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FORM 22 Rev 6/99

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109

FOR OGCC USE ONLY

Report taken by:

ACCIDENT REPORT

As required by Rule 602.b.

DESCRIPTION OF ACCIDENT (Please be as specific as possible)

Name of Operator: PDC Energy
Date of Incident: 5-13-2014
Type of Facility (well, tank battery, flow line, pit): Well
Well Name and Number: Maxey 24P-232
API Number: 05-123-37636
Connect to Accident (land owner, royalty owner, etc).:

Location

County: Weld
Field Name: Wattenberg
QtrQtr: SWSE Section: 24
Township: 5N Range: 65W
Meridian:

Provide a detailed description of the accident, problem, and cause (equipment failure, human error, etc.):

Ensign rig 14 crew was in the process of laying down BHA in preparation to run 7" intermediate casing. While breaking apart the last connection a floor hand did not let go of the hawk jaw once the motor man had it positioned on the connection. The driller began to spin, but the bottom of the hawk jaw broke loose and the unit swung around towards the flag pole where the floor hand was positioned and caught his right index finger between the handle on the hawk jaw and the flagpole resulting in an OSHA recordable injury to his finger. Verbal notification was made to COGCC on 5/22/2014.

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact Person	Response

Accident Tracking No: