Form 1001A Rev.2007

## NOTIFICATION OF WELL SPUD

| Spud Date: February 10, 2014   | INSTRUCTIONS  |
|--|---|
| OPERATOR   | Please Type or Use Black Ink  |
| Operator Name: OXY USA INC Operator Number: 9012<br>Address: PO Box 27757<br>5 E GREENWAY PLZ STE 110<br>HOUSTON, TX 77227-7757  | District Office must be<br>notified at least 48 hours<br>prior to spudding.<br>Complete and mail within<br>14 (fourteen) days after spudding<br>to the Corporation Commission |
| Well<br>API No.: 139-24605-00<br>Name/No. MYERS D 2  | at the above address.<br>State EXACT DATE well was<br>spudded.  |
| NW NE SE SE  |   |
| Sec: 13 TWP: 5N RGE: 15E County: TEXAS Correspondace Should Be Mailed To   | District I<br>115 West 6th Street<br>Post Office Box 779<br>Bristow, OK 74010   |
| Operator Name: OXY USA INC   | (918) 367-3396  |
| Address: PO Box 27757<br>5 E GREENWAY PLZ STE 110<br>HOUSTON, TX 77227-7757  | District II<br>101 South 6th Street<br>Post Office Box 1107<br>Kingfisher, OK 73750<br>(405) 375-5570   |
| Surface Casing Cemented By (if job completed)<br>Operator Name:<br>Address: ,  | District III<br>1016 Maple<br>Post Office Box 1525<br>Duncan, OK 73533<br>(405) 255-0103<br>District IV<br>703 North Broadway<br>Ada, OK 74828<br>(405) 332-3441              |
| I declare that I have knowledge of the contents of this report<br>and am authorized by my organization to make this report which |   |

I declare that I have knowledge of the contents of this report and am authorized by my organization to make this report, which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct, and complete to the best of me knowledge and belief.

IDANIA MEDINA

REGULATORY CLERK

Signature

Title