

**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:  
10/21/2013

Document Number:  
673300046

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>334394</u>	<u>334394</u>	<u>Lamont, Rich</u>	<input type="checkbox"/>	

**Operator Information:**

OGCC Operator Number:
Name of Operator: <u>OXY USA INC</u>
Address: <u>PO BOX 27757</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77227</u>

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

**Contact Information:**

Contact Name	Phone	Email	Comment
MEESE, WARNER		Warner_Meece@oxy.com	OXY OPERATIONS
KELLERBY, SHAUN		shaun.kellerby@state.co.us	
Lamont, Rich		rich.lamont@state.co.us	
DAVID, EDWARDS		david_edwards@oxy.com	OXY ENVIRONMENTAL
Sonnier, Brent	(713) 366-3640/ (303) 885-2786	Brent_Sonnier@oxy.com	Sr. Regulatory Advisor (Houston)

**Compliance Summary:**

QtrQtr: SWNW Sec: 18 Twp: 9S Range: 93W

**Inspector Comment:**

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
287730	WELL	PR	09/18/2009	GW	077-09182	GUNDERSON FED. 13-1	PR	<input checked="" type="checkbox"/>
287731	WELL	PR	06/07/2007	GW	077-09181	GUNDERSON FED. 18-4	PR	<input checked="" type="checkbox"/>
287732	WELL	PR	06/20/2011	GW	077-09180	GUNDERSON 18-6	PR	<input checked="" type="checkbox"/>
287733	WELL	PR	09/01/2012	GW	077-09179	GUNDERSON 18-3	PR	<input checked="" type="checkbox"/>
287734	WELL	PR	07/26/2011	GW	077-09178	GUNDERSON 18-5	PR	<input checked="" type="checkbox"/>
287735	WELL	PR	08/18/2011	GW	077-09177	GUNDERSON 18-11	PR	<input checked="" type="checkbox"/>
299274	WELL	PR	11/09/2009	GW	077-09798	GUNDERSON 18-3A	PR	<input checked="" type="checkbox"/>
299275	WELL	PR	11/24/2009	GW	077-09796	GUNDERSON 18-3C	PR	<input checked="" type="checkbox"/>
299276	WELL	PR	10/14/2011	GW	077-09797	GUNDERSON 18-3B	PR	<input checked="" type="checkbox"/>
299542	WELL	AL	06/28/2011	LO	077-09819	GUNDERSON 18-6A	AL	<input type="checkbox"/>
299543	WELL	AL	06/28/2011	LO	077-09820	GUNDERSON 18-5B	AL	<input type="checkbox"/>
299544	WELL	AL	06/28/2011	LO	077-09821	GUNDERSON 18-5A	AL	<input type="checkbox"/>
299545	WELL	AL	06/28/2011	LO	077-09822	GUNDERSON 18-6B	AL	<input type="checkbox"/>
299546	WELL	AL	06/28/2011	LO	077-09823	GUNDERSON 18-6C	AL	<input type="checkbox"/>

Inspector Name: Lamont, Rich

300343	WELL	AL	05/15/2012	LO	077-09887	Gunderson Federal 18-4A	AL	<input type="checkbox"/>
300344	WELL	AL	05/15/2012	LO	077-09888	Gunderson Federal 18-4B	AL	<input type="checkbox"/>
300345	WELL	AL	05/15/2012	LO	077-09889	Gunderson Federal 18-4C	AL	<input 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**

<b>Signs/Marker:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Satisfactory			
CONTAINERS	Satisfactory			
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

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

<b>Equipment:</b>					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ancillary equipment	3	Satisfactory	3 chemical totes at wellhead		
Emission Control Device	1	Satisfactory			
Plunger Lift	9	Satisfactory			
Horizontal Heated Separator	3	Satisfactory			
Vertical Heated Separator	6	Satisfactory			

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	5	300 BBLS	STEEL AST	39.279730,107.817280	
S/U/V:	Satisfactory	Comment:			
Corrective Action:				Corrective Date:	
<b>Paint</b>					
Condition	Adequate				
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
<b>Venting:</b>					
Yes/No	Comment				
NO					
<b>Flaring:</b>					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

**Predrill**

Location ID: 334394

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/U/V:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

**S/U/V:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**S/U/V:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stormwater:**

**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: 287730 Type: WELL API Number: 077-09182 Status: PR Insp. Status: PR

Facility ID: 287731 Type: WELL API Number: 077-09181 Status: PR Insp. Status: PR

Facility ID: 287732 Type: WELL API Number: 077-09180 Status: PR Insp. Status: PR

Facility ID: 287733 Type: WELL API Number: 077-09179 Status: PR Insp. Status: PR

Facility ID: 287734 Type: WELL API Number: 077-09178 Status: PR Insp. Status: PR

Facility ID: 287735 Type: WELL API Number: 077-09177 Status: PR Insp. Status: PR

Facility ID: 299274 Type: WELL API Number: 077-09798 Status: PR Insp. Status: PR

Facility ID: 299275 Type: WELL API Number: 077-09796 Status: PR Insp. Status: PR

Facility ID: 299276 Type: WELL API Number: 077-09797 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

**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? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Pit, cellars, rat holes and other bores closed? \_\_\_\_\_ 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? \_\_\_\_\_ Production areas stabilized ? \_\_\_\_\_

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

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? \_\_\_\_\_

Comment: \_\_\_\_\_

Overall Interim Reclamation \_\_\_\_\_ Pass \_\_\_\_\_

**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 \_\_\_\_\_ Well Release on Active Location  Multi-Well Location

**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/U/V: Satisfactory \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT

