

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:  
**09/10/2014**

Document Number:  
**400683433**

**NOTICE OF NOTIFICATION**

**Entity Information**

OGCC Operator Number: 66571 Contact Person: Ken McKinney  
Company Name: OXY USA WTP LP 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 - 045 - 11814 - 00 Facility ID: \_\_\_\_\_ Location ID: \_\_\_\_\_  
Facility Name: CASCADE CREEK 697-20-59D  Submit By Other Operator  
Sec: 29 Twp: 6S Range: 97W QtrQtr: NWNE Lat: 39.499920 Long: -108.241878

**MECHANICAL INTEGRITY TEST – 10-DAY NOTICE**

Test Date: 09/23/2014 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: 09/10/2014