

**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:

673404095**FIELD INSPECTION FORM**
 Loc ID 313206 Inspector Name: Waldron, Emily On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 16700Name of Operator: CHEVRON USA INCAddress: 6301 DEAUVILLE BLVDCity: MIDLAND State: TX Zip: 79706**Status Summary:**

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

Findings:5 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|---------------|----------------|-----------------------|---------------------------------|
| Fillpot, Greg | (307) 299-3829 | gfillpot@hilcorp.com | All Inspections |
| Brown, Lora | 307-352-5120 | lorabrown@chevron.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|
| 273273 | WELL | PR | 11/01/2013 | GW | 081-07199 | VAN SCHAICK A-7 | PR |

General Comment:

LocationOverall Good: ☒

| | | | |
|----------------------|---|-------|--|
| Signs/Marker: | | | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | CONTAINERS | | |
| Comment: | 500 gallon methanol at meter run 500 gallon triethlyne glycol at seperator | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 307-352-5100

Corrective Action:

Date: _____

Overall Good: ☒

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

| | | | |
|---------------------------------|-----|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Pump Jack | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bird Protectors | # | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Horizontal Heater Treater | # 1 | | |
| Comment: | | | |

| | | | |
|--------------------|--|-------|--|
| Corrective Action: | | Date: | |
|--------------------|--|-------|--|

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS | |
|------------|---|----------|------------------|---------|-----------------------|--|
| CONDENSATE | 2 | 200 BBLs | HEATED STEEL AST | | 40.982840,-108.670230 | |

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

Paint

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

Berms

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

Venting:

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

Flaring:

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

| Inspected Facilities | | | | | | | | | |
|----------------------|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 273273 | Type: | WELL | API Number: | 081-07199 | 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | | | | | |
| Berms | Pass | | | | | |
| Compaction | Pass | | | | | |

Comment: [No apparent soil migration; erosion or soil movement.](#)

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|---|----------|------------|
| Form 10 in process document number 401165724. | 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 |
|--------------|----------------------|---|
| 401215799 | INSPECTION SUBMITTED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080720 |
| 673404115 | Inspection Photo | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080689 |