

FORM**42**Rev
01/21**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109**OGCC RECEPTION****Receive Date:****04/20/2021****Document Number:****402664863****FIELD OPERATIONS NOTICE**

The Form 42 shall be submitted as required by Rule, Notice to Operators, Policy, or Condition of Approval.
A Form 42 Update shall be submitted to revise the scheduled date or time on a previous Form 42 - Advance Notice of Field Operations.
A Form 42 Update must be for the same well, location, or facility and for the same Field Operation as a previous Form 42.
NOTE: Operator's Contact for Advance Notices of Field Operations should be available 24 hours a day, 7 days a week and should have the most current scheduling information for the operation. Operator's Contact for other notices should be able to respond to questions regarding the reported information.

Update of a previous Form 42 Notice NO**Entity Information**

OGCC Operator Number: <u>47120</u>	Contact Person: <u>Sabrina Frantz</u>
Company Name: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Phone: <u>(970) 388-1139</u>
Address: <u>P O BOX 173779</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Email: <u>Sabrina_Franz@Oxy.com</u>

API #: <u>05 - 123 - 15623 - 00</u>	Facility ID: <u>247825</u>	Location ID: <u>328158</u>
Facility Name: <u>SCHULTZ STATE 16-1</u>	<input type="checkbox"/> Submit By Other Operator	
Sec: <u>16</u> Twp: <u>4N</u> Range: <u>67W</u> QtrQtr: <u>NENE</u>	Lat: <u>40.318447</u>	Long: <u>-104.888317</u>

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

If isolation for MIT is greater than 100' (TVD) above topmost perforation, contact area engineer prior to conducting MIT. (Rule 417)

Test Date: 05/03/2021 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? No

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct and complete.

Print Name: <u>Callie Fiddes</u>	Email: <u>Callie_Fiddes@Oxy.com</u>
Signature: _____	Title: <u>Regulatory Analyst</u> Date: <u>04/20/2021</u>