

**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:

08/05/2014

Document Number:

675200338

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 334508 | 334508 | CONKLIN, CURTIS | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 66561Name of Operator: OXY USA INCAddress: PO BOX 27757City: HOUSTON State: TX Zip: 77227

- ☐ 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 |
|-----------------|-------|----------------------------|---------------|
| Kellerby, Shaun | | shuan.kellerby@state.co.us | NW Supervisor |
| Clark, Chris | | chris_clark@oxy.com | |

Compliance Summary:QtrQtr: NWSE Sec: 11 Twp: 9S Range: 94W**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|--------------|--------|-------------|------------|-----------|--------------------|-------------|-------------------------------------|
| 159184 | UIC DISPOSAL | AC | 06/13/2007 | | - | MCDANIEL 11-16 SWD | AC | <input type="checkbox"/> |
| 221743 | WELL | DA | 07/25/1985 | DA | 077-08345 | MCDANIEL 11-11 | DA | <input type="checkbox"/> |
| 221964 | WELL | PR | 06/24/2008 | GW | 077-08566 | MCDANIEL 11-10 | PR | <input checked="" type="checkbox"/> |
| 273822 | WELL | SI | 06/12/2014 | GW | 077-08818 | MC DANIEL 11-8 | PR | <input checked="" type="checkbox"/> |
| 273823 | WELL | PR | 06/01/2011 | GW | 077-08817 | MCDANIEL 11-9 | PR | <input checked="" type="checkbox"/> |
| 273824 | WELL | SI | 09/05/2007 | DSPW | 077-08815 | MCDANIEL 11-16 | SI | <input checked="" type="checkbox"/> |
| 273825 | WELL | AL | 09/23/2005 | LO | 077-08816 | MCDANIEL 11-15 | AL | <input type="checkbox"/> |
| 274048 | WELL | AL | 08/03/2006 | LO | 077-08827 | MCDANIEL 11-14 | AL | <input type="checkbox"/> |
| 296115 | WELL | AL | 06/28/2011 | LO | 077-09651 | MCDANIEL 11-16B | AL | <input type="checkbox"/> |
| 296116 | WELL | PR | 12/14/2010 | GW | 077-09652 | MCDANIEL 11-16A | PR | <input checked="" type="checkbox"/> |
| 296117 | WELL | PA | 10/10/2012 | LO | 077-09653 | MCDANIEL 11-15C | PA | <input checked="" type="checkbox"/> |
| 296118 | WELL | PR | 07/01/2011 | GW | 077-09654 | MCDANIEL 11-9C | PR | <input checked="" type="checkbox"/> |
| 296119 | WELL | PR | 07/01/2011 | GW | 077-09655 | MCDANIEL 11-9B | PR | <input checked="" type="checkbox"/> |
| 296120 | WELL | PR | 06/26/2010 | GW | 077-09650 | MCDANIEL 11-10C | PR | <input checked="" type="checkbox"/> |
| 296121 | WELL | PR | 06/18/2010 | GW | 077-09649 | MCDANIEL 11-10A | PR | <input checked="" type="checkbox"/> |
| 296122 | WELL | PA | 10/10/2012 | LO | 077-09648 | MCDANIEL 11-15A | PA | <input checked="" type="checkbox"/> |
| 296123 | WELL | PA | 10/10/2012 | LO | 077-09647 | MCDANIEL 11-15B | PA | <input checked="" type="checkbox"/> |
| 296124 | WELL | PR | 12/13/2010 | GW | 077-09646 | MCDANIEL 11-10B | PR | <input checked="" type="checkbox"/> |

| | | | | | | | | |
|--------|------|----|------------|----|-----------|----------------|----|-------------------------------------|
| 297881 | WELL | PR | 10/01/2012 | GW | 077-09709 | MCDANIEL 11-9A | PR | <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 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 |
|----------------------|------------------------------|---------|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| CONTAINERS | SATISFACTORY | | | |
| WELLHEAD | SATISFACTORY | | | |

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?**Fencing/:**

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|--------------|------------------------------|---------|-------------------|---------|
| TANK BATTERY | SATISFACTORY | Panels | | |
| WELLHEAD | SATISFACTORY | Panels | | |

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-----------------------------|----|------------------------------|----------------------------|-------------------|---------|
| Emission Control Device | 1 | SATISFACTORY | Lit at time of inspection | | |
| Plunger Lift | 9 | SATISFACTORY | | | |
| Horizontal Heated Separator | 10 | SATISFACTORY | No containment | | |
| Bird Protectors | 6 | SATISFACTORY | | | |
| Ancillary equipment | 3 | SATISFACTORY | Chem units w/ containments | | |

| | | | | |
|--------------------|--------------|-----------------------------------|----------------|------------------|
| Facilities: | | <input type="checkbox"/> New Tank | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS |
| METHANOL | 1 | OTHER | STEEL AST | , |
| S/A/V: | SATISFACTORY | | Comment: | |
| Corrective Action: | | | | Corrective Date: |

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

| | | | | |
|------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| | | | | |

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
|-------------------|--|-----------------|--|

| | |
|---------|------|
| Comment | Same |
|---------|------|

| | | |
|--------------------|-----------------------------------|----------------|
| Facilities: | <input type="checkbox"/> New Tank | Tank ID: _____ |
|--------------------|-----------------------------------|----------------|

| | | | | |
|------------|---|----------|-----------|--------|
| Contents | # | Capacity | Type | SE GPS |
| CONDENSATE | 2 | 300 BBLS | STEEL AST | , |

| | | | | |
|--------|--------------|--|----------|--|
| S/A/V: | SATISFACTORY | | Comment: | |
|--------|--------------|--|----------|--|

| | | | |
|--------------------|--|------------------|--|
| Corrective Action: | | Corrective Date: | |
|--------------------|--|------------------|--|

Paint

| | |
|-----------|------------|
| Condition | Inadequate |
|-----------|------------|

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 | |
| PRODUCED WATER | 2 | 400 BBLS | STEEL AST | , | |
| S/A/V: | SATISFACTORY | | Comment: | | |
| Corrective Action: | | | | Corrective Date: | |
| Paint | | | | | |
| Condition | Adequate | | | | |
| Other (Content) _____ | | | | | |
| Other (Capacity) _____ | | | | | |
| Other (Type) _____ | | | | | |
| Berms | | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance | |
| | | | | | |
| Corrective Action | | | | Corrective Date | |
| Comment | | | | Same | |
| Venting: | | | | | |
| Yes/No | | Comment | | | |
| NO | | | | | |
| Flaring: | | | | | |
| Type | Satisfactory/Action Required | | Comment | Corrective Action | CA Date |
| | | | | | |

Predrill

Location ID: 334508

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/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: 221964 Type: WELL API Number: 077-08566 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 273822 Type: WELL API Number: 077-08818 Status: SI Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 273823 Type: WELL API Number: 077-08817 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 273824 Type: WELL API Number: 077-08815 Status: SI Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: MIT performed on 7/17/2013 DOC#2121967

Facility ID: 296116 Type: WELL API Number: 077-09652 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 296117 Type: WELL API Number: 077-09653 Status: PA Insp. Status: PA

Facility ID: 296118 Type: WELL API Number: 077-09654 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 296119 Type: WELL API Number: 077-09655 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 296120 Type: WELL API Number: 077-09650 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 296121 Type: WELL API Number: 077-09649 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 296122 Type: WELL API Number: 077-09648 Status: PA Insp. Status: PA

Facility ID: 296123 Type: WELL API Number: 077-09647 Status: PA Insp. Status: PA

Facility ID: 296124 Type: WELL API Number: 077-09646 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Facility ID: 297881 Type: WELL API Number: 077-09709 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: CONKLIN, CURTIS

| | | | |
|---|--|------------------------------|------------|
| Comment: <input style="width: 700px;" type="text"/> | | | |
| Corrective Action: _____ | | Date: _____ | |
| Reportable: _____ | GPS: Lat _____ | Long _____ | |
| Proximity to Surface Water: _____ | | Depth to Ground Water: _____ | |
| <u>Water Well:</u> | | | |
| | | Lat _____ | Long _____ |
| DWR Receipt Num: _____ | Owner Name: _____ | GPS : _____ | |
| <u>Field Parameters:</u> | | | |
| <input style="width: 300px;" type="text"/> | | | |
| Sample Location: <input style="width: 400px;" type="text"/> | | | |
| 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 _____

Inspector Name: CONKLIN, CURTIS

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT