

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:

**06/10/2014**

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 69175 Contact Person: Jenifer Hakkarinen  
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API #: 05 - 123 - 20910 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: WELLS RANCH 41-10  
Sec: 10 Twp: 5N Range: 63W QtrQtr: NENE Lat: 40.419420 Long: -104.416000

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

Test Date: 06/12/2014 Time: 06:00 (HH:MM) Underground Injection Control(UIC) Well? No

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: Jenifer Hakkarinen Email: JEnifer.Hakkarinen@pdce.com  
Signature: Jenifer Hakkarinen Title: REgulatory Tech Date: 06/10/2014