

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:

**06/18/2014**

Document Number:

**400628519**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 47120 Contact Person: Kayla Hamilton  
Company Name: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6552  
Address: P O BOX 173779 Fax: ( )  
City: DENVER State: CO Zip: 80217-3779 Email: kayla.hamilton@anadarko.com  
API #: 05 - 123 - 38678 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: AGGREGATE STATE 36N-16HZ  
Sec: 9 Twp: 2N Range: 66W QtrQtr: NESW Lat: 40.151923 Long: -104.784037

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 07/01/2014 Time: 08:00 (HH:MM) Anticipated Date of flowback: 07/04/2014

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: Kayla Hamilton Email: kayla.hamilton@anadarko.com  
Signature: \_\_\_\_\_ Title: Regulatory Specialist Date: 06/18/2014