

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:
01/16/2015

Document Number:
400773120

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10485 Contact Person: Arthur Beecherl
Company Name: VERDAD OIL & GAS CORPORATION Phone: (214) 7281840
Address: 5950 CEDAR SPRINGS RD #200 Fax: (214) 3579358
City: DALLAS State: TX Zip: 75235 Email: abeecherl@verdadoil.com

API #: 05 - 123 - 40319 - 00 Facility ID: _____ Location ID: _____
Facility Name: Pastelak 01N-64W-02-3N Submit By Other Operator
Sec: 2 Twp: 1N Range: 64W QtrQtr: NWNW Lat: 40.087060 Long: -104.523200

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 01/18/2015 Time: 03:00 (HH:MM) Anticipated Date of flowback: 01/23/2015

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: Arthur Beecherl Email: abeecherl@verdadoil.com
Signature: L. Arthur Beecherl, IV Title: VP of Operations Date: 01/16/2015