

FORM  
42  
Rev  
03/12



OGCC RECEPTION  
Receive Date:  
**04/29/2013**  
Document Number:  
**400410681**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 96155 Contact Person: Vallen Brock  
Company Name: WHITING OIL AND GAS CORPORATION Phone: (303) 837-1661 x 1678  
Address: 1700 BROADWAY STE 2300 Fax: ( )  
City: DENVER State: CO Zip: 80290 Email: vallen.brock@whiting.com  
API #: 05 - 123 - 34896 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: Wildhorse 04-0424H  
Sec: 4 Twp: 9N Range: 59W QtrQtr: Lot 3 Lat: 40.786014 Long: -103.985531

NOTICE OF SPUD – 48-hour notice required **Surface Hole Spud ONLY**

Spud Date: 05/01/2013 Time: 13:00 (HH:MM)  
Rig Name: Cade 21

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: Vallen Brock Email: vallen.brock@whiting.com  
Signature: Vallen Brock Title: Regulatory Analyst Date: 04/29/2013