

FORM
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OGCC RECEPTION
Receive Date:
10/03/2013
Document Number:
400490195

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: Gary Vallad
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 379 1061
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: Gary.Vallad@wpxenergy.com
API #: 05 - 045 - 22088 - 00 Facility ID: _____ Location ID: _____
Facility Name: WPX Energy RWF 42-4
Sec: 4 Twp: 7S Range: 94W QtrQtr: LOT 2 Lat: 39.473333 Long: -107.888923

BLOW OUT PREVENTER TEST – 24-Hour notice
Test Date: 10/05/2013 Time: 03:00 (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: Gary Vallad Email: Gary.Vallad@wpxenergy.com
Signature: Gary Vallad Title: Consultant Date: 10/03/2013