

FORM

42

Rev
03/15State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

01/22/2019

Document Number:

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FIELD OPERATIONS NOTICE

The Form 42 shall be submitted as required by Rule, Notice to Operators, Policy, or Condition of Approval.
A Form 42 Update shall be submitted to revise the scheduled date or time on a previous Form 42 - Advance Notice of Field Operations.
A Form 42 Update must be for the same well, location, or facility and for the same Field Operation as a previous Form 42.
NOTE: Operator's Contact for Advance Notices of Field Operations should be available 24 hours a day, 7 days a week and should have the most current scheduling information for the operation. Operator's Contact for other notices should be able to respond to questions regarding the reported information.

Update of a previous Form 42 Notice NO

Entity Information

OGCC Operator Number: <u>10447</u>	Contact Person: <u>PAKE YOUNGER</u>
Company Name: <u>URSA OPERATING COMPANY LLC</u>	Phone: <u>(970) 260-2423</u>
Address: <u>1600 BROADWAY ST STE 2600</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>pyounger@ursaresources.com</u>

API #: <u>05 - 103 - 12307 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>BOIES RANCH B-19N FED 23A-19-2-97</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>19</u> Twp: <u>2S</u> Range: <u>97W</u> QtrQtr: <u>SESW</u>	Lat: <u>39.857538</u>	Long: <u>-108.328240</u>

NOTICE OF HIGH BRADENHEAD PRESSURE DURING STIMULATION – Notify within 24 hours when bradenhead pressure increases more than 200 psig during stimulation. This satisfies Rule 341 verbal notification requirements. Submit a follow-up Form 4 within 15 days.

Date of High Bradenhead Pressure: <u>01/20/2019</u>	Time: <u>13:31</u> (HH:MM)	
Starting BrHd pressure: <u>8</u> psig	Highest BrHd pressure: <u>958</u> psig	Was this well being stimulated? <input checked="" type="checkbox"/>

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct and complete.

Print Name: <u>CARI MASCIOLI</u>	Email: <u>cmascioli@ursaresources.com</u>
Signature: _____	Title: <u>REGULATORY ANALYST</u> Date: <u>01/22/2019</u>