

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:

02/17/2015

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>10396</u>	Contact Person: <u>Desiree Arrambide</u>
Company Name: <u>SWN PRODUCTION COMPANY LLC</u>	Phone: <u>(281) 543-1041</u>
Address: <u>PO BOX 12359</u>	Fax: <u>()</u>
City: <u>SPRING</u> State: <u>TX</u> Zip: <u>77391</u>	Email: <u>desiree_arambide@swn.com</u>
API #: <u>05 - 001 - 09804 - 00</u> Facility ID: _____ Location ID: _____	
Facility Name: <u>LINNEBUR FLYING SERVICE 3-61 1-30</u> <input type="checkbox"/> Submit By Other Operator	
Sec: <u>30</u> Twp: <u>3S</u> Range: <u>61W</u> QtrQtr: <u>SWNE</u>	Lat: <u>39.761280</u> Long: <u>-104.255090</u>

START OF PLUGGING OPERATIONS - 48-hour notice required

Date: 02/18/2015 Time: 9:00 (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>Desiree Arrambide</u>	Email: <u>desiree_arambide@swn.com</u>
Signature: <u>Desiree Arrambide</u>	Title: <u>Regulatory Analyst</u> Date: <u>02/17/2015</u>