

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



Inspection Date:
01/11/2016
Document Number:
675202398
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>334198</u>	<u>334198</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 #110</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	

Compliance Summary:

QtrQtr: NENW Sec: 14 Twp: 9S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/05/2014	675200335			SATISFACTORY			No
08/03/2011	200317337	SR	PR	ACTION REQUIRED			Yes

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
285903	WELL	PR	07/01/2014	GW	077-09115	MCDANIEL 14-4	PR	<input checked="" type="checkbox"/>
285905	WELL	PR	08/07/2007	GW	077-09116	MCDANIEL 14-3	PR	<input checked="" type="checkbox"/>
286057	WELL	PR	02/01/2015	GW	077-09119	MCDANIEL 15-1	PR	<input checked="" type="checkbox"/>
286058	WELL	PR	12/20/2010	GW	077-09118	MCDANIEL 11-14	PR	<input checked="" type="checkbox"/>
295603	WELL	PR	07/01/2010	GW	077-09606	MCDANIEL 11-14C	PR	<input checked="" type="checkbox"/>
295604	WELL	PR	05/18/2015	GW	077-09605	MCDANIEL 14-4A	PR	<input checked="" type="checkbox"/>
295605	WELL	PR	06/11/2012	GW	077-09604	MCDANIEL 14-4B	PR	<input checked="" type="checkbox"/>
295606	WELL	PR	04/25/2012	GW	077-09603	MCDANIEL 14-4C	PR	<input checked="" type="checkbox"/>
295607	WELL	PR	06/11/2012	GW	077-09602	MCDANIEL 14-5A	PR	<input checked="" type="checkbox"/>
295608	WELL	PR	12/04/2013	GW	077-09601	MCDANIEL 14-3C	PR	<input checked="" type="checkbox"/>

295609	WELL	PR	06/11/2012	GW	077-09600	MCDANIEL 14-3A	PR	<input checked="" type="checkbox"/>
295610	WELL	PR	06/11/2012	GW	077-09599	MCDANIEL 14-3B	PR	<input checked="" type="checkbox"/>
295611	WELL	PR	07/13/2010	GW	077-09598	MCDANIEL 15-1C	PR	<input checked="" type="checkbox"/>
295612	WELL	PR	08/16/2011	GW	077-09597	MCDANIEL 15-1B	PR	<input checked="" type="checkbox"/>
295613	WELL	PR	07/19/2010	GW	077-09596	MCDANIEL 15-1A	PR	<input checked="" type="checkbox"/>
295614	WELL	PR	08/03/2010	GW	077-09595	MCDANIEL 14-6A	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
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: _____

Comment: 248-0497

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

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			Date:

Facilities:	<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
METHANOL	1	1000 GAL	STEEL AST	,
S/AR	SATISFACTORY	Comment:		
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

Corrective Action				Corrective Date
Comment	Same			

Facilities:	<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment: AIRS ID 077-0519-001		
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	NO
Comment	

Flaring:

Type		Satisfactory/Action Required
Comment:		

Corrective Action: _____	Correct Action Date: _____
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Predrill

Location ID: 334198

Site Preparation:

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

S/AR: _____

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

Form 2A COAs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

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: 285903 Type: WELL API Number: 077-09115 Status: PR Insp. Status: PR

Facility ID: 285905 Type: WELL API Number: 077-09116 Status: PR Insp. Status: PR

Facility ID: 286057 Type: WELL API Number: 077-09119 Status: PR Insp. Status: PR

Facility ID: 286058 Type: WELL API Number: 077-09118 Status: PR Insp. Status: PR

Facility ID: 295603 Type: WELL API Number: 077-09606 Status: PR Insp. Status: PR

Facility ID:	295604	Type:	WELL	API Number:	077-09605	Status:	PR	Insp. Status:	PR
Facility ID:	295605	Type:	WELL	API Number:	077-09604	Status:	PR	Insp. Status:	PR
Facility ID:	295606	Type:	WELL	API Number:	077-09603	Status:	PR	Insp. Status:	PR
Facility ID:	295607	Type:	WELL	API Number:	077-09602	Status:	PR	Insp. Status:	PR
Facility ID:	295608	Type:	WELL	API Number:	077-09601	Status:	PR	Insp. Status:	PR
Facility ID:	295609	Type:	WELL	API Number:	077-09600	Status:	PR	Insp. Status:	PR
Facility ID:	295610	Type:	WELL	API Number:	077-09599	Status:	PR	Insp. Status:	PR
Facility ID:	295611	Type:	WELL	API Number:	077-09598	Status:	PR	Insp. Status:	PR
Facility ID:	295612	Type:	WELL	API Number:	077-09597	Status:	PR	Insp. Status:	PR
Facility ID:	295613	Type:	WELL	API Number:	077-09596	Status:	PR	Insp. Status:	PR
Facility ID:	295614	Type:	WELL	API Number:	077-09595	Status:	PR	Insp. Status:	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. Waste and Debris removed? _____

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 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 _____

Inspector Name: CONKLIN, CURTIS

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: Could not do complete stormwater inspection due to snow cover.

CA: _____

Pits: NO SURFACE INDICATION OF PIT