

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:  
**09/30/2014**

Document Number:  
**400697888**

**NOTICE OF NOTIFICATION**

**Entity Information**

|  |   |
|--|---|
| OGCC Operator Number: <u>46685</u>                                 | Contact Person: <u>Andrew Antipas</u>             |
| Company Name: <u>KINDER MORGAN CO2 CO LP</u>                       | Phone: <u>(970) 882-5534</u>                      |
| Address: <u>17801 HWY 491</u>                                      | Fax: <u>(970) 882-5521</u>                        |
| City: <u>CORTEZ</u> State: <u>CO</u> Zip: <u>81321</u>             | Email: <u>andrew_antipas@kindermorgan.com</u>     |
| API #: <u>05 - 083 - 06715 - 00</u> Facility ID: _____             | Location ID: _____                                |
| Facility Name: <u>CB 3</u>   | <input type="checkbox"/> Submit By Other Operator |
| Sec: <u>11</u> Twp: <u>38N</u> Range: <u>19W</u> QtrQtr: <u>L7</u> | Lat: <u>37.568930</u> Long: <u>-108.911790</u>    |

**BLOW OUT PREVENTER TEST – 24-Hour notice**

Test Date: 10/03/2014 Time: 07:00 (HH:MM)

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>Andrew Antipas</u> | Email: <u>andrew_antipas@kindermorgan.com</u>         |
| Signature: <u>AJA</u>             | Title: <u>Project Manager</u> Date: <u>09/30/2014</u> |