

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**12/02/2012**  
Document Number:  
**400352810**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>96850</u>	Contact Person: <u>frank moore</u>
Company Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Phone: <u>(970) 985-8976</u>
Address: <u>1001 17TH STREET - SUITE #1200</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>frank.moore@wpxenergy.com</u>
API #: <u>05 - 045 - 21715 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>WPX Energy GM 41-12</u>	
Sec: <u>1</u> Twp: <u>7S</u> Range: <u>96W</u> QtrQtr: <u>SESE</u>	Lat: <u>39.461506</u> Long: <u>-108.051729</u>

**BLOW OUT PREVENTER TEST – 24-Hour notice**

Test Date: 12/03/2012 Time: 04:00 (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: frank moore Email: frank.moore@wpxenergy.com

Signature: frank moore Title: consulting Date: 12/02/2012