

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.)

1. OGCC Operator Number: 86571
2. Name of Operator: OXY USA WTP LP, Attn: Glenda Jones
3. Address: P.O. Box 27757, Houston, TX 77227-7757
4. Contact Name: Joan Proulx
5. API Number: 05-045-20079-00
6. Well/Facility Name: Cascade Creek
7. Well/Facility Number: 697-08-52A
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

Complete the Attachment Checklist OP OGCC

General Notice

CHANGE OF LOCATION: Attach New Survey Plat
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
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

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
Print Name: Joan Proulx Title: Regulatory Analyst

OGCC Approved: [Signature] Title: EIT 3 Date: 1/24/11

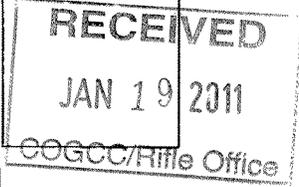
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

1. OGCC Operator Number:	66571	API Number:	05-045-20079-00
2. Name of Operator:	OXY USA WTP LP	OGCC Facility ID #	
3. Well/Facility Name:	Cascade Creek	Well/Facility Number:	697-08-52A
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	NWSE 8 6S 97W 6 PM		



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 697-08-52A well was originally permitted to an MD of 8846'.  
The new MD will be 9050'.  
There will be no change to the objective formations due to the increase in MD.