

**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:

02/16/2017

Submitted Date:

02/21/2017

Document Number:

673404092

**FIELD INSPECTION FORM**

Loc ID 313036 Inspector Name: Waldron, Emily 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:**

- 6 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

**Contact Information:**

| Contact Name  | Phone          | Email                 | Comment                         |
|---------------|----------------|-----------------------|---------------------------------|
| Brown, Lora   | 307-352-5120   | lorabrown@chevron.com |                                 |
| Fillpot, Greg | (307) 299-3829 | gfillpot@hilcorp.com  | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name   | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 223402      | WELL | PR     | 04/01/2015  | GW         | 081-06766 | DUNCAN UNIT 1 3 | PR          |

**General Comment:**

**Location**

|                    |                             |       |  |
|--------------------|-----------------------------|-------|--|
| <b>Lease Road:</b> |                             |       |  |
| Type               | Access                      |       |  |
| comment:           | Access road developing ruts |       |  |
| Corrective Action: |                             | Date: |  |

Overall Good:

|                      |   |       |  |
|----------------------|---|-------|--|
| <b>Signs/Marker:</b> |   |       |  |
| Type                 | WELLHEAD                                  |       |  |
| Comment:             |   |       |  |
| Corrective Action:   |   | Date: |  |
| Type                 | CONTAINERS                                |       |  |
| Comment:             | 500 gallon triethlyne glycol at seperator |       |  |
| Corrective Action:   |   | Date: |  |
| Type                 | BATTERY                                   |       |  |
| Comment:             |   |       |  |
| Corrective Action:   |   | Date: |  |
| Type                 | TANK LABELS/PLACARDS                      |       |  |
| Comment:             |   |       |  |
| Corrective Action:   |   | Date: |  |

|                           |              |       |       |
|---------------------------|--------------|-------|-------|
| Emergency Contact Number: |              |       |       |
| Comment:                  | 307-352-5100 |       |       |
| Corrective Action:        |              | Date: | _____ |

Overall Good:

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

Multiple Spills and Releases?

|                                   |     |       |                 |
|-----------------------------------|-----|-------|-----------------|
| <b>Equipment:</b>                 |     |       | corrective date |
| Type: Horizontal Heater Treater   | # 1 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Deadman # & Marked          | # 4 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Horizontal Heated Separator | # 1 |       |                 |
| Comment:                          |     |       |                 |
| Corrective Action:                |     | Date: |                 |
| Type: Gas Meter Run               | # 1 |       |                 |

|                       |     |  |       |
|-----------------------|-----|--|-------|
| Comment:              |     |  |       |
| Corrective Action:    |     |  | Date: |
| Type: Plunger Lift    | # 1 |  |       |
| Comment:              |     |  |       |
| Corrective Action:    |     |  | Date: |
| Type: Bird Protectors | #   |  |       |
| Comment:              |     |  |       |
| Corrective Action:    |     |  | Date: |

**Tanks and Berms:**

| Contents           | # | Capacity | Type             | Tank ID | SE GPS                |
|--------------------|---|----------|------------------|---------|-----------------------|
| CONDENSATE         | 1 | 400 BBLs | HEATED STEEL AST |         | 40.987710,-108.676350 |
| Comment:           |   |          |                  |         |                       |
| Corrective Action: |   |          |                  |         | Date:                 |

**Paint**

|                  |          |  |
|------------------|----------|--|
| Condition        | Adequate |  |
| Other (Content)  |          |  |
| Other (Capacity) |          |  |
| Other (Type)     |          |  |

**Berms**

| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| Earth              | Adequate |                     |                     | Adequate    |
| Comment:           |          |                     |                     |             |
| Corrective Action: |          |                     |                     | Date:       |

**Venting:**

|                    |    |       |
|--------------------|----|-------|
| Yes/No             | NO |       |
| Comment:           |    |       |
| Corrective Action: |    | Date: |

**Flaring:**

|                    |       |
|--------------------|-------|
| Type               |       |
| Comment:           |       |
| Corrective Action: | Date: |

**Inspected Facilities**

Facility ID: 223402 Type: WELL API Number: 081-06766 Status: PR Insp. Status: PR

**Producing Well**

Comment:

Corrective Action:

Date:

**Reclamation - Storm Water - Pit**

**Storm Water:**

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

Comment:

Corrective Action:

Date:

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

| Comment   | User     | Date       |
|---|----------|------------|
| <a href="#">Form 10 in process document number 401165724.</a> | waldrone | 02/21/2017 |

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description          | URL   |
|--------------|----------------------|---|
| 401215795    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080717">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080717</a> |
| 673404112    | Inspection Photo     | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080686">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080686</a> |