

**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:

01/18/2016

Document Number:

675202438

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334412	334412	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
Conklin, Curtis		curtis.conklin@state.co.us	Area 132 Inspector

Compliance Summary:QtrQtr: NENE Sec: 18 Twp: 10S Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/27/2015	675201109			SATISFACTORY			No
01/27/2015	675201108			SATISFACTORY			No

Inspector Comment:Inspection to pass final reclamation on AL wells only. no evidence of wells.**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
256589	WELL	PA	10/26/2012	GW	077-08711	MY WAY RANCH 18-1	PA	<input type="checkbox"/>
282468	WELL	PR	08/21/2006	GW	077-08998	MY WAY RANCH 18-2	PR	<input type="checkbox"/>
282469	WELL	PR	08/27/2006	GW	077-08997	MY WAY RANCH 18-7	PR	<input type="checkbox"/>
282470	WELL	PR	06/24/2008	GW	077-08996	MY WAY RANCH 18-8	PR	<input type="checkbox"/>
284294	WELL	PR	04/18/2006	GW	077-09048	MY WAY RANCH 18-1A	PR	<input type="checkbox"/>
300424	WELL	AL	06/08/2011	LO	077-09890	COURY 18-2C	AL	<input checked="" type="checkbox"/>
300425	WELL	AL	06/08/2011	LO	077-09891	COURY 18-1B	AL	<input checked="" type="checkbox"/>
300426	WELL	AL	06/08/2011	LO	077-09892	COURY 18-1C	AL	<input checked="" type="checkbox"/>
300427	WELL	AL	06/08/2011	LO	077-09893	COURY 18-1D	AL	<input checked="" type="checkbox"/>
300428	WELL	AL	06/08/2011	LO	077-09894	COURY 18-2A	AL	<input checked="" type="checkbox"/>

300429	WELL	AL	06/08/2011	LO	077-09895	COURY 18-2B	AL	<input checked="" type="checkbox"/>
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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

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Emergency Contact Number (S/AR): _____

Corrective Date: _____

Comment: _____

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

Equipment:

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

Venting:

Yes/No	
Comment	

Flaring:

Type	Satisfactory/Action Required

Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 334412

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: <u>300424</u>	Type: <u>WELL</u>	API Number: <u>077-09890</u>	Status: <u>AL</u>	Insp. Status: <u>AL</u>
Facility ID: <u>300425</u>	Type: <u>WELL</u>	API Number: <u>077-09891</u>	Status: <u>AL</u>	Insp. Status: <u>AL</u>
Facility ID: <u>300426</u>	Type: <u>WELL</u>	API Number: <u>077-09892</u>	Status: <u>AL</u>	Insp. Status: <u>AL</u>
Facility ID: <u>300427</u>	Type: <u>WELL</u>	API Number: <u>077-09893</u>	Status: <u>AL</u>	Insp. Status: <u>AL</u>
Facility ID: <u>300428</u>	Type: <u>WELL</u>	API Number: <u>077-09894</u>	Status: <u>AL</u>	Insp. Status: <u>AL</u>

Facility ID: 300429 Type: WELL API Number: 077-09895 Status: AL Insp. Status: AL

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 _____

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? _____

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

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT