

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:

08/22/2014

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>10112</u>	Contact Person: <u>Rachel Grant</u>
Company Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Phone: <u>(918) 526-5592</u>
Address: <u>16000 DALLAS PARKWAY #875</u>	Fax: <u>(918) 585-1660</u>
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75248-6607</u>	Email: <u>regulatory@foundationenergy.com</u>
API #: <u>05 - 001 - 07208 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>CHAMPLIN 67 AMOCO E 1</u>	<input checked="" type="checkbox"/> Submit By Other Operator
Sec: <u>17</u> Twp: <u>2S</u> Range: <u>63W</u> QtrQtr: <u>SESE</u>	Lat: <u>39.871200</u> Long: <u>-104.455120</u>

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 08/28/2014 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: <u>Rachel Grant</u>	Email: <u>rgrant@foundationenergy.com</u>
Signature: <u>Rachel Grant</u>	Title: <u>Sr. HSE/Regulatory Tech</u> Date: <u>08/22/2014</u>