

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:

10/07/2014

Document Number:

400702923

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>100322</u>	Contact Person: <u>Julie Webb</u>
Company Name: <u>NOBLE ENERGY INC</u>	Phone: <u>(720) 587-2316</u>
Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>jwebb@nobleenergyinc.com</u>

API #: <u>05 - 123 - 10545 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>MUIRHEAD 1-1</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>1</u> Twp: <u>4N</u> Range: <u>65W</u> QtrQtr: <u>SWSW</u>	Lat: <u>40.336981</u>	Long: <u>-104.617274</u>

OFFSET MITIGATION COMPLETED

This well was mitigated per the Offset Horizontal Policy. Permitted horizontal well requiring mitigation - API # 123-39893

Appropriate documentation for mitigation has been/will be submitted.

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>Julie Webb</u>	Email: <u>jwebb@nobleenergyinc.com</u>
Signature: _____	Title: <u>Regulatory Analyst</u> Date: <u>10/07/2014</u>