

FORM
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OGCC RECEPTION
Receive Date:
09/18/2013
Document Number:
400482640

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 66561 Contact Person: Ken McKinney
Company Name: OXY USA INC Phone: (970) 985-0384
Address: 760 HORIZON DR #101 Fax: (970) 263-3694
City: GRAND JUNCTION State: CO Zip: 81506 Email: ken_mckinney@oxy.com
API #: 05 - 077 - 09346 - 00 Facility ID: _____ Location ID: _____
Facility Name: MCDANIEL 2-8B
Sec: 2 Twp: 9S Range: 94W QtrQtr: NENE Lat: 39.310466 Long: -107.843595

MECHANICAL INTEGRITY TEST – 10-DAY NOTICE

Test Date: 10/02/2013 Time: 08:00 (HH:MM) Underground Injection Control(UIC) Well? No

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Joan Proulx Email: joan_proulx@oxy.com
Signature: _____ Title: Regulatory Date: 09/18/2013