

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:  
**09/09/2014**

Document Number:  
**400681960**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 10459 Contact Person: Jesse Silva  
Company Name: EXTRACTION OIL & GAS LLC Phone: (970) 396-0421  
Address: 1888 SHERMAN ST #200 Fax: ( )  
City: DENVER State: CO Zip: 80203 Email: jsilva@extractionog.com

API #: 05 - 123 - 36172 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: RAINDANCE 3  Submit By Other Operator  
Sec: 30 Twp: 6N Range: 67W QtrQtr: SESE Lat: 40.451250 Long: -104.928010

**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**

Date of Treatment: 09/11/2014 Time: 09:00 (HH:MM) Anticipated Date of flowback: 10/11/2014

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: Janni Keidel Email: jkeidel@extractionog.com  
Signature: Janni Keidel Title: Sr. Regulatory Specialist Date: 09/09/2014