

FORM
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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:
08/10/2012
Document Number:
400314673

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 100185 Contact Person: JOE KAUFFMANN
Company Name: ENCANA OIL & GAS (USA) INC Phone: (303) 774-3959
Address: 370 17TH ST STE 1700 Fax: ()
City: DENVER State: CO Zip: 80202-5632 Email: JOE.KAUFFMANN@ENCANA.COM
API #: 05 - 123 - 35476 - 00 Facility ID: _____ Location ID: _____
Facility Name: CHAVEZ 4A-4H
Sec: 4 Twp: 1N Range: 65W QtrQtr: SWSE Lat: 40.073960 Long: -104.664930

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 08/14/2012 Time: 07:00 (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: JENNFER LIND Email: JENNIFER.LIND@ENCANA.COM
Signature: _____ Title: REGULATORY ANALYST Date: 08/10/2012