

FORM
42
Rev
03/12



OGCC RECEPTION
Receive Date:
07/04/2013
Document Number:
400443499

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: al hartl
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (970) 618-9987
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: ralph.hartl@wpxenergy.com
API #: 05 - 045 - 21555 - 00 Facility ID: _____ Location ID: _____
Facility Name: Hoepli RWF 444-36
Sec: 36 Twp: 6S Range: 94W QtrQtr: SWNE Lat: 39.482273 Long: -107.835967

BLOW OUT PREVENTER TEST – 24-Hour notice
Test Date: 07/06/2013 Time: 00:01 (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: al hartl Email: ralph.hartl@wpxenergy.com
Signature: al hartl Title: co rep Date: 07/04/2013