

**FORM
INSP**

Rev
X/15

**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:
11/04/2016
Submitted Date:
11/04/2016
Document Number:
675203554

FIELD INSPECTION FORM

Loc ID 324331 Inspector Name: CONKLIN, CURTIS On-Site Inspection 2A Doc Num: _____

Status Summary:

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED

Operator Information:

OGCC Operator Number: 16700
Name of Operator: CHEVRON USA INC
Address: 6301 DEAUVILLE BLVD
City: MIDLAND State: TX Zip: 79706

Findings:

1 Number of Comments
0 Number of Corrective Actions
 Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Justus, Julie	(970) 257-6042	jjustus@chevron.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
279457	WELL	PR	07/11/2006	GW	045-11039	SKINNER RIDGE 698-12-3	PR

General Comment:

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume			

In Containment: No

Comment:

Multiple Spills and Releases?

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
METHANOL	1	<50 BBLs	STEEL AST		,
Comment: <input type="text"/>					
Corrective Action: <input type="text"/>					Date: <input type="text"/>

Paint

Condition Adequate

Other (Content)

Other (Capacity)

Other (Type)

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment: <input type="text"/>				
Corrective Action: <input type="text"/>				Date: <input type="text"/>

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	400 BBLs	STEEL AST		,
Comment: <input type="text"/>					
Corrective Action: <input type="text"/>					Date: <input type="text"/>

Paint

Condition Adequate

Other (Content)

Other (Capacity)

Other (Type)

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Comment: <input type="text"/>				

Corrective Action:		Date:	
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Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 279457 Type: WELL API Number: 045-11039 Status: PR Insp. Status: PR

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	286032	1433462	