

**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:

01/15/2016

Document Number:

675202426

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334528	334528	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: SWSE Sec: 26 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)
07/11/2014	675200216			SATISFACTORY			No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
285683	WELL	PR	11/03/2015	GW	077-09095	CURRIER 26-15	PR	<input checked="" type="checkbox"/>
285684	WELL	PR	08/31/2012	GW	077-09096	CURRIER 26-16	PR	<input checked="" type="checkbox"/>
285685	WELL	SI	07/09/2015	GW	077-09097	CURRIER 26-14	SI	<input checked="" type="checkbox"/>
285687	WELL	PR	03/20/2014	GW	077-09098	CURRIER 26-10	PR	<input checked="" type="checkbox"/>
285688	WELL	PR	05/30/2012	GW	077-09099	CURRIER 26-9C	PR	<input checked="" type="checkbox"/>
285692	WELL	PR	04/10/2015	GW	077-09100	CURRIER 35-2	PR	<input checked="" type="checkbox"/>
285694	WELL	PR	01/01/2011	GW	077-09101	CURRIER 35-1	PR	<input checked="" type="checkbox"/>
285696	WELL	PR	02/01/2015	GW	077-09102	CURRIER 25-13	PR	<input checked="" type="checkbox"/>
285699	WELL	PR	02/08/2008	GW	077-09103	CURRIER 35-3	PR	<input checked="" type="checkbox"/>
285702	WELL	PR	01/01/2011	GW	077-09104	CURRIER 36-4	PR	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: CONKLIN, CURTIS

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
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

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

Comment: **970-249-0497**

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
LOCATION	SATISFACTORY			

Equipment:				
Type:	#	Satisfactory/Action Required:		
Comment				
Corrective Action				Date:

Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
CONDENSATE	5	300 BBLS	STEEL AST	,
S/AR	SATISFACTORY	Comment: AIRS ID 077-0487-001		
Corrective Action:				Corrective Date:

Paint	
Condition	Adequate

Inspector Name: CONKLIN, CURTIS

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:	

Predrill

Location ID: 334528

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: 285683 Type: WELL API Number: 077-09095 Status: PR Insp. Status: PR

Facility ID: 285684 Type: WELL API Number: 077-09096 Status: PR Insp. Status: PR

Facility ID: 285685 Type: WELL API Number: 077-09097 Status: SI Insp. Status: SI

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: _____

S/A/V: SATISFACTORY

CA Date: _____

CA: _____

Comment: MIT 7/6/15

Facility ID: 285687 Type: WELL API Number: 077-09098 Status: PR Insp. Status: PR

Facility ID: 285688	Type: WELL	API Number: 077-09099	Status: PR	Insp. Status: PR
Facility ID: 285692	Type: WELL	API Number: 077-09100	Status: PR	Insp. Status: PR
Facility ID: 285694	Type: WELL	API Number: 077-09101	Status: PR	Insp. Status: PR
Facility ID: 285696	Type: WELL	API Number: 077-09102	Status: PR	Insp. Status: PR
Facility ID: 285699	Type: WELL	API Number: 077-09103	Status: PR	Insp. Status: PR
Facility ID: 285702	Type: WELL	API Number: 077-09104	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:

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. Waste and Debris removed? _____

CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? _____

CM _____

CA _____ CA Date _____

Inspector Name: CONKLIN, CURTIS

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 _____

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

Inspector Name: CONKLIN, CURTIS

S/A/V: _____ Corrective Date: _____

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

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT