

**FORM****42**Rev  
01/20**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:

**02/12/2020**

Document Number:

**402310605****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>47120</u>	Contact Person: <u>AARON SENN</u>
Company Name: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u>	Phone: <u>(970) 5902535</u>
Address: <u>P O BOX 173779</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: <u>aaron_senn@oxy.com</u>

API #: <u>05 - 123 - 21896 - 00</u>	Facility ID: _____	Location ID: _____
Facility Name: <u>ZABKA 11-15</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>15</u> Twp: <u>4N</u> Range: <u>67W</u> QtrQtr: <u>NESW</u>	Lat: <u>40.310708</u>	Long: <u>-104.879325</u>

**RETURN TO SERVICE - 48-hour notice**

Check the appropriate Box Below.

Well☒ The well will be returned to production on this date: 02/21/2020 [See Rules 326.b.(4) and 326.c.(4)]

OR

☐ The well will be returned to injection on this date: \_\_\_\_\_ [See Rules 326.b.(4) and 326.c.(4)]

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

Print Name: Martha Meyer Email: DJFlowlinePT\_RTPSubmittals@oxy.comSignature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: 02/12/2020