

FORM INSP <small>Rev 05/11</small>	State of Colorado				DE	ET	OE	ES
	Oil and Gas Conservation Commission				Inspection Date: <u>07/12/2013</u>			
<small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</small>								

FIELD INSPECTION FORM

Location Identifier	Facility ID <u>296465</u>	Loc ID <u>334536</u>	Inspector Name: <u>BURGER, CRAIG</u>	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____
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Document Number:
670200643

Overall Inspection:
Satisfactory

Operator Information:

OGCC Operator Number: 66561 Name of Operator: OXY USA INC

Address: PO BOX 27757

City: HOUSTON State: TX Zip: 77227

Contact Information:

Contact Name	Phone	Email	Comment
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor
Clark, Chris	970-263-3651	chris_clark@oxy.com	Field Regulatory Lead-Piceance

Compliance Summary:

QtrQtr: NWNW Sec: 26 Twp: 8S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/16/2011	200303017	PR	PR	S			N

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
278019	WELL	PR	01/15/2007	GW	077-08891	HELLS GULCH FEDERAL 23-11	X
278020	WELL	PR	11/15/2006	GW	077-08890	HELLS GULCH FEDERAL 23-12	X
278021	WELL	PR	11/15/2006	GW	077-08889	HELLS GULCH FEDERAL 23-14	X
278022	WELL	PR	01/01/2011	GW	077-08888	HELLS GULCH FEDERAL 23-13	X
290015	WELL	PR	01/01/2011	GW	077-09271	HELLS GULCH FED. 23-11A	X
290016	WELL	PR	11/05/2007	GW	077-09270	HELLS GULCH FED. 23-12C	X
290017	WELL	PR	01/01/2008	GW	077-09269	HELLS GULCH FED. 23-12B	X
290018	WELL	PR	10/24/2007	GW	077-09268	HELLS GULCH FEDERAL 23-12A	X
290019	WELL	PR	04/23/2009	GW	077-09267	HELLS GULCH FED 23-11C	X
290020	WELL	PR	01/01/2011	GW	077-09266	HELLS GULCH FED. 23-14B	X
290021	WELL	PR	10/08/2007	GW	077-09265	HELLS GULCH FED. 23-14A	X
290022	WELL	PR	11/09/2007	GW	077-09264	HELLS GULCH FED. 23-11B	X
296465	WELL	PR	04/23/2009	GW	077-09656	HELLS GULCH FEDERAL 23-13C	X
296466	WELL	PR	01/01/2011	GW	077-09657	HELLS GULCH FEDERAL 23-14C	X

296478	WELL	PR	04/23/2009	GW	077-09658	HELLS GULCH FEDERAL 23-13B	X
296479	WELL	PR	04/23/2009	GW	077-09659	HELLS GULCH FEDERAL 23-13A	X

Equipment: Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	Incorrect volumes on tank labels in batteries. Unlabeled empty open top rolloff on location.	Install signs to comply with rule 210.d.	08/16/2013
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
STORAGE OF SUPL	Unsatisfactory	Empty open top tank on location.	Keep location free of unused equipment.	08/16/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	wire fence		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	16	Satisfactory			
Gathering Line	1	Satisfactory			
Ancillary equipment	1	Satisfactory	descaler unit		
Gas Meter Run	1	Satisfactory			
Horizontal Heated Separator	8	Satisfactory			
Vertical Heated Separator	8	Satisfactory			

Bird Protectors	8	Satisfactory		
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Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,

S/U/V: Satisfactory Comment: same berm as 5 - 400 bbl tanks

Corrective Action: _____ Corrective Date: _____

Paint

Condition

Other (Content) _____
 Other (Capacity) _____
 Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	400 BBLS	STEEL AST	39.338370,-107.641090

S/U/V: Satisfactory Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition

Other (Content) _____
 Other (Capacity) _____
 Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action _____ Corrective Date _____

Comment _____

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	5	400 BBLS	STEEL AST	39.338480,-107.641110	
S/U/V:	Satisfactory	Comment:			
Corrective Action:				Corrective Date:	
Paint					
Condition	Adequate				
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
Venting:					
Yes/No	Comment				
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 334536

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: 278019 Type: WELL API Number: 077-08891 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift.

Facility ID: 278020 Type: WELL API Number: 077-08890 Status: PR Insp. Status: PR

Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>278021</u>	Type:	<u>WELL</u>	API Number:	<u>077-08889</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>278022</u>	Type:	<u>WELL</u>	API Number:	<u>077-08888</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>290015</u>	Type:	<u>WELL</u>	API Number:	<u>077-09271</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>290016</u>	Type:	<u>WELL</u>	API Number:	<u>077-09270</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>290017</u>	Type:	<u>WELL</u>	API Number:	<u>077-09269</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>290018</u>	Type:	<u>WELL</u>	API Number:	<u>077-09268</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift. Bradenhead piped to production."/>									
Facility ID:	<u>290019</u>	Type:	<u>WELL</u>	API Number:	<u>077-09267</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift. Bradenhead piped to production."/>									
Facility ID:	<u>290020</u>	Type:	<u>WELL</u>	API Number:	<u>077-09266</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift. Bradenhead piped to production."/>									
Facility ID:	<u>290021</u>	Type:	<u>WELL</u>	API Number:	<u>077-09265</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									
Facility ID:	<u>290022</u>	Type:	<u>WELL</u>	API Number:	<u>077-09264</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift. Bradenhead piped to production."/>									
Facility ID:	<u>296465</u>	Type:	<u>WELL</u>	API Number:	<u>077-09656</u>	Status:	<u>PR</u>	Insp. Status:	<u>PR</u>
Producing Well									
Comment: <input type="text" value="Plunger lift."/>									

Facility ID: 296466 Type: WELL API Number: 077-09657 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift.

Facility ID: 296478 Type: WELL API Number: 077-09658 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift.

Facility ID: 296479 Type: WELL API Number: 077-09659 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift.

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): N

Comment: _____
 Pilot: _____ Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____
 Land Use: _____
 Comment: _____
 1003a. Debris removed? Pass CM _____ CA _____ CA Date _____
 Waste Material Onsite? Pass CM _____ CA _____ CA Date _____
 Unused or unneeded equipment onsite? _____ CM _____ CA _____ CA Date _____
 Pit, cellars, rat holes and other bores closed? Pass CM _____ CA _____ CA Date _____

Guy line anchors removed? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? _____ CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass
 1003c. Compacted areas have been cross ripped? Pass
 1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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? Pass 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

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
Rip Rap	Pass	Culverts	Pass			
Ditches	Pass	Waddles	Pass			

Inspector Name: BURGER, CRAIG

Sediment Traps	Pass	Ditches	Pass	MHSP	Pass	
Seeding	Pass					
Waddles	Pass	Rip Rap	Pass			
Berms	Pass	Seeding	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment:

CA: