

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



DE	ET	OE	ES
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Inspection Date:
03/01/2013

Document Number:
668400972

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>BROWNING, CHUCK</u>
	<u>287350</u>	<u>334499</u>		

Operator Information:

OGCC Operator Number: <u>66561</u>	Name of Operator: <u>OXY USA INC</u>
Address: <u>PO BOX 27757</u>	
City: <u>HOUSTON</u>	State: <u>TX</u> Zip: <u>77227</u>

Contact Information:

Contact Name	Phone	Email	Comment
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Clark, Chris	970-263-3651	chris_clark@oxy.com	Field Regulatory Lead-Piceance

Compliance Summary:

QtrQtr: <u>SWSW</u>	Sec: <u>15</u>	Twp: <u>9S</u>	Range: <u>94W</u>				
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/11/2012	668400842	PR	PR	S	I		N
10/11/2011	200325764	PR	PR	S			N
09/03/2010	200270901	ES	PR	U			N
03/02/2010	200234822	PR	PR	S			N

Inspector Comment:

7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
287345	WELL	PR	12/17/2009	GW	077-09167	WOODS-SPANGLER 15-11	X
287346	WELL	PR	05/17/2012	GW	077-09166	WOODS-SPANGLER 15-12	X
287347	WELL	PR	01/01/2011	GW	077-09165	WOODS-SPANGLER 15-13	X
287348	WELL	PR	12/11/2007	GW	077-09164	WOODS-SPANGLER 15-14	X
287349	WELL	PR	04/26/2007	GW	077-09163	WOODS-SPANGLER 21-1	X
287350	WELL	PR	10/20/2010	GW	077-09162	WOODS-SPANGLER 22-4	X
288356	WELL	PR	12/29/2007	GW	077-09214	WOODS-SPANGLER 16-16	X

Equipment:

Location Inventory

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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/Unsatisfactory	comment	Corrective Action	Date
Main	Satisfactory			
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory			

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 334499

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Comment: _____

CA: _____ **Date:** _____

Wildlife BMPs:

Comment: _____

CA: _____ **Date:** _____

Stormwater:

Erosion BMPs	Present	Other BMPs	Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____
 Other BMPs: _____

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: 287345 Type: WELL API Number: 077-09167 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Facility ID: 287346 Type: WELL API Number: 077-09166 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Facility ID: 287347 Type: WELL API Number: 077-09165 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Facility ID: 287348 Type: WELL API Number: 077-09164 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Facility ID: 287349 Type: WELL API Number: 077-09163 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Facility ID: 287350 Type: WELL API Number: 077-09162 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

Facility ID: 288356 Type: WELL API Number: 077-09214 Status: PR Insp. Status: PR

Producing Well

Comment: 7-Wellheads, 1-quad and 1-triple separator, 4-300 bbl & 3-300 bbl steel tanks w/ metal berms. Combuster Telemetry tower. Pits closed and area stabilized.

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:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

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. Debris removed? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? Pass CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass CM _____

CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass CM _____

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? Pass CM _____

CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass

Production areas have been stabilized? Pass 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? _____ P _____

Comment: _____

Overall Interim Reclamation Pass

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 _____

Gravel removed _____

Inspector Name: BROWNING, CHUCK

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 _____ Multi-Well Location

Storm Water:

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

S/U/V: Satisfactory _____ Corrective Date: _____
Comment: _____
CA: _____

Attached Documents

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

Document Num	Description	URL
668400972	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3068677