

FORM
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Rev
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OGCC RECEPTION
Receive Date:
07/24/2013
Document Number:
400453712

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 66561 Contact Person: Ken McKinney
Company Name: OXY USA INC Phone: (970) 985-0384
Address: 760 HORIZON DR #101 Fax: (970) 263-3694
City: GRAND JUNCTION State: CO Zip: 81506 Email: ken_mckinney@oxy.com
API #: 05 - - - Facility ID: 159172 Location ID: _____
Facility Name: ZIEGAL 7-1 SWD
Sec: 7 Twp: 10S Range: 94W QtrQtr: SENE Lat: _____ Long: _____

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 07/29/2013 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? Yes

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: Joan Proulx Email: joan_proulx@oxy.com
Signature: _____ Title: Regulatory Date: 07/24/2013