

FORM  
42  
Rev  
03/12



OGCC RECEPTION

Receive Date:  
**10/19/2013**

Document Number:  
**400498790**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 96850 Contact Person: Harry Samson  
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 216-6482  
Address: 1001 17TH STREET - SUITE #1200 Fax: ( )  
City: DENVER State: CO Zip: 80202 Email: harry.samson@wpxenergy.com  
API #: 05 - 045 - 21843 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Savage RWF 11-35  
Sec: 35 Twp: 6S Range: 94W QtrQtr: NWNW Lat: 39.485880 Long: -107.860600

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

Test Date: 10/19/2013 Time: 14:00 (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: Harry Samson Email: harry.samson@wpxenergy.com  
Signature: Harry Samson Title: consultant Date: 10/19/2013