

State of Colorado
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

ECMC RECEPTION

Receive Date:

02/20/2025

Document Number:

404092365

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 NOEntity Information

ECMC Operator Number: <u>10459</u>	Contact Person: <u>Randy Fletcher</u>
Company Name: <u>EXTRACTION OIL & GAS INC</u>	Phone: <u>(307) 277-4434</u>
Address: <u>555 17TH STREET SUITE 3700</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>rfletcher@civiresources.com</u>

API #: <u>05 - 123 - 52585 - 00</u>	Facility ID: <u>486847</u>	Location ID: <u>486004</u>
Facility Name: <u>Maverick 2W-20-02</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>36</u> Twp: <u>7N</u> Range: <u>67W</u> QtrQtr: <u>NWSE</u>	Lat: <u>40.529910</u>	Long: <u>-104.839693</u>

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice requiredDate of Treatment: 02/22/2025Time: 10:00 (HH:MM)Anticipated Date of Flowback: 03/10/2025Is the Hydraulic Fracturing Treatment of this Well anticipated to last for longer than one day? Yes

If YES, describe the anticipated duration of these operations:

Frac for the wells in this zipper group is estimated to last approximately 10 days.

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

Print Name: Elaine WinickEmail: ewinick@civiresources.com

Signature: _____

Title: Completions TechDate: 02/20/2025