

**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



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Inspection Date:

07/26/2013

Document Number:

668401552

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	282482	334552	BROWNING, CHUCK	<input type="checkbox"/>	

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
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Clark, Chris	970-263-3651	chris_clark@oxy.com	Field Regulatory Lead-Piceance

Compliance Summary:

QtrQtr: SWNW Sec: 18 Twp: 10S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/30/2011	661400032	PR	PR	S			N
08/05/2011	200318216	SR	PR	S			N
08/31/2009	200217390	PR	PR	S			N
01/05/2009	200204821	PR	PR	S			N

Inspector Comment:

4-Wellheads & 1-Plugged & Abandoned well. 1-triple & 1-single Separators, Meter, 2-300 bbl steel tanks w/ metal berms.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
221775	WELL	PA	02/20/2006	GW	077-08377	COURY 18-2	<input checked="" type="checkbox"/>
282480	WELL	PR	08/01/2006	GW	077-08991	MY WAY RANCH 18-4	<input checked="" type="checkbox"/>
282481	WELL	PR	01/10/2006	GW	077-08990	MY WAY RANCH 18-3	<input checked="" type="checkbox"/>
282482	WELL	PR	06/24/2008	GW	077-08989	MY WAY RANCH 18-6	<input checked="" type="checkbox"/>
284184	WELL	PR	04/11/2006	GW	077-09047	MY WAY RANCH 18-5	<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

Inspector Name: BROWNING, CHUCK

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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

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

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

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

Venting:		
Yes/No	Comment	
NO		

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 334552

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: 221775 Type: WELL API Number: 077-08377 Status: PA Insp. Status: PA

Facility ID: 282480 Type: WELL API Number: 077-08991 Status: PR Insp. Status: PR

Producing Well

Comment: 4-Wellheads & 1-Plugged & Abandoned well. 1-triple & 1-single Separators, Meter, 2-300 bbl steel tanks w/ metal berms.

Inspector Name: BROWNING, CHUCK

Facility ID: 282481 Type: WELL API Number: 077-08990 Status: PR Insp. Status: PR

Producing Well

Comment: 4-Wellheads & 1-Plugged & Abandoned well. 1-triple & 1-single Separators, Meter, 2-300 bbl steel tanks w/ metal berms.

Facility ID: 282482 Type: WELL API Number: 077-08989 Status: PR Insp. Status: PR

Producing Well

Comment: 4-Wellheads & 1-Plugged & Abandoned well. 1-triple & 1-single Separators, Meter, 2-300 bbl steel tanks w/ metal berms.

Facility ID: 284184 Type: WELL API Number: 077-09047 Status: PR Insp. Status: PR

Producing Well

Comment: 4-Wellheads & 1-Plugged & Abandoned well. 1-triple & 1-single Separators, Meter, 2-300 bbl steel tanks w/ metal berms.

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:

Lat Long
DWR Receipt Num: Owner Name: GPS :

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? Pass CM

CA CA Date

Waste Material Onsite? Pass CM

CA CA Date

Unused or unneeded equipment onsite? Pass CM

CA CA Date

Pit, cellars, rat holes and other bores closed?	<u>Pass</u>	CM _____	
CA _____			CA Date _____
Guy line anchors removed?	<u> </u>	CM _____	
CA _____			CA Date _____
Guy line anchors marked?	<u>Pass</u>	CM _____	
CA _____			CA Date _____

1003b.	Area no longer in use?	<u>Pass</u>	Production areas stabilized ?	<u>Pass</u>
1003c.	Compacted areas have been cross ripped?	<u>Pass</u>		
1003d.	Drilling pit closed?	<u>Pass</u>	Subsidence over on drill pit?	<u>Pass</u>
	Cuttings management: _____			
1003e.	Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing?			<u>Pass</u>
	Production areas have been stabilized?	<u>Pass</u>	Segregated soils have been replaced?	

Cropland

Top soil replaced Recontoured Perennial forage re-established

Top soil replaced	Recontoured	80% Revegetation	Pass
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1003 f. Weeds Noxious weeds? P

Comment:

Overall Interim Reclamation	Pass
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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
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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

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass	MHSP	Pass	

Inspector Name: BROWNING, CHUCK

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____