

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:
10/06/2014

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 53255 Contact Person: Naomi Azulai
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Address: P O BOX 338 Fax: (970) 5634116
City: IGNACIO State: CO Zip: 81137 Email: naomi@maralexinc.com
API #: 05 - 067 - 08800 - 00 Facility ID: _____ Location ID: _____
Facility Name: MOLLIE CORYNNE 33-7-2 2A Submit By Other Operator
Sec: 2 Twp: 33N Range: 7W QtrQtr: NENE Lat: 37.137080 Long: -107.571480

BRADENHEAD TEST – 48-hour Notice

Test Date: 11/13/2014 Time: 08:00 (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: Naomi Azulai Email: naomi@maralexinc.com
Signature: naomi Title: Production Technician Date: 10/06/2014