IMPORTANT: SOME DATA FIELDS HAVE BEEN MODIFIED.

FORM 5 Rev 02/08	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109 **DRILLING COMPLETION REPORT**		DE	ET	OE	ES

		Document Number: 400128819

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type [X] Final completion [ ] Preliminary completion

1. OGCC Operator Number: 66571
2. Name of Operator: OXY USA WTP LP
3. Address: P O BOX 27757
   City: HOUSTON   State: TX   Zip: 77227

4. Contact Name: Joan Proulx
   Phone: (970) 263.3641
   Fax: (970) 263.3694

5. API Number   05-045-18175-00
6. County: GARFIELD
7. Well Name: Cascade Creek   Well Number: 697-09-50B
8. Location: QtrQtr: SWSW   Section: 9   Township: 6S   Range: 97W   Meridian: 6

Footage at surface: Distance: 192 feet Direction: FSL   Distance: 272 feet Direction: FWL

As Drilled Latitude: As Drilled Longitude:

GPS Data:

Data of Measurement: PDOP Reading: GPS Instrument Operator's Name:

** If directional footage at Top of Prod. Zone   Dist.: 782 feet. Direction: FSL   Dist.: 959 feet. Direction: FWL

Sec: 9   Twp: 6S   Rng: 97W

** If directional footage at Bottom Hole   Dist.: 993 feet. Direction: FSL   Dist.: 929 feet. Direction: FWL

Sec: 9   Twp: 6S   Rng: 97W

9. Field Name: GRAND VALLEY   10. Field Number: 31290

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/16/2010 13. Date TD: 09/22/2010 14. Date Casing Set or D&A: 09/24/2010

15. Well Classification:

[ ] Dry [ ] Oil [X] Gas/Coalbed [ ] Disposal [ ] Stratigraphic [ ] Enhanced Recovery [ ] Storage [ ] Observation

16. Total Depth MD 8848 TVD** 8759   17 Plug Back Total Depth MD 8788 TVD** 8699

18. Elevations GR 8393 KB 8423   One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

Slim Sonic Logging Tool/CBL/GR & CCL
RST/Sigma Mode/GR-CCLRST/Inelastic Capture/GR-CCL
Slim Sonic Logging Tool/Sonic Porosity & Delta T/GR & CCL
Processed Data/SSLT-C

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	20+0/0	16+0/0	65	0	90	4	0	90	CALC
SURF	14+3/4	9+5/8	36	0	2,711	1,050	0	2,711	CALC
1ST	8+3/4	4+1/2	11.6	0	8,796	1,750	1,960	8,796	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

The amount of sacks used in the top out is unclear; the surface cement reports indicates, "..used extra lead cement from job."

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom
	SURF			0	2,711

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
WASATCH G	4,426	4,580	☐	☐	
FORT UNION	4,580	5,896	☐	☐	
MESAVERDE	5,896	6,121	☐	☐	
WILLIAMS FORK	6,121	8,288	☐	☐	
CAMEO	8,288	8,690	☐	☐	
ROLLINS	8,690		☐	☐	

Comment:

Final as-built data (lat, long, GPS) will be submitted once the rig has departed the location and the surveyor has collected that information.

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

Signed: _____   Print Name: Joan Proulx _____

Title: Regulatory Analyst   Date: 1/28/2011   Email: joan_proulx@oxy.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
Attachment Checklist					
400128836	CMT Summary *	Yes	☒	No	☐
	Core Analysis	Yes	☐	No	☒
400128835	Directional Survey **	Yes	☒	No	☐
	DST Analysis	Yes	☐	No	☒
	Logs	Yes	☒	No	☐
	Other	Yes	☐	No	☒
Other Attachments					
400128819	FORM 5 SUBMITTED	Yes	☒	No	☐
400128825	LAS-PULSED NEUTRON	Yes	☒	No	☐
400128827	LAS-PULSED NEUTRON	Yes	☒	No	☐
400128829	LAS-GAMMA RAY	Yes	☒	No	☐
400128831	LAS-SONIC	Yes	☒	No	☐
400128833	LAS-SONIC	Yes	☒	No	☐
400128834	LAS-PULSED NEUTRON	Yes	☒	No	☐

General Comments

User Group	Comment	Comment Date
Permit	req GPS, reported GPS is same as APD	4/21/2011 2:33:41 PM

Total: 1 comment(s)