## LOWRIE WILLIAM G Form 3 December 12, 2011 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address<br>Person <u>*</u><br>LOWRIE WII   | •                  | U                         | 2. Date of Ever<br>Statement<br>(Month/Day/Ye                       |  | 3. Issuer Name <b>and</b> Ticker or Trading Symbol WPX ENERGY, INC. [WPX] |  |                            |   |  |  |
|--|--------------------|---------------------------|---|--|---|--|----------------------------|---|--|--|
| (Last) (Fin  |                    | (Middle)                  | 12/11/2011  |  | 4. Relationship of Reporting<br>Person(s) to Issuer                       |  |                            | 5. If Amendment, Date Original<br>Filed(Month/Day/Year)   |  |  |
| ONE WILLIAM<br><sup>(Str</sup><br>TULSA, OKÂ   | reet)              | ER                        |   |  | (Check a<br>X Director<br>Officer<br>(give title below                    | all applicable)<br>10% (<br>Other<br>) (specify belo                       |                            | 6. Individual or Joint/Group<br>Filing(Check Applicable Line)<br>_X_ Form filed by One Reporting<br>Person<br>Form filed by More than One<br>Reporting Person |  |  |
| (City) (Sta  | ate)               | (Zip)                     | r   | Table I - N                                  | on-Derivati   | ve Securiti  | es Bei                     | neficially Owned  |  |  |
| 1.Title of Security<br>(Instr. 4)  |                    |                           |   | 2. Amount of<br>Beneficially (<br>(Instr. 4) |   | 3.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 5) | 4. Nat<br>Owner<br>(Instr. | 1   |  |  |
| Common Stock   |                    |                           |   | 0  |   | D  | Â                          |   |  |  |
| Reminder: Report on owned directly or ind  | -                  | e line for ead            | ch class of secur   | rities beneficia                             | ally SE   | EC 1473 (7-02)   | )                          |   |  |  |
|  | informa<br>require | tion conta<br>d to respoi | oond to the co<br>ined in this fo<br>nd unless the<br>IB control nu | orm are not<br>form displa                   | iys a   |  |                            |   |  |  |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                    |                           |   |  |   |  |                            |   |  |  |

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

## Edgar Filing: LOWRIE WILLIAM G - Form 3

Shares

(I) (Instr. 5)

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                                   | Relationships |                    |   |       |  |  |  |  |  |  |  |
|---|---------------|--------------------|---|-------|--|--|--|--|--|--|--|
| 1 0   | Director      | Director 10% Owner |   | Other |  |  |  |  |  |  |  |
| LOWRIE WILLIAM G<br>ONE WILLIAMS CENTER<br>TULSA, OK 74172              | ÂX            | Â                  | Â | Â     |  |  |  |  |  |  |  |
| Signatures  |               |                    |   |       |  |  |  |  |  |  |  |
| Stephen Brilz, Attorney-in-Fact for Mr. William G.<br>Lowrie 12/12/2011 |               |                    |   |       |  |  |  |  |  |  |  |
| <u>**</u> Signature of Reporti  | Date          |                    |   |       |  |  |  |  |  |  |  |
| Explanation of Responses:   |               |                    |   |       |  |  |  |  |  |  |  |

\* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays

a currently valid OMB number.