

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:

12/07/2014

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10396 Contact Person: Cheryl Rowell
Company Name: SOUTHWESTERN ENERGY PRODUCTION COMPANY Phone: (281) 618-7439
Address: 2350 N SAM HOUSTON PKWY EAST #125 Fax: ()
City: HOUSTON State: TX Zip: 77032 Email: cheryl_rowell@swn.com
API #: 05 - 081 - 07804 - 00 Facility ID: _____ Location ID: _____
Facility Name: DIAMOND T SHEEP 7-92 1-26 ☐ Submit By Other Operator
Sec: 26 Twp: 7N Range: 92W QtrQtr: NWNW Lat: 40.534283 Long: -107.693039

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 12/10/2014 Time: 06:00 (HH:MM) Anticipated Date of flowback: 12/11/2014

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: Cheryl Rowell Email: cheryl_rowell@swn.com
Signature: _____ Title: Sr. Staff Reg. Analyst Date: 12/07/2014