

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

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: 66561 | 4. Contact Name: Joan Proulx | Complete the Attachment Checklist OP OGCC |
| 2. Name of Operator: OXY USA Inc., Attn: Karen Summers | Joan Proulx | |
| 3. Address: P.O. Box 27757 | Phone: 970-263-3641 | |
| City: Houston State: TX Zip: 77227-7757 | Fax: 970-263-3694 | |
| 5. API Number: 05-077-09524-00 | OGCC Facility ID Number: | Survey Plat |
| 6. Well/Facility Name: Sikes | 7. Well/Facility Number: 21-4B | Directional Survey |
| 8. Location (Qtr/Clr, Sec, Twp, Rng, Meridian): SENE 20 9S 94W 6 PM | | Surface Equip Diagram |
| 9. County: Mesa | 10. Field Name: Brush Creek | Technical Info Page X |
| 11. Federal, Indian or State Lease Number: N/A | | Other |

RECEIVED

OCT 26 2012

COGCC/Rifle Office

General Notice

| | |
|--|---|
| <input type="checkbox"/> CHANGE OF LOCATION: Attach New Survey Plat As-built data | (a change of surface qtr/ctr is substantive and requires a new permit) |
| Change of Surface Footage from Exterior Section Lines: | <input type="checkbox"/> IN/FSL <input type="checkbox"/> E/CL-WL |
| Change of Surface Footage to Exterior Section Lines: | <input type="checkbox"/> <input type="checkbox"/> |
| Change of Bottomhole Footage from Exterior Section Lines: | <input type="checkbox"/> <input type="checkbox"/> |
| Change of Bottomhole Footage to Exterior Section Lines: | <input type="checkbox"/> <input type="checkbox"/> attach directional survey |
| Bottomhole location Qtr/Clr, Sec, Twp, Rng, Mer | |
| Latitude: 39 26537 | Distance to nearest property line |
| Longitude: 107 89970 | Distance to nearest blng, public rd, utility or RR |
| Ground Elevation: | Distance to nearest lease line |
| | Is location in a High Density Area (rule 603b)? Yes/No |
| | Distance to nearest well same formation |
| | Surface owner consultation date: |
| GPS DATA: | |
| Date of Measurement: 09/17/2012 | PDOP Reading: 5.0 |
| | Instrument Operator's Name: B Szabo |
| <input type="checkbox"/> CHANGE SPACING UNIT | <input type="checkbox"/> Remove from surface bond |
| Formation: Formation Code: Spacing order number: Unit Acreage: Unit configuration: | 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: <input type="checkbox"/> 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: 10/10/2012 | 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 type="checkbox"/> Request to Vent or Flare | <input type="checkbox"/> E&P Waste Disposal |
| <input type="checkbox"/> Change Drilling Plans | <input type="checkbox"/> Repair Well | <input type="checkbox"/> Beneficial Reuse of E&P Waste |
| <input type="checkbox"/> Gross Interval Changed? | <input type="checkbox"/> Rule 502 variance requested | <input type="checkbox"/> Status Update/Change of Remediation Plans |
| <input type="checkbox"/> Casing/Cementing Program Change | <input checked="" type="checkbox"/> Other: Abandon conductor | for Spills and Releases |

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

Signed: Joan Proulx Date: 10/01/2012 Email: joan.proulx@oxy.com

Print Name: Joan Proulx Title: Regulatory Analyst

COGCC Approved: [Signature] Title: NWAE Date: 10/26/12

CONDITIONS OF APPROVAL IF ANY:



TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

| | | | |
|--|---------------------|-----------------------|-----------------|
| 1. OGCC Operator Number: | 66561 | API Number: | 05-077-09524-00 |
| 2. Name of Operator: | OXY USA Inc. | OGCC Facility ID # | |
| 3. Well/Facility Name: | Stites | Well/Facility Number: | 21-4B |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | SENE 20 9S 94W 6 PM | | |

RECEIVED

OCT 26 2012

COGCC/Rifle Office

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

The Stites 21-4B well had a conductor set to an approximate depth of 65'.

No further work or drilling has occurred at this well and Oxy has no plans to re-enter and continue drilling this well.

The conductor will be filled with Redmix cement to plug and abandon the conductor.

As-built data was obtained at the conductor.