

FORM
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03/12



OGCC RECEPTION
Receive Date:
03/10/2013
Document Number:
400389514

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 - 18251 - 00 Facility ID: _____ Location ID: _____
Facility Name: Youberg RWF 443-23
Sec: 23 Twp: 6S Range: 94W QtrQtr: NWSE Lat: 39.507519 Long: -107.854382

FORMATION INTEGRITY TEST – 24-hour notice

Test Date: 03/10/2013 Time: 18:30 (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: 03/10/2013