FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL | | | | |
|------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
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| hours per response: | 0.5 | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Leonard Jim A | | | | | | 2. Issuer Name and Ticker or Trading Symbol OCCIDENTAL PETROLEUM CORP /DE/ [OXY] | | | | | | | | | | all app Direct Office | olicable) ctor er (give title | Other | Owner (specify |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--|--|-------|--------------|------------------------------------------------------------------------------------|------|-----|----------------------------------------------------------------|---|--------------------|---------------------------------------------------------------------------------------------------|-------------|--------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------------|
| (Last) (First) (Middle) OCCIDENTAL PETROLEUM CORPORATION 10889 WILSHIRE BOULEVARD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/21/2008 | | | | | | | | | | belov Vic | , | below | , |
| (Street) LOS ANGELES CA 90024 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution D | | | 3. Transaction Code (Instr. 8) | | | | | | 4 and Secu Bene | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | | A) or D) | Price | Trans | | action(s) 3 and 4) | | (1113111 4) |
| Common Stock 02/21/2 | | | | | | | | | F | | 158 | | D | \$70 | .13 | 26,678 | | D | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | rative Conversion Date Execution Date or Exercise (Month/Day/Year) if any | | | Date, | Code (Instr. | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | | nber ıres | | | | | |

Explanation of Responses:

/s/ CHRISTEL H. PAULI,

Attorney-in-Fact for Jim A. 02/22/2008

Leonard

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.