

**FORM
INSP**Rev
05/11**State of Colorado****Oil and Gas Conservation Commission**

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



DE	ET	OE	ES
----	----	----	----

Inspection Date:

05/30/2013

Document Number:

663801070

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	335902	335902	LONGWORTH, MIKE	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 66571 Name of Operator: OXY USA WTP LP

Address: P O BOX 27757

City: HOUSTON State: TX Zip: 77227

Contact Information:

Contact Name	Phone	Email	Comment
WESTERDALE, BARBARA		barbara.westerdale@state.co.us	
Clark, Chris		Chris_Clark@oxy.com	

Compliance Summary:

QtrQtr: <u>LOT 12</u>		Sec: <u>4</u>	Twp: <u>6S</u>		Range: <u>97W</u>		
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/09/2012	668500162			S	I		N

Inspector Comment:

One conductor set for drilling.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
285254	WELL	AL	12/10/2009	LO	045-12408	CASCADE CREEK 697-4-54D	<input checked="" type="checkbox"/>
285255	WELL	AL	12/10/2009	LO	045-12405	CASCADE CREEK 697-3-41D	<input checked="" type="checkbox"/>
285256	WELL	AL	12/10/2009	LO	045-12406	CASCADE CREEK 697-4-29D	<input checked="" type="checkbox"/>
285257	WELL	AL	12/10/2009	LO	045-12407	CASCADE CREEK 697-4-39D	<input checked="" type="checkbox"/>
285258	WELL	AL	12/10/2009	LO	045-12404	CASCADE CREEK 697-3-25D	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: _____ Drilling Pits: _____ Wells: _____ Production Pits: _____

Condensate Tanks: _____ Water Tanks: _____ Separators: _____ Electric Motors: _____

Gas or Diesel Mortors: _____ Cavity Pumps: _____ LACT Unit: _____ Pump Jacks: _____

Electric Generators: _____ Gas Pipeline: _____ Oil Pipeline: _____ Water Pipeline: _____

Gas Compressors: _____ VOC Combustor: _____ Oil Tanks: _____ Dehydrator Units: _____

Multi-Well Pits: _____ Pigging Station: _____ Flare: _____ Fuel Tanks: _____

Location

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER	Satisfactory	Sign at Production pit		

Emergency Contact Number: (S/U/V) _____ Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory	A pipe framed stucture with 3 plywood sides	Remove from location	06/28/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
PIT	Satisfactory			

Venting:		
Yes/No	Comment	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335902

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Comment:** _____**CA:** _____**Date:** _____**Wildlife BMPs:****Comment:** _____**CA:** _____**Date:** _____**Stormwater:**

Erosion BMPs

Present

Other BMPs

Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____

Other BMPs: _____

Comment: _____**Staking:****On Site Inspection (305):**Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:Summary of Operator Response to Landowner Issues:Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:**Facility**

Facility ID: 285254 Type: WELL API Number: 045-12408 Status: AL Insp. Status: AL

Facility ID: 285255 Type: WELL API Number: 045-12405 Status: AL Insp. Status: AL

Facility ID: 285256 Type: WELL API Number: 045-12406 Status: AL Insp. Status: AL

Inspector Name: LONGWORTH, MIKE

Facility ID: 285257 Type: WELL API Number: 045-12407 Status: AL Insp. Status: AL

Facility ID: 285258 Type: WELL API Number: 045-12404 Status: AL Insp. Status: AL

Environmental

Spills/Releases:

Type of Spill: Description: Estimated Spill Volume:
Comment:
Corrective Action: Date:
Reportable: GPS: Lat Long
Proximity to Surface Water: Depth to Ground Water:

Water Well:

DWR Receipt Num: Owner Name: GPS : Lat Long

Field Parameters:

Sample Location:

Emission Control Burner (ECB):

Comment:

Pilot: Wildlife Protection Devices (fired vessels):

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment:

1003a. Debris removed? CM

CA CA Date

Waste Material Onsite? Fail CM Stock tank with hydracarbon/water in it

CA Remove fluid CA Date 06/28/2013

Unused or unneeded equipment onsite? Fail CM A pipe framed stucture with 3 plywood sides

CA Remove unneeded equipment CA Date 06/28/2013

Pit, cellars, rat holes and other bores closed? Fail CM Conductor set for Abandon Location

CA Close conductor CA Date 06/28/2013

Guy line anchors removed? Pass CM

CA CA Date

Guy line anchors marked? CM

CA CA Date

1003b. Area no longer in use? In Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped?

Inspector Name: LONGWORTH, MIKE

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____ P _____

Comment: _____

Overall Interim Reclamation **Fail**

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation **Multi-Well Location** ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction				
Ditches	Fail	Ditches				
Berms	Fail	Berms				
Seeding		Gravel				

S/U/V: **Unsatisfactory** Corrective Date: **06/28/2013**

Comment: **Bmps need to be repaired and maintained**

CA: **Repair and maintain BMPs**