

**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:
05/26/2015Document Number:
675201603Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>
	296120	334508	CONKLIN, CURTIS	2A Doc Num: _____

Operator Information:OGCC Operator Number: 66561Name of Operator: OXY USA INCAddress: PO BOX 27757 #110City: 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
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	09/05/2007	GW	077-08566	MCDANIEL 11-10	PR	<input checked="" type="checkbox"/>
273822	WELL	PR	12/01/2014	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	03/06/2014	SI	077-08815	MCDANIEL 11-16	TA	<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	AL	10/10/2012	LO	077-09653	MCDANIEL 11-15C	AL	<input type="checkbox"/>
296118	WELL	PR	07/01/2011	GW	077-09654	MCDANIEL 11-9C	PR	<input checked="" type="checkbox"/>

Inspector Name: CONKLIN, CURTIS

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	AL	10/10/2012	LO	077-09648	MCDANIEL 11-15A	AL	<input type="checkbox"/>
296123	WELL	AL	10/10/2012	LO	077-09647	MCDANIEL 11-15B	AL	<input 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 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**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			
WELLHEAD	SATISFACTORY	No sign at API 077-08815		
TANK LABELS/PLACARDS	SATISFACTORY			

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

Corrective Date: _____

Comment: 970-242-1234

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
WELLHEAD	SATISFACTORY	Panels		
TANK BATTERY	SATISFACTORY	Panels		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	6	SATISFACTORY			
Horizontal Heated Separator	10	SATISFACTORY			
Ancillary equipment	3	SATISFACTORY	Chem unit w/ containment		
Plunger Lift	9	SATISFACTORY			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
METHANOL	1	<50 BBLS	STEEL AST	,	
S/A/V:	SATISFACTORY		Comment:		
Corrective Action:					Corrective Date:

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) 500 gal _____

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: Airs ID 077-0544-001		
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						

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	2	400 BBLS	STEEL AST	,	

Inspector Name: CONKLIN, CURTIS

S/A/V:	SATISFACTORY	Comment:	Airs ID 077-0554-002			
Corrective Action:					Corrective Date:	
<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Corrective Action					Corrective Date	
Comment	Same					

<u>Venting:</u>			
Yes/No	Comment		
NO			

<u>Flaring:</u>					
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date	

Predrill

Location ID: 296120

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 w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____

S/A/V: SATISFACTORY CA Date: _____

CA: _____

Comment: No production equipment attached to well at time of inspection. Last MIT 9/5/2014

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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

Producing Well

Comment: PR w/ plunger

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? _____ 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 REVEGETATIONCropland

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:

Inspector Name: CONKLIN, CURTIS

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					
Ditches	Pass					
Seeding	Pass					
Berms	Pass	Compaction	Pass			
Compaction	Pass	Gravel	Pass			

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

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT