

FORM  
42

Rev  
03/12

State of Colorado  
Oil and Gas Conservation Commission

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



OGCC RECEPTION

Receive Date:

**08/15/2014**

Document Number:

**400665557**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: <u>66561</u>	Contact Person: <u>Toby Hoffman</u>
Company Name: <u>OXY USA INC</u>	Phone: <u>(713) 350-4659</u>
Address: <u>PO BOX 27757</u>	Fax: <u>( )</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77227</u>	Email: <u>toby_hoffman@oxy.com</u>
API #: <u>05 - 055 - 06316 - 00</u> Facility ID: _____	Location ID: _____
Facility Name: <u>Sheep Mountain Unit 1-12-B</u>	<input checked="" type="checkbox"/> Submit By Other Operator
Sec: <u>1</u> Twp: <u>28S</u> Range: <u>70W</u> QtrQtr: <u>SESW</u>	Lat: <u>37.636880</u> Long: <u>-105.171290</u>

**FORMATION INTEGRITY TEST – 24-hour notice**

Test Date: 08/17/2014 Time: 06:00 (HH:MM)

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: <u>Joan Proulx</u>	Email: <u>joan_proulx@oxy.com</u>
Signature: _____	Title: <u>Regulatory</u> Date: <u>08/15/2014</u>