

FORM
42
Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:
11/23/2014

Document Number:
400738942

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 96850 Contact Person: Beaude Oaks
Company Name: WPX ENERGY ROCKY MOUNTAIN LLC Phone: (435) 828-8793
Address: 1001 17TH STREET - SUITE #1200 Fax: ()
City: DENVER State: CO Zip: 80202 Email: beaude.oaks@wpxenergy.com
API #: 05 - 045 - 22470 - 00 Facility ID: _____ Location ID: _____
Facility Name: GM 32-12 Submit By Other Operator
Sec: 12 Twp: 7S Range: 96W QtrQtr: NENW Lat: 39.456433 Long: -108.061467

BLOW OUT PREVENTER TEST – 24-Hour notice

Test Date: 11/24/2014 Time: 22:00 (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: Beaude Oaks Email: beaude.oaks@wpxenergy.com
Signature: Beaude D. Oaks Title: Consultant Date: 11/23/2014