

**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:

01/25/2016

Document Number:

675202441

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334543	334543	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
Clark, Chris		chris_clark@oxy.com	

**Compliance Summary:**QtrQtr: NESE Sec: 10 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)
07/13/2015	675201772			SATISFACTORY			No
02/10/2015	675201187			SATISFACTORY			No
08/13/2014	675200400			SATISFACTORY			No

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
243	WELL	PR	10/14/2008	GW	077-09482	HAWKINS RANCH 10-8C	PR	<input checked="" type="checkbox"/>
370	WELL	PR	02/01/2015	GW	077-09483	HAWKINS RANCH 10-9	PR	<input checked="" type="checkbox"/>
371	WELL	PR	10/19/2008	GW	077-09484	HAWKINS RANCH 10-9A	PR	<input checked="" type="checkbox"/>
372	WELL	PR	11/17/2008	GW	077-09485	HAWKINS RANCH 10-8B	PR	<input checked="" type="checkbox"/>
386	WELL	PR	09/28/2008	GW	077-09486	HAWKINS RANCH 10-7C	PR	<input checked="" type="checkbox"/>
387	WELL	PR	10/12/2008	GW	077-09487	HAWKINS RANCH 10-7B	PR	<input checked="" type="checkbox"/>
388	WELL	PR	12/09/2008	GW	077-09488	HAWKINS RANCH 10-6	PR	<input checked="" type="checkbox"/>
389	WELL	PR	01/06/2009	GW	077-09489	HAWKINS RANCH 10-7A	PR	<input checked="" type="checkbox"/>
390	WELL	PR	07/19/2010	GW	077-09490	HAWKINS RANCH 10-7	PR	<input checked="" type="checkbox"/>

Inspector Name: CONKLIN, CURTIS

391	WELL	PR	11/02/2008	GW	077-09491	HAWKINS RANCH 10-6B	PR	X
392	WELL	PR	10/19/2008	GW	077-09492	HAWKINS RANCH 10-6A	PR	X
393	WELL	PR	12/01/2014	GW	077-09493	HAWKINS RANCH 10-10A	PR	X
394	WELL	PR	12/09/2008	GW	077-09494	HAWKINS RANCH 10-10	PR	X
395	WELL	PR	08/01/2012	GW	077-09495	HAWKINS RANCH 10-8	PR	X
294989	WELL	PR	09/22/2008	GW	077-09538	HAWKINS RANCH 10-8A	PR	X
294993	WELL	PR	11/28/2008	GW	077-09537	HAWKINS RANCH 10-6C	PR	X

**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
Access	SATISFACTORY			

**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: \_\_\_\_\_

Comment: 970-248-0497

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?

<b>Fencing/:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

<b>Equipment:</b>				
Type:	#	Satisfactory/Action Required:		
Comment				
Corrective Action				Date:

<b>Facilities:</b>				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	1000 GAL	STEEL AST	,
S/AR	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

<b>Paint</b>	
Condition	Adequate
Other (Content) _____	
Other (Capacity) _____	
Other (Type) _____	

<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action			Corrective Date	
Comment				

<b>Facilities:</b>				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	400 BBLS	STEEL AST	,
S/AR	SATISFACTORY		Comment: AIRS ID 077-0477-022	
Corrective Action:				Corrective Date:

<b>Paint</b>	
Condition	Adequate
Other (Content) _____	
Other (Capacity) _____	
Other (Type) _____	

<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action			Corrective Date	
Comment				

<b>Venting:</b>	
Yes/No	NO

Comment	
---------	--

**Flaring:**

Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

**Predrill**

Location ID: 334543

**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: 243 Type: WELL API Number: 077-09482 Status: PR Insp. Status: PR

Facility ID: 370 Type: WELL API Number: 077-09483 Status: PR Insp. Status: PR

Facility ID: 371 Type: WELL API Number: 077-09484 Status: PR Insp. Status: PR

Facility ID: <u>372</u>	Type: <u>WELL</u>	API Number: <u>077-09485</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>386</u>	Type: <u>WELL</u>	API Number: <u>077-09486</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>387</u>	Type: <u>WELL</u>	API Number: <u>077-09487</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>388</u>	Type: <u>WELL</u>	API Number: <u>077-09488</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>389</u>	Type: <u>WELL</u>	API Number: <u>077-09489</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>390</u>	Type: <u>WELL</u>	API Number: <u>077-09490</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>391</u>	Type: <u>WELL</u>	API Number: <u>077-09491</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>392</u>	Type: <u>WELL</u>	API Number: <u>077-09492</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>393</u>	Type: <u>WELL</u>	API Number: <u>077-09493</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>394</u>	Type: <u>WELL</u>	API Number: <u>077-09494</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>395</u>	Type: <u>WELL</u>	API Number: <u>077-09495</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>294989</u>	Type: <u>WELL</u>	API Number: <u>077-09538</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>294993</u>	Type: <u>WELL</u>	API Number: <u>077-09537</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>

### 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? \_\_\_\_\_

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 \_\_\_\_\_

Inspector Name: CONKLIN, CURTIS

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: Could not do complete stormwater inspection due to snow cover.

CA: \_\_\_\_\_

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