

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:

09/04/2014

Document Number:

400679290

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>8960</u>	Contact Person: <u>Bryan Brown</u>
Company Name: <u>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u>	Phone: <u>(720) 279-2330</u>
Address: <u>410 17TH STREET SUITE #1400</u>	Fax: <u>(720) 305-0804</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>bbrown@bonanzacrk.com</u>

  

API #: <u>05 - 123 - 37499 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>Pronghorn 14-11-4HNB</u>	<input checked="" type="checkbox"/> Submit By Other Operator	
Sec: <u>4</u> Twp: <u>5N</u> Range: <u>61W</u> QtrQtr: <u>SESW</u>	Lat: <u>40.423920</u>	Long: <u>-104.218610</u>

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 08/28/2014 Time: 11:00 (HH:MM) Anticipated Date of flowback: 09/04/2014

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>Hannah Larsen</u>	Email: <u>hlarsen@bonanzacrk.com</u>
Signature: _____	Title: _____ Date: <u>09/04/2014</u>