

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:

**08/26/2014**

Document Number:

**400672633**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10439 Contact Person: Bob McNeese  
Company Name: CARRIZO NIOBRARA LLC Phone: (970) 373-1166  
Address: 500 DALLAS STREET #2300 Fax: ( )  
City: HOUSTON State: TX Zip: 77002 Email: Xtrtreme.19@crzo.net  
API #: 05 - 123 - 37239 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Shull 1-35-9-60 ☒ Submit By Other Operator  
Sec: 35 Twp: 9N Range: 60W QtrQtr: NENE Lat: 40.713180 Long: -104.054300

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**

Spud Date: 08/28/2014 Time: 01:00 (HH:MM)  
Rig Name: Xtreme 19

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: Bob McNeese Email: Xtrtreme.19@crzo.net  
Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: 08/26/2014