

FORM
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Rev
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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:

09/10/2014

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10507	Contact Person: Paul Gottlob
Company Name: EXPEDITION WATER SOLUTIONS LLC	Phone: (720) 420-5747
Address: 1023 39TH AVENUE SUITE E	Fax: ()
City: GREELEY State: CO Zip: 80634	Email: paul.gottlob@iptenergyservices.com
API #: 05 - 123 - 39770 - 00	Facility ID: _____ Location ID: _____
Facility Name: EWS 1	<input checked="" type="checkbox"/> Submit By Other Operator
Sec: 26 Twp: 8N Range: 60W QtrQtr: NWNW	Lat: 40.639740 Long: -104.066820

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 09/23/2014 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? Yes

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: Paul Gottlob Email: paul.gottlob@iptenergyservices.com
Signature: _____ Title: Regulatory & Engin. Tech. Date: 09/10/2014