

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:

05/27/2014

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 47120 Contact Person: Kenny Trueax
Company Name: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6383
Address: P O BOX 173779 Fax: ()
City: DENVER State: CO Zip: 80217-3779 Email: RSCDJPOSTDRILL@ANADARKO.COM
API #: 05 - 123 - 24507 - 00 Facility ID: _____ Location ID: _____
Facility Name: BURCHFIELD STATE 33-16
Sec: 16 Twp: 3N Range: 67W QtrQtr: NWSW Lat: 40.223669 Long: -104.901842

OTHER – AS SPECIFIED BY PERMIT CONDITION add (2/2A)

Describe Permit Condition: Flood well return to production

Date: 05/29/2014 Time: 13:30 (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: Kenny Trueax Email: kenny.trueax@anadarko.com
Signature: _____ Title: Sr. Regulatory Analyst Date: 05/27/2014