

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:

05/15/2014

Document Number:

400609055

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>100185</u>	Contact Person: <u>Kelly Hamden</u>
Company Name: <u>ENCANA OIL &amp; GAS (USA) INC</u>	Phone: <u>(720) 876-5185</u>
Address: <u>370 17TH ST STE 1700</u>	Fax: <u>(720) 876-6185</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u>	Email: <u>Kelly.Hamden@encana.com</u>

  

API #: <u>05 - 045 - 20515 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>Federal 31-5AA (PF31)</u>		
Sec: <u>31</u>	Twp: <u>7S</u>	Range: <u>95W</u> QtrQtr: <u>SENW</u>
Lat: <u>39.394831</u>	Long: <u>-108.043771</u>	

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 05/20/2014 Time: 07:00 (HH:MM) Anticipated Date of flowback: 06/17/2014

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>Kelly Hamden</u>	Email: <u>Kelly.Hamden@encana.com</u>
Signature: <u>Kelly Hamden</u>	Title: <u>Regulatory Analyst</u> Date: <u>05/15/2014</u>