

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 69175 Contact Person: Jenifer Hakkarinen
Company Name: PDC ENERGY INC Phone: (303) 8605800
Address: 1775 SHERMAN STREET - STE 3000 Fax: (303) 8605838
City: DENVER State: CO Zip: 80203 Email: Jenifer.Hakkarinen@pdce.com

API #: 05 - 123 - 20368 - 00 Facility ID: _____ Location ID: _____
Facility Name: STATE 6525 31-32
Sec: 32 Twp: 6N Range: 63W QtrQtr: NWNE Lat: 40.448440 Long: -104.458530

MECHANICAL INTEGRITY TEST – 10-DAY NOTICETest Date: 06/11/2011 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