

FORM
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Rev
03/12



OGCC RECEPTION

Receive Date:
03/21/2014

Document Number:
400576911

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 - 22125 - 00 Facility ID: _____ Location ID: _____
Facility Name: BOSELY SG 314-22
Sec: 22 Twp: 7S Range: 96W QtrQtr: Lot 11 Lat: 39.417533 Long: -108.100258

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 03/23/2014 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: 03/21/2014