

FORM
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OGCC RECEPTION
Receive Date:
05/05/2013
Document Number:
400413909

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: Ron Towers
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 261-5648
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: ron.towers@wpxenergy.com
API #: 05 - 045 - 21660 - 00 Facility ID: _____ Location ID: _____
Facility Name: DUggan RWF 524-29
Sec: 29 Twp: 6S Range: 94W QtrQtr: Lot 5 Lat: 39.490115 Long: -107.918611

BLOW OUT PREVENTER TEST – 24-Hour notice
Test Date: 05/05/2013 Time: 18:00 (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: Ron Towers Email: ron.towers@wpxenergy.com
Signature: Ron Towers Title: consultant Date: 05/05/2013