

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**02/22/2014**  
Document Number:  
**400560589**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10261 Contact Person: Jeff Schneider  
Company Name: BAYSWATER EXPLORATION AND PRODUCTION LLC Phone: (303) 893-2503  
Address: 730 17TH ST STE 610 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: jeff@schneiderenergy.com  
API #: 05 - 121 - 11041 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Craig 44-18  
Sec: 18 Twp: 4S Range: 49W QtrQtr: SESE Lat: 39.702061 Long: -102.900180

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

Spud Date: 02/25/2014 Time: 08:00 (HH:MM)  
Rig Name: Excell Rig 3

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: Jeff Schneider Email: jeff@schneiderenergy.com  
Signature: Jeff Schneider Title: Consultant Date: 02/22/2014