

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:

**10/15/2014**

Document Number:

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>96155</u>	Contact Person: <u>James Kopp</u>
Company Name: <u>WHITING OIL AND GAS CORPORATION</u>	Phone: <u>(303) 357-1410</u>
Address: <u>1700 BROADWAY STE 2300</u>	Fax: <u>(303) 390-4292</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80290</u>	Email: <u>james.kopp@whiting.com</u>
API #: <u>05 - 123 - 32491 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>Terrace 36-32M</u> <input type="checkbox"/> Submit By Other Operator	
Sec: <u>36</u> Twp: <u>10N</u> Range: <u>59W</u> QtrQtr: <u>SWNE</u>	Lat: <u>40.795280</u> Long: <u>-103.926300</u>

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 10/27/2014 Time: 07:00 (HH:MM) Underground Injection Control(UIC) Well? No

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>Elvera Berryman</u>	Email: <u>elvera.berryman@whiting.com</u>
Signature: _____	Title: <u>Engineering Technician</u> Date: <u>10/15/2014</u>