

FORM
42
Rev
03/12



OGCC RECEPTION
Receive Date:
12/16/2012
Document Number:
400358776

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: wc wilson
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 618-6433
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: wcwilson@wpxenergy.com
API #: 05 - 045 - 20059 - 00 Facility ID: _____ Location ID: _____
Facility Name: Savage PA 443-5
Sec: 4 Twp: 7S Range: 95W QtrQtr: NESW Lat: 39.463448 Long: -108.006885

FORMATION INTEGRITY TEST – 24-hour notice

Test Date: 12/18/2012 Time: 06:00 (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: wc wilson Email: wcwilson@wpxenergy.com
Signature: _____ Title: coman Date: 12/16/2012