

FORM
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Rev
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OGCC RECEPTION
Receive Date:
05/22/2012
Document Number:
400287688

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: <u>66571</u>	Contact Person: <u>Darryle Clark</u>
Company Name: <u>OXY USA WTP LP</u>	Phone: <u>(970) 812-0018</u>
Address: <u>P O BOX 27757</u>	Fax: <u>()</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77227</u>	Email: <u>gjrig01@oxy.com</u>
API #: <u>05 - 045 - 21280 - 00</u>	Facility ID: _____ Location ID: _____
Facility Name: <u>Shell 797-03-21A</u>	
Sec: <u>3</u> Twp: <u>7S</u> Range: <u>97W</u> QtrQtr: <u>Tct 71</u>	Lat: <u>39.479580</u> Long: <u>-108.202080</u>

NOTICE TO RUN AND CEMENT CASING – 24-hour notice

Start Date: 05/23/2012 Time: 16:00 (HH:MM) String: SURFACE

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: Darryle Clark Email: gjrig01@oxy.com
Signature: _____ Title: DSM Date: 05/22/2012