



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

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

RECEIVED JAN 19 2011 OGCC/Rifle Office

1. OGCC Operator Number: 66571 2. Name of Operator: OXY USA WTP LP, Attn: Glenda Jones 3. Address: P.O. Box 27757 City: Houston State: TX Zip: 77227-7757 4. Contact Name: Joan Proulx Phone: 970-263-3641 Fax: 970-263-3694 5. API Number: 05-045-20056-00 OGCC Facility ID Number: 6. Well/Facility Name: Cascade Creek 7. Well/Facility Number: 697-08-49 8. Location (Qtr/Sec, Twp, Rng, Meridian): NWSE 8 6S 97W 6 PM 9. County: Garfield 10. Field Name: Grand Valley 11. Federal, Indian or State Lease Number: N/A

General Notice

CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit) Change of Surface Footage from Exterior Section Lines: Change of Surface Footage to Exterior Section Lines: Change of Bottomhole Footage from Exterior Section Lines: Change of Bottomhole Footage to Exterior Section Lines: GPS DATA: CHANGE SPACING UNIT: CHANGE OF OPERATOR (prior to drilling): CHANGE WELL NAME: ABANDONED LOCATION: NOTICE OF CONTINUED SHUT IN STATUS: SPUD DATE: REQUEST FOR CONFIDENTIAL STATUS: SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK: RECLAMATION:

Technical Engineering/Environmental Notice

X Notice of Intent Approximate Start Date: 05/01/2011 Report of Work Done Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.) Intent to Recomplete (submit form 2) Change Drilling Plans Gross Interval Changed? Casing/Cementing Program Change Request to Vent or Flare Repair Well Rule 502 variance requested Other: E&P Waste Disposal Beneficial Reuse of E&P Waste Status Update/Change of Remediation Plans for Spills and Releases

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete. Signed: Joan Proulx Date: 01/19/2011 Email: joan\_proulx@oxy.com Title: Regulatory Analyst

OGCC Approved: [Signature] Title: EIT-3 Date: 1/21/11 CONDITIONS OF APPROVAL, IF ANY:

FORM  
4  
Rev 12/05

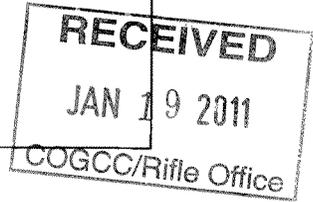
Page 2

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number: <u>66571</u>	API Number: <u>05-045-20056-00</u>
2. Name of Operator: <u>OXY USA WTP LP</u>	OGCC Facility ID # _____
3. Well/Facility Name: <u>Cascade Creek</u>	Well/Facility Number: <u>697-08-49</u>
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): _____	<u>NWSE 8 6S 97W 6 PM</u>



This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

The Cascade Creek 697-08-49 well was originally permitted to an MD of 9192'.  
The new MD will be 9350'.  
There will be no change to the objective formations due to the increase in MD.