

**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:

06/01/2015

Document Number:

675201605

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	290048	311750	CONKLIN, CURTIS	<input type="checkbox"/>	

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: SENW Sec: 26 Twp: 8S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/16/2011	200303166	PR	PR	SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
278011	WELL	PR	09/05/2007	GW	077-08899	HELLS GULCH FEDERAL 26-3	PR	<input checked="" type="checkbox"/>
278012	WELL	PR	02/01/2015	GW	077-08898	HELLS GULCH FEDERAL 26-4	PR	<input checked="" type="checkbox"/>
278013	WELL	PR	11/01/2008	SI	077-08897	HELLS GULCH FEDERAL 26-5	TA	<input checked="" type="checkbox"/>
278015	WELL	PR	08/01/2011	SI	077-08895	HELLS GULCH FEDERAL 26-6	SI	<input checked="" type="checkbox"/>
290044	WELL	PR	10/01/2014	GW	077-09279	HELLS GULCH FED. 26 -3B	PR	<input checked="" type="checkbox"/>
290045	WELL	PR	01/01/2011	GW	077-09278	HELLS GULCH FED. 26 -3A	PR	<input checked="" type="checkbox"/>
290046	WELL	PR	02/21/2010	SI	077-09277	HELLS GULCH FED. 26 -5B	SI	<input checked="" type="checkbox"/>
290047	WELL	PR	07/09/2014	GW	077-09276	HELLS GULCH FED. 26 -5A	PR	<input checked="" type="checkbox"/>
290048	WELL	PR	10/25/2008	GW	077-09275	HELLS GULCH FED 26-4C	PR	<input checked="" type="checkbox"/>
290049	WELL	PR	05/23/2014	GW	077-09274	HELLS GULCH FED. 26 -4B	PR	<input checked="" type="checkbox"/>

Inspector Name: CONKLIN, CURTIS

290050	WELL	PR	02/01/2015	GW	077-09273	HELLS GULCH FED. 26 -4A	PR	<input checked="" type="checkbox"/>
290051	WELL	PR	02/01/2015	GW	077-09272	HELLS GULCH FED. 26 -3C	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: 970-248-0497

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
STORAGE OF SUPL	SATISFACTORY	Pump, Heater, and chem unit.		

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	12	SATISFACTORY			
Horizontal Heated Separator	8	SATISFACTORY			
Vertical Heated Separator	4	SATISFACTORY			
Bird Protectors	5	SATISFACTORY			
Ancillary equipment	2	SATISFACTORY	Chem unit w/ containment		

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
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Other (Content) _____

Other (Capacity) 500gal _____

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	7	400 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY		Comment: Airs ID 077-0468-001	
Corrective Action:			Corrective Date:	

Paint

Condition	Adequate
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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					

Venting:		
Yes/No	Comment	
NO		

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 290048

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: 278011 Type: WELL API Number: 077-08899 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 278012 Type: WELL API Number: 077-08898 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 278013 Type: WELL API Number: 077-08897 Status: PR Insp. Status: TA

Idle Well

Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: _____
 S/A/V: SATISFACTORY CA Date: _____
 CA: _____
 Comment: **Approved Form 4 on file**

Facility ID: 278015 Type: WELL API Number: 077-08895 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/A/V: SATISFACTORY CA Date: _____
 CA: _____
 Comment: **Last production Aug 2011. MIT 11/8/2011**

Facility ID: 290044 Type: WELL API Number: 077-09279 Status: PR Insp. Status: PR

Producing Well

Comment: **PR w/ plunger**

Facility ID: 290045 Type: WELL API Number: 077-09278 Status: PR Insp. Status: PR

Producing Well

Comment: **PR w/ plunger**

Facility ID: 290046 Type: WELL API Number: 077-09277 Status: PR Insp. Status: SI

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/A/V: SATISFACTORY CA Date: _____
 CA: _____
 Comment: **10 day notice received for MIT**

Facility ID: 290047 Type: WELL API Number: 077-09276 Status: PR Insp. Status: PR

Producing Well

Comment: **PR w/ plunger**

Facility ID: 290048 Type: WELL API Number: 077-09275 Status: PR Insp. Status: PR

Producing Well

Comment: **PR w/ plunger**

Facility ID: 290049 Type: WELL API Number: 077-09274 Status: PR Insp. Status: PR

Producing Well

Comment: **PR w/ plunger**

Facility ID: 290050 Type: WELL API Number: 077-09273 Status: PR Insp. Status: PR

Producing Well

Comment: **PR w/ plunger**

Facility ID: 290051 Type: WELL API Number: 077-09272 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:

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? _____

Inspector Name: CONKLIN, CURTIS

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

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

Y

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

