

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:

**11/10/2014**

Document Number:

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**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>10447</u>	Contact Person: <u>PAKE YOUNGER</u>
Company Name: <u>URSA OPERATING COMPANY LLC</u>	Phone: <u>(970) 260-2423</u>
Address: <u>1050 17TH STREET #2400</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80265</u>	Email: <u>PYOUNGER@URSARESOURCES.COM</u>
API #: <u>05 - 045 - 22446 - 00</u> Facility ID: <u></u>	Location ID: <u></u>
Facility Name: <u>VALLEY FARMS L 34C-11-06-92</u>	<input type="checkbox"/> Submit By Other Operator
Sec: <u>11</u> Twp: <u>6S</u> Range: <u>92W</u> QtrQtr: <u>SESE</u>	Lat: <u>39.537615</u> Long: <u>-107.629368</u>

**FORMATION INTEGRITY TEST – 24-hour notice**

Test Date: 11/12/2014 Time: 10:00 (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>JENNIFER LIND</u>	Email: <u>JLIND@URSARESOURCES.COM</u>
Signature: <u></u>	Title: <u>REGULATORY ANALYST</u> Date: <u>11/10/2014</u>