

State of Colorado  
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OGCC RECEPTION

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## NOTICE OF NOTIFICATION

Entity Information

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API #: 05 - 123 - 19925 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: STATE 5519 8-34  
Sec: 8 Twp: 5N Range: 63W QtrQtr: SWSE Lat: 40.407890 Long: -104.458330

MECHANICAL INTEGRITY TEST – 10-DAY NOTICETest Date: 07/10/2014 Time: 03:00 (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: 07/08/2014