

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:

02/06/2015

Document Number:

400780382

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 51090 Contact Person: Nettie Reed
Company Name: LONE MOUNTAIN PRODUCTION COMPANY Phone: (970) 8587546
Address: P O BOX 80965 Fax: (970) 8584163
City: BILLINGS State: MT Zip: 59108-0965 Email: nreed6@yahoo.com
API #: 05 - 077 - 05002 - 00 Facility ID: _____ Location ID: _____
Facility Name: BAR X UNIT 2 Submit By Other Operator
Sec: 31 Twp: 8S Range: 104W QtrQtr: NENE Lat: 39.330210 Long: -109.024060

START OF PLUGGING OPERATIONS - 48-hour notice required

Date: 02/09/2015 Time: 8:00 (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: Nettie Reed Email: nreed6@yahoo.com
Signature: _____ Title: Vice President Date: 02/06/2015