

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:

07/30/2014

Document Number:

400652837

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>19160</u>	Contact Person: <u>Wes Evans</u>
Company Name: <u>CONOCO PHILLIPS COMPANY</u>	Phone: <u>(832) 518-4196</u>
Address: <u>P O BOX 2197</u>	Fax: <u>()</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77252-2197</u>	Email: <u>DrillingRigHP280@conocophillips.com</u>
API #: <u>05 - 005 - 07221 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>State Massive 1H</u>	<input checked="" type="checkbox"/> Submit By Other Operator
Sec: <u>2</u> Twp: <u>5S</u> Range: <u>65W</u> QtrQtr: <u>SENE</u>	Lat: <u>39.649181</u> Long: <u>-104.623878</u>

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 08/02/2014 Time: 06:00 (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>Justin Carlile</u>	Email: <u>Justin.Carlile@conocophillips.com</u>
Signature: <u>Justin Carlile</u>	Title: <u>Regulatory Specialist</u> Date: <u>07/30/2014</u>