

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

06/26/2014

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 53255 Contact Person: Jim Graves
Company Name: MARALEX RESOURCES, INC Phone: (970) 7991639
Address: P O BOX 338 Fax: (970) 8588155
City: IGNACIO State: CO Zip: 81137 Email: naomi@maralexinc.com
API #: 05 - 077 - 08684 - 00 Facility ID: _____ Location ID: _____
Facility Name: SULFUR GULCH 9-98-21 #1
Sec: 21 Twp: 9S Range: 98W QtrQtr: NENW Lat: 39.264229 Long: -108.338364

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 07/09/2014 Time: 08:00 (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: Naomi Azulai Email: naomi@maralexinc.com
Signature: naomi Title: Production Technician Date: 06/26/2014