

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
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Inspection Date:
06/04/2014

Document Number:
675200028

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>334529</u>	<u>334529</u>	<u>CONKLIN, CURTIS</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>66561</u>
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
Clark, Chris		chris_clark@oxy.com	
Kellerby, Shaun		shuan.kellerby@state.co.us	

Compliance Summary:

QtrQtr:	<u>NESE</u>	Sec:	<u>2</u>	Twp:	<u>9S</u>	Range:	<u>94W</u>
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Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/21/2013	673300055			SATISFACTORY Y	P		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
278342	WELL	SI	01/06/2013	GW	077-08902	MCDANIEL 2-15	PR	<input checked="" type="checkbox"/>
278343	WELL	PR	01/01/2011	GW	077-08903	MCDANIEL 2-16	PR	<input checked="" type="checkbox"/>
278344	WELL	PR	08/01/2011	GW	077-08904	MCDANIEL 2-10	PR	<input checked="" type="checkbox"/>
278346	WELL	PR	01/01/2011	GW	077-08906	MCDANIEL 2-9	PR	<input checked="" type="checkbox"/>
292512	WELL	PR	07/16/2009	GW	077-09415	MCDANIEL 2-9A	PR	<input checked="" type="checkbox"/>
292513	WELL	PR	03/17/2009	GW	077-09414	MCDANIEL 2-10C	PR	<input checked="" type="checkbox"/>
292514	WELL	PR	08/19/2008	GW	077-09413	MCDANIEL 2-10B	PR	<input checked="" type="checkbox"/>
292515	WELL	PR	09/01/2013	GW	077-09412	MCDANIEL 2-10A	PR	<input checked="" type="checkbox"/>
292516	WELL	PR	03/17/2009	GW	077-09411	MCDANIEL 2-9C	PR	<input checked="" type="checkbox"/>
292517	WELL	PR	10/02/2012	GW	077-09410	MCDANIEL 2-9B	PR	<input checked="" type="checkbox"/>
292518	WELL	PR	03/17/2009	GW	077-09409	MCDANIEL 2-15C	PR	<input checked="" type="checkbox"/>
292519	WELL	PR	03/21/2011	GW	077-09408	MCDANIEL 2-15B	PR	<input checked="" type="checkbox"/>
292520	WELL	TA	01/29/2014	GW	077-09407	MCDANIEL 2-15A	PR	<input checked="" type="checkbox"/>
292521	WELL	PR	07/16/2009	GW	077-09406	MCDANIEL 2-16C	PR	<input checked="" type="checkbox"/>
292522	WELL	PR	03/17/2009	GW	077-09405	MCDANIEL 2-16B	PR	<input checked="" type="checkbox"/>

292523	WELL	PR	03/17/2009	GW	077-09404	MCDANIEL 2-16A	PR	<input checked="" type="checkbox"/>
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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

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY	Stickers peeling on signs.		

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	16	SATISFACTORY			
Pig Station	1	SATISFACTORY			
Bird Protectors	4	SATISFACTORY			
Plunger Lift	16	SATISFACTORY			
Ancillary equipment	3	SATISFACTORY	Chemical Injection units		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
METHANOL	1	OTHER	STEEL AST	39.304431,-107.843251
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:			Corrective Date:	
<u>Paint</u>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) 500 gal _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action			Corrective Date	
Comment		Same as 400 bbl tanks		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	400 BBLS	STEEL AST	,
S/A/V:			Comment:	
Corrective Action:			Corrective Date:	
<u>Paint</u>				
Condition				
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<u>Berms</u>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
		Walls Sufficent		Adequate
Corrective Action			Corrective Date	
Comment		One side of containment is bent in.		

Venting:				
Yes/No		Comment		
Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 334529

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AV: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 278342 Type: WELL API Number: 077-08902 Status: SI Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 278343 Type: WELL API Number: 077-08903 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 278344 Type: WELL API Number: 077-08904 Status: PR Insp. Status: PR

Producing Well

Comment: **PR**

Facility ID: 278346	Type: WELL	API Number: 077-08906	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292512	Type: WELL	API Number: 077-09415	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292513	Type: WELL	API Number: 077-09414	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292514	Type: WELL	API Number: 077-09413	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292515	Type: WELL	API Number: 077-09412	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292516	Type: WELL	API Number: 077-09411	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292517	Type: WELL	API Number: 077-09410	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292518	Type: WELL	API Number: 077-09409	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292519	Type: WELL	API Number: 077-09408	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292520	Type: WELL	API Number: 077-09407	Status: TA	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292521	Type: WELL	API Number: 077-09406	Status: PR	Insp. Status: PR
Producing Well				
Comment: PR				
Facility ID: 292522	Type: WELL	API Number: 077-09405	Status: PR	Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 292523 Type: WELL API Number: 077-09404 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 _____

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
Gravel	Pass	Gravel	Pass			
Waddles	Pass					
Compaction	Pass	Compaction	Pass	MHSP	Pass	
Ditches	Pass	Ditches	Pass			
Drains	Pass					

Inspector Name: CONKLIN, CURTIS

S/A/V: SATISFACTOR Corrective Date: _____
Y _____

Comment: Some rutting on location.

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
675200029	Containment	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3357715