

## 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: <u>66561</u>	4. Contact Name <u>Daniel I. Padilla</u>	Complete the Attachment Checklist  OP OGCC
2. Name of Operator: <u>OXY USA Inc.</u>	Phone: <u>970.263.3637</u>	
3. Address: <u>760 Horizon Drive, Suite 101</u> City: <u>Grand Junction</u> State: <u>CO</u> Zip: <u>81506</u>	Fax: <u>970.263.3694</u>	
5. API Number <u>05- 077-09266</u>	OGCC Facility ID Number	Survey Plat
6. Well/Facility Name: <u>Hell's Gulch Federal</u>	7. Well/Facility Number <u>23-14B</u>	Directional Survey
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): <u>NWNW, Sec 26, T8S, R92W, 6th PM</u>		Surface Eqpm Diagram
9. County: <u>Mesa</u>	10. Field Name: <u>Alkali Creek</u>	Technical Info Page <input checked="" type="checkbox"/>
11. Federal, Indian or State Lease Number: <u>COC 66918</u>		Other

## General Notice

<input type="checkbox"/> 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:	<table border="1"><tr><td></td><td>FNL/FSL</td><td>FEL/FWL</td></tr><tr><td></td><td></td><td></td></tr><tr><td>Change of Surface Footage to Exterior Section Lines:</td><td></td><td></td></tr><tr><td>Change of Bottomhole Footage from Exterior Section Lines:</td><td></td><td></td></tr><tr><td>Change of Bottomhole Footage to Exterior Section Lines:</td><td></td><td></td></tr></table> attach directional survey		FNL/FSL	FEL/FWL				Change of Surface Footage to Exterior Section Lines:			Change of Bottomhole Footage from Exterior Section Lines:			Change of Bottomhole Footage to Exterior Section Lines:		
	FNL/FSL	FEL/FWL														
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															
Longitude	Distance to nearest bldg, public rd, utility or RR															
Ground Elevation	Distance to nearest lease line															
	Is location in a High Density Area (rule 603b)? Yes/No <input type="checkbox"/>															
	Distance to nearest well same formation															
	Surface owner consultation date:															
GPS DATA:																
Date of Measurement	PDOP Reading Instrument Operator's Name															
<input type="checkbox"/> CHANGE SPACING UNIT																
Formation	Formation Code Spacing order number Unit Acreage Unit configuration															
<input type="checkbox"/> Remove from surface bond																
Signed surface use agreement attached																
<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME															
Effective Date:	From:															
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To:															
	Effective Date:															
<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS															
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:															
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No															
Date Ready for Inspection:	MIT required if shut in longer than two years. Date of last MIT															
<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)															
<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK																
*submit cbl and cement job summaries																
Method used	Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date															
<input type="checkbox"/> 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

<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date: <u>1/31/2011</u>	Date Work Completed:
Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)	
<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input checked="" type="checkbox"/> Request to Vent or Flare
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: <u>BRADENHEAD VENT</u> for Spills and Releases
<input type="checkbox"/> E&P Waste Disposal	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Status Update/Change of Remediation Plans	

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

Signed: [Signature] Date: 1/25/11 Email: daniel\_padilla@oxy.com  
Print Name: Daniel I. Padilla Title: Regulatory Advisor

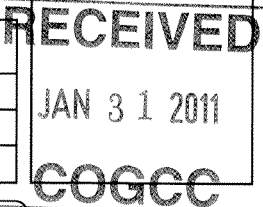
COGCC Approved: [Signature] Title: PE II Date: 8/1/2011  
CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

- |   |                              |
|---|------------------------------|
| 1. OGCC Operator Number: 66561  | API Number: 05-077-09266     |
| 2. Name of Operator: OXY USA Inc.   | OGCC Facility ID #           |
| 3. Well/Facility Name: Hell's Gulch Federal                                     | Well/Facility Number: 23-14B |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWNWk, Sec 26, T8S, R92W, 6th PM |                              |



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

OXY is requesting to vent the Hells Gulch Federal 23-14B well, COC 66918, for a 90-day period.  
Proposed venting program: Every 26 days the well will be shut in for 24-48 hours and the Bradenhead pressure will be recorded. The Bradenhead will then be opened to vent.

Request to vent has also been submitted to the COGCC, please see attached.