

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:

05/31/2012

Document Number:

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NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: Kyle Kohl
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 623-8907
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: kyle.kohl@wpxenergy.com
API #: 05 - 045 - 20984 - 00 Facility ID: _____ Location ID: _____
Facility Name: Jolley KP 524-8
Sec: 8 Twp: 6S Range: 91W QtrQtr: SESW Lat: 39.535509 Long: -107.579789

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 06/04/2012 Time: 00:00 (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: Kyle Kohl Email: kyle.kohl@wpxenergy.com
Signature: _____ Title: Completions Supervisor Date: 05/31/2012