

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:  
**04/30/2014**

Document Number:  
**400599030**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 19160 Contact Person: Trey Sullivan  
Company Name: CONOCO PHILLIPS COMPANY Phone: (505) 320-3738  
Address: P O BOX 2197 Fax: ( )  
City: HOUSTON State: TX Zip: 77252-2197 Email: Trey.Sullivan@cop.com  
API #: 05 - 067 - 08142 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: SOUTHERN UTE 33-9 20-2  
Sec: 20 Twp: 33N Range: 9W QtrQtr: SWSE Lat: 37.085260 Long: -107.846610

**BRADENHEAD TEST – 48-hour Notice**

Test Date: 05/07/2014 Time: 11:00 (HH:MM)

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: Dollie L. Busse Email: dollie.l.busse@cop.com  
Signature: \_\_\_\_\_ Title: Staff Regulatory Tech Date: 04/30/2014