

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:
08/18/2014

Document Number:
400666176

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: Erin Lind
Company Name: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5827
Address: 370 17TH ST STE 1700 Fax: ()
City: DENVER State: CO Zip: 80202-5632 Email: erin.lind@encana.com
API #: 05 - 123 - 09758 - 00 Facility ID: _____ Location ID: _____
Facility Name: JILLSON GAS UNIT 1 Submit By Other Operator
Sec: 22 Twp: 2N Range: 68W QtrQtr: SESW Lat: 40.119618 Long: -104.992931

OFFSET MITIGATION COMPLETED

This well was mitigated per the Offset Horizontal Policy. Permitted horizontal well requiring mitigation - API # 123-38000
Appropriate documentation for mitigation has been/will be submitted.

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: Erin Lind Email: erin.lind@encana.com
Signature: _____ Title: Regulatory Analyst Date: 08/18/2014