

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**01/27/2014**  
Document Number:  
**400545680**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>96850</u>	Contact Person: <u>al hartl</u>
Company Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Phone: <u>(970) 618-9987</u>
Address: <u>1001 17TH STREET - SUITE #1200</u>	Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>ralph.hartl@wpxenergy.com</u>
API #: <u>05 - 045 - 21777 - 00</u>	Facility ID: _____ Location ID: _____
Facility Name: <u>Federal RU 21-5</u>	
Sec: <u>5</u> Twp: <u>7S</u> Range: <u>93W</u> QtrQtr: <u>Lot 2</u>	Lat: <u>39.474811</u> Long: <u>-107.798825</u>

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

Test Date: 01/28/2014 Time: 19:00 (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: <u>al hartl</u>	Email: <u>ralph.hartl@wpxenergy.com</u>
Signature: <u>al hartl</u>	Title: <u>co rep</u> Date: <u>01/27/2014</u>