

**FORM****42**Rev  
03/15**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:

**06/29/2015**

Document Number:

**400860332****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 NO**Entity Information**OGCC Operator Number: 10447Contact Person: PAKE YOUNGERCompany Name: URSA OPERATING COMPANY LLCPhone: (970) 260-2423Address: 602 SAWYER STREET #710Fax: ( )City: HOUSTON State: TX Zip: 77007Email: PYOUNGER@URSARESOURCES.COMAPI #: 05 - 045 - 22838 - 00

Facility ID: \_\_\_\_\_

Location ID: \_\_\_\_\_

Facility Name: BAT 24D-18-07-95☐ Submit By Other OperatorSec: 18 Twp: 7S Range: 95W QtrQtr: SESELat: 39.431071 Long: -108.033241**NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required**Date of Treatment: 07/06/2015 Time: 08:00 (HH:MM) Anticipated Date of Flowback: 07/11/2015**FOR GAS WELLS ONLY:**

- ☒ This well is a Gas Well, anticipated to have a Gas-to-Oil Ratio (GOR) equal to or greater than 15,000 scf/bbl.
- ☒ This Form 42 is submitted to satisfy notification requirements under NSPS OOOO, 40 C.F.R. Part 60, &60.5420(a)(2)(i).

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

Print Name: JENNIFER LINDEmail: JLIND@URSARESOURCES.COM

Signature: \_\_\_\_\_

Title: REGULATORY ANALYSTDate: 06/29/2015