



02597044 Colorado



Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

RECEIVED OCT 04, 2012 COGCC

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: 66571 2. Name of Operator: OXY USA WTP LP, Attn: Karen Summers 3. Address: P.O. Box 27757 City: Houston State TX Zip 77227-7757 4. Contact Name: Joan Proulx Phone: 970-263-3641 Fax: 970-263-3694 5. API Number: 05-045-16230-00 OGCC Facility ID Number 6. Well/Facility Name: Cascade Creek 7. Well/Facility Number: 697-16-11A 8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SWSE 9 6S 97W 6 PM 9. County: Garfield 10. Field Name: Grand Valley 11. Federal, Indian or State Lease Number: N/A

Complete the Attachment Checklist OP OGCC

General Notice

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: 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 Longitude Ground Elevation Distance to nearest property line Distance to nearest lease line Distance to nearest bldg, public rd, utility or RR s location in a High Density Area (rule 603b)? Yes/No Surface owner consultation date:

GPS DATA: Date of Measurement PDOP Reading Instrument Operator's Name

CHANGE SPACING UNIT Formation Formation Code Spacing order number Unit Acreage Unit configuration Remove from surface bond Signed surface use agreement attached

CHANGE OF OPERATOR (prior to drilling): Effective Date: Plugging Bond: Blanket Individual CHANGE WELL NAME From: To: Effective Date: NUMBER

ABANDONED LOCATION: Was location ever built? Yes No Is site ready for inspection? Yes No Date Ready for inspection: NOTICE OF CONTINUED SHUT IN STATUS Date well shut in or temporarily abandoned: Has Production Equipment been removed from site? Yes No MIT required if shut in longer than two years. Date of last MIT

SPUD DATE: REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)

SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK Method used Cementing tool setting/perf depth Cement volume Cement top Cement bottom Date

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

Notice of Intent Approximate Start Date: ~ 12/15/2012 Report of Work Done Date Work Completed

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

Intent to Recomplete (submit form 2) Change Drilling Plans Gross Interval Changed? Casing/Cementing Program Change Request to Vent or Flare Repair Well Rule 502 variance requested Other: Request to vent bradenhead for Spills and Releases E&P Waste Disposal Beneficial Reuse of E&P Waste 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: 10/4/2012 Email: joan\_proulx@oxy.com Print Name: Joan Proulx Title: Regulatory Analyst

COGCC Approved: [Signature] Title: PE II Date: 12/31/2012

CONDITIONS OF APPROVAL, IF ANY:

FORM  
4  
Rev 12/05

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY  
**RECEIVED**  
OCT 04, 2012  
COGCC

1. OGCC Operator Number:	66571	API Number:	05-045-16230-00
2. Name of Operator:	OXY USA WTP LP	OGCC Facility ID #	
3. Well/Facility Name:	Cascade Creek	Well/Facility Number:	697-16-11A
4. Location (QtrQtr, Sec, Twp, Rng, Meridian):	SWSE 9 6S 97W 6 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 USA WTP LP is requesting permission to periodically vent the bradenhead pressure for up to 180 days while work takes place to install a permanent control device (VCU).