

FORM  
42  
Rev  
03/12

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

Receive Date:

03/25/2014

Document Number:

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 52530 Contact Person: Ryan Warner  
Company Name: MAGPIE OPERATING, INC Phone: (720) 233-0875  
Address: 2707 SOUTH COUNTY RD 11 Fax: (970) 669-6396  
City: LOVELAND State: CO Zip: 80537 Email: magpieoil@yahoo.com  
API #: 05 - 121 - 06222 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: LITTLE BEAVER UNIT 41  
Sec: 5 Twp: 2S Range: 56W QtrQtr: NWNE Lat: 39.914719 Long: -103.674050

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

Test Date: 04/03/2014 Time: 11:00 (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: Ryan Warner Email: magpieoil@yahoo.com  
Signature: Ryan Warner Title: VP Date: 03/25/2014