

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:

07/01/2014

Document Number:

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>26580</u>	Contact Person: <u>Victor Kern</u>
Company Name: <u>BURLINGTON RESOURCES OIL &amp; GAS LP</u>	Phone: <u>(505) 787-6072</u>
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City: <u>FARMINGTON</u> State: <u>NM</u> Zip: <u>87499</u>	Email: <u>Victor.J.Kern@cop.com</u>
API #: <u>05 - 067 - 08350 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>ALLISON UNIT 147</u>	
Sec: <u>24</u> Twp: <u>32N</u> Range: <u>7W</u> QtrQtr: <u>SESW</u>	Lat: <u>37.002560</u> Long: <u>-107.560470</u>

**BRADENHEAD TEST – 48-hour Notice**

Test Date: 07/16/2014 Time: 10:00 (HH:MM)

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: <u>Dollie L. Busse</u>	Email: <u>dollie.l.busse@cop.com</u>
Signature: _____	Title: <u>Staff Regulatory Tech</u> Date: <u>07/01/2014</u>