

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

09/28/2014

Document Number:

400696826

NOTICE OF NOTIFICATION

Entity Information

| | |
|--|--|
| OGCC Operator Number: <u>96850</u> | Contact Person: <u>Tom Bowen</u> |
| Company Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u> | Phone: <u>(970) 778-2201</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>Thomas.bowen@wpxenergy.com</u> |

| | | |
|---|---|--------------------------|
| API #: <u>05 - 103 - 12120 - 00</u> | Facility ID: _____ | Location ID: _____ |
| Facility Name: <u>FEDERAL RG 713-29-298</u> | <input type="checkbox"/> Submit By Other Operator | |
| Sec: <u>29</u> Twp: <u>2S</u> Range: <u>98W</u> QtrQtr: <u>LOT 14</u> | Lat: <u>39.842896</u> | Long: <u>-108.420753</u> |

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 09/29/2014 Time: 07:15 (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>Tom Bowen</u> | Email: <u>Thomas.bowen@wpxenergy.com</u> |
| Signature: <u>Tom Bowen</u> | Title: <u>WPX Drilling Consultant</u> Date: <u>09/28/2014</u> |