

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:

400773161

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 16700

Contact Person: DIANE PETERSON

Company Name: CHEVRON USA INC

Phone: (970) 675-3842

Address: 6001 BOLLINGER CANYON RD

Fax: (970) 675-3800

City: SAN RAMON State: CA Zip: 94583

Email: DLPE@CHEVRON.COM

API #: 05 - 103 - 01030 - 00

Facility ID: _____

Location ID: _____

Facility Name: LEVISON 8

☐ Submit By Other Operator

Sec: 26 Twp: 2N Range: 102W QtrQtr: NESW

Lat: 40.112124 Long: -108.812536

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 01/26/2015 Time: 10:00 (HH:MM) Underground Injection Control(UIC) Well? Yes

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: DIANE PETERSON

Email: DLPE@CHEVRON.COM

Signature: _____

Title: PERMITTING SPECIALIST

Date: 01/16/2015