

FORM
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Rev
03/12



OGCC RECEPTION
Receive Date:
06/21/2012
Document Number:
400298342

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96155 Contact Person: Scott Webb
Company Name: WHITING OIL AND GAS CORPORATION Phone: (303) 837-1661
Address: 1700 BROADWAY STE 2300 Fax: (303) 390-5590
City: DENVER State: CO Zip: 80290 Email: scottw@whiting.com
API #: 05 - 103 - 11931 - 00 Facility ID: _____ Location ID: _____
Facility Name: WRD 23-33-R
Sec: 33 Twp: 2N Range: 97W QtrQtr: NESW Lat: 40.096553 Long: -108.284869

BLOW OUT PREVENTER TEST – 24-Hour notice
Test Date: 06/23/2012 Time: 12:00 (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: Scott M. Webb Email: scottw@whitng.com
Signature: _____ Title: Reg & Pemritting Manager Date: 06/21/2012