

**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:

07/26/2017

Submitted Date:

07/31/2017

Document Number:

687900200**FIELD INSPECTION FORM**

Loc ID 324494 Inspector Name: DURAN, JOHN On-Site Inspection ☐ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 66561Name of Operator: OXY USA INCAddress: PO BOX 27757 #110City: HOUSTON State: TX Zip: 77227-**Status Summary:**

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

Findings:4 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|------------------|---------------------------|-------------------------|---------------------|
| Giussani, Albert | 806-894-0200/806-638-1296 | albert_giussani@oxy.com | Engineering Advisor |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 211782 | WELL | SI | 03/19/2015 | GW | 055-06017 | KOSCOVE 1 | SI |

General Comment:

LocationOverall Good: ☒

| | | | |
|----------------------|----------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☒

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

In Containment: No

Comment: ☐ Multiple Spills and Releases?

| | | | |
|---------------------------|-----------------------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Wellhead and plumbing | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Venting:

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

Flaring:

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

| Inspected Facilities | | | | | | | | | |
|--|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 211782 | Type: | WELL | API Number: | 055-06017 | Status: | SI | Insp. Status: | SI |
| Idle Well | | | | | | | | | |
| Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____ | | | | | | | | | |
| Comment: <input type="text" value="Passed MiT on (05/27/15)."/> | | | | | | | | | |
| Corrective Action: <input type="text"/> 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 | Gravel | Pass | | | |

Comment:

Corrective Action:

Date: _____

Pits: ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

| Comment | User | Date |
|---|--------|------------|
| Passed MiT on (05/27/15). This well is 250' from dirt road. | duranj | 07/31/2017 |