

FORM
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OGCC RECEPTION
Receive Date:
08/08/2012
Document Number:
400313750

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: Kent Hejl
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 263-2715
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: kent.hejl@wpxenergy.com

API #: 05 - 045 - 19847 - 00 Facility ID: _____ Location ID: _____
Facility Name: Savage RWF 434-27
Sec: 27 Twp: 6S Range: 94W QtrQtr: SWSE Lat: 39.490179 Long: -107.872537

NOTICE OF HYDRAULIC FRACTURING TREATMENT – 48-hour notice required

Date of Treatment: 08/11/2012 Time: 00:00 (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: Kent Hejl Email: kent.hejl@wpxenergy.com
Signature: _____ Title: Completion Manager Date: 08/08/2012