

State of Colorado Oil and Gas Conservation Commission

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



RECEIVED DEC 27 2011 COGCC

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: 66571 4. Contact Name: Joan Proulx
2. Name of Operator: OXY USA WTP LP, Attn: Glenda Jones
3. Address: P.O. Box 27757 Phone: 970-263-3641
City: Houston State: TX Zip: 77227-7757 Fax: 970-263-3694
5. API Number: 05-045-20713-00 OGCC Facility ID Number:
6. Well/Facility Name: Cascade Creek 7. Well/Facility Number: 697-04-68
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): NWSW 4 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

Table with 2 columns: Survey Plat, Directional Survey, Surface Eqm't Diagram, Technical Info Page, Other. Technical Info Page is checked (X).

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:
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer:
Latitude: Distance to nearest property line: Distance to nearest bldg, public rd, utility or RR:
Longitude: Distance to nearest lease line: Is location in a High Density Area (rule 603b)? Yes/No:
Ground Elevation: Distance to nearest well same formation: Surface owner consultation date:

GPS DATA: Date of Measurement: PDOP Reading: Instrument Operator's Name:

CHANGE SPACING UNIT: Formation: Formation Code: Spacing order number: Unit Acreage: Unit configuration:
Remove from surface bond: Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling): Effective Date: Plugging Bond: Blanket Individual:
CHANGE WELL NAME: From: To: Effective Date: NUMBER

ABANDONED LOCATION: Was location ever built? Yes No: Is site ready for inspection? Yes No: Date Ready for Inspection:
NOTICE OF CONTINUED SHUT IN STATUS: Date well shut in or temporarily abandoned: Has Production Equipment been removed from site? Yes No: MIT required if shut in longer than two years. Date of last MIT:

SPUD DATE: REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK: Method used: Cementing tool setting/perf depth: Cement volume: Cement top: Cement bottom: Date:
\*submit cbl and cement job summaries

RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004. Final reclamation will commence on approximately: Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

Notice of Intent: Approximate Start Date: 12/30/2011
Report of Work Done: Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

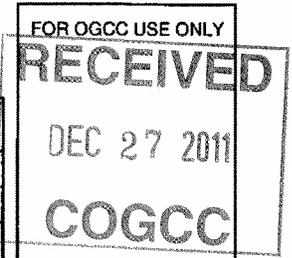
Intent to Recomplete (submit form 2): Request to Vent or Flare: E&P Waste Disposal:
Change Drilling Plans: Repair Well: Beneficial Reuse of E&P Waste:
Gross Interval Changed?: Rule 502 variance requested: Status Update/Change of Remediation Plans:
Casing/Cementing Program Change: Other: for Spills and 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: 12/27/2011 Email: joan\_proulx@oxy.com
Print Name: Joan Proulx Title: Regulatory Analyst

COGCC Approved: [Signature] Title: NWA ENGINEER Date: 12/29/11
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



1. OGCC Operator Number: <u>66571</u>	API Number: <u>05-045-20713-00</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>697-04-68</u>
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	<u>NWSW 4 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**

Due to restrictions and issues encountered while drilling the surface casing on wells located on the 697-04D pad, Oxy is proposing to change the surface casing depth on the remaining wells to 2,400'.

The 697-04-68 well has an approved APD which indicates a proposed surface casing depth of 2,690'.

This plan was approved by David Andrews via email on 12/24/2011.