

FORM
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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:

03/25/2015

Document Number:

400814533

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10000 Contact Person: Toya Colvin
Company Name: BP AMERICA PRODUCTION COMPANY Phone: (281) 366-7148
Address: 501 WESTLAKE PARK BLVD Fax: ()
City: HOUSTON State: TX Zip: 77079 Email: Toya.Colvin@bp.com

API #: 05 - 067 - 07610 - 00 Facility ID: _____ Location ID: _____
Facility Name: FC ARMSTRONG 001 1 Submit By Other Operator
Sec: 10 Twp: 33N Range: 9W QtrQtr: SESE Lat: 37.114651 Long: -107.808541

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 04/01/2015 Time: 06:00 (HH:MM) Anticipated Date of flowback: 05/01/2015

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: Toya Colvin Email: Toya.Colvin@bp.com
Signature: _____ Title: Regulatory Analyst Date: 03/25/2015