: 02/10/2014