

FORM  
42  
Rev  
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OGCC RECEPTION  
Receive Date:  
**02/17/2013**  
Document Number:  
**400382428**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 96850 Contact Person: al hartl  
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 618-9987  
Address: 1001 17TH STREET - SUITE #1200 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: al.hartl@wpxenergy.com  
API #: 05 - 045 - 21481 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Hoeppli RWF 423-36  
Sec: 36 Twp: 6S Range: 94W QtrQtr: SENW Lat: 39.482348 Long: -107.836610

FORMATION INTEGRITY TEST – 24-hour notice  
Test Date: 02/17/2013 Time: 23:59 (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: al hartl Email: al.hartl@wpxenergy.com  
Signature: al hartl Title: co rep Date: 02/17/2013