

**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 |
|----|----|----|----|

Inspection Date:

08/01/2013

Document Number:

663801385

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |             |        |                 |                          |             |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection       | 2A Doc Num: |
|                     | 335595      | 335595 | LONGWORTH, MIKE | <input type="checkbox"/> |             |

**Operator Information:**

OGCC Operator Number: 66571 Name of Operator: OXY USA WTP LP

Address: P O BOX 27757

City: HOUSTON State: TX Zip: 77227

**Contact Information:**

| Contact Name    | Phone | Email                      | Comment |
|-----------------|-------|----------------------------|---------|
| IKENOUYE, TERI  |       | teri.ikenouye@state.co.us  |         |
| KELLERBY, SHAUN |       | shaun.kellerby@state.co.us |         |
| Clark, Chris    |       | Chris_Clark@oxy.com        |         |

**Compliance Summary:**

QtrQtr: SENE Sec: 15 Twp: 6S Range: 97W

**Inspector Comment:**

Well CC 697-15-22D (045-12221) was not found on location. Well Abandonment Report (Intent) Form 6 dated 06/06/13 (Doc# 40029828) found in database. No subsequent report was found.

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name            |                                     |
|-------------|------|--------|-------------|------------|-----------|--------------------------|-------------------------------------|
| 277374      | WELL | DA     | 08/19/2005  | GW         | 045-10688 | CASCADE CREEK 697-15-23  | <input checked="" type="checkbox"/> |
| 284592      | WELL | PR     | 12/11/2006  | GW         | 045-12234 | CASCADE CREEK 697-15-21D | <input checked="" type="checkbox"/> |
| 284593      | WELL | PR     | 04/01/2012  | GW         | 045-12224 | CASCADE CREEK 697-15-30D | <input checked="" type="checkbox"/> |
| 284594      | WELL | PR     | 03/25/2013  | GW         | 045-12223 | CASCADE CREEK 697-15-29D | <input checked="" type="checkbox"/> |
| 284595      | WELL | PR     | 03/01/2012  | GW         | 045-12222 | CASCADE CREEK 697-15-31D | <input checked="" type="checkbox"/> |
| 284596      | WELL | TA     | 08/24/2006  | GW         | 045-12221 | CASCADE CREEK 697-15-22D | <input checked="" type="checkbox"/> |

**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/Unsatisfactory | comment | Corrective Action | Date |
|------|-----------------------------|---------|-------------------|------|
| Main | Satisfactory                |         |                   |      |

| <b>Signs/Marker:</b> |                             |         |                   |         |
|----------------------|-----------------------------|---------|-------------------|---------|
| Type                 | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| TANK LABELS/PLACARDS | Satisfactory                |         |                   |         |
| BATTERY              | Satisfactory                |         |                   |         |
| WELLHEAD             | Satisfactory                |         |                   |         |
| CONTAINERS           | Satisfactory                |         |                   |         |

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

| <b>Good Housekeeping:</b> |                             |               |                            |            |
|---------------------------|-----------------------------|---------------|----------------------------|------------|
| Type                      | Satisfactory/Unsatisfactory | Comment       | Corrective Action          | CA Date    |
| UNUSED EQUIPMENT          | Unsatisfactory              | Storage shack | Remove shack from location | 08/31/2013 |

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

| <b>Fencing/:</b> |                             |         |                   |         |
|------------------|-----------------------------|---------|-------------------|---------|
| Type             | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| SEPARATOR        | Satisfactory                |         |                   |         |
| WELLHEAD         | Satisfactory                |         |                   |         |

| <b>Equipment:</b>           |   |                             |         |                   |         |
|-----------------------------|---|-----------------------------|---------|-------------------|---------|
| Type                        | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Bird Protectors             | 4 | Satisfactory                |         |                   |         |
| Plunger Lift                | 4 | Satisfactory                |         |                   |         |
| Horizontal Heated Separator | 4 | Satisfactory                |         |                   |         |

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents   | # | Capacity | Type      | SE GPS               |
|------------|---|----------|-----------|----------------------|
| CONDENSATE | 1 | 400 BBLS | STEEL AST | 39.525430,108.199710 |

S/U/V: Satisfactory Comment: \_\_\_\_\_

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

**Paint**

| 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>Facilities:</b>     |                             | <input type="checkbox"/> New Tank |                     | Tank ID: _____         |                 |
| Contents               | #                           | Capacity                          | Type                | SE GPS                 |                 |
| PRODUCED WATER         | 2                           | 400 BBLS                          | STEEL AST           | ,                      |                 |
| S/U/V:                 | 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>Venting:</b>        |                             |                                   |                     |                        |                 |
| Yes/No                 |                             | Comment                           |                     |                        |                 |
|                        |                             |                                   |                     |                        |                 |
| <b>Flaring:</b>        |                             |                                   |                     |                        |                 |
| Type                   | Satisfactory/Unsatisfactory | Comment                           | Corrective Action   | CA Date                |                 |
|                        |                             |                                   |                     |                        |                 |

**Predrill**

Location ID: 335595

**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: 277374 Type: WELL API Number: 045-10688 Status: DA Insp. Status: DA

Facility ID: 284592 Type: WELL API Number: 045-12234 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Inspector Name: LONGWORTH, MIKE

Facility ID: 284593 Type: WELL API Number: 045-12224 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 284594 Type: WELL API Number: 045-12223 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 284595 Type: WELL API Number: 045-12222 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 284596 Type: WELL API Number: 045-12221 Status: TA Insp. Status: DA

**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? Fail CM Storage shack at well

CA Remove shack from location CA Date 08/31/2013

|   |             |          |               |
|---|-------------|----------|---------------|
| Pit, cellars, rat holes and other bores closed? | <u>Pass</u> | CM _____ |               |
| CA _____  |             |          | CA Date _____ |
| Guy line anchors removed?                       | <u>Pass</u> | CM _____ |               |
| CA _____  |             |          | CA Date _____ |
| Guy line anchors marked?                        | _____       | CM _____ |               |
| CA _____  |             |          | CA Date _____ |

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

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?

Cropland

Top soil replaced                      Recontoured                      Perennial forage re-established

Top soil replaced                      Recontoured                      80% Revegetation

1003 f. Weeds Noxious weeds?

|          |  |
|----------|--|
| Comment: |  |
|----------|--|

Overall Interim Reclamation      In Process

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

|   |   |
|---|---|
| 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 

|                  |                 |                         |                       |               |                          |         |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
| Ditches          | Pass            | Ditches                 | Pass                  |               |                          |         |

Inspector Name: LONGWORTH, MIKE

|            |      |            |      |      |      |                                       |
|------------|------|------------|------|------|------|---------------------------------------|
| Berms      | Pass | Berms      | Pass | MHSP | Pass | Secondary containment under chemicals |
| Gravel     | Pass | Gravel     | Pass |      |      |                                       |
| Compaction | Pass | Compaction | Pass |      |      |                                       |
| Seeding    |      | Culverts   | Pass |      |      |                                       |

S/U/V: Satisfactory Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

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

**COGCC Comments**

| Comment   | User     | Date       |
|---|----------|------------|
| Well CC 697-15-22D (045-12221) was not found on location. Well Abandonment Report (Intent) Form 6 dated 06/06/13 (Doc# 40029828) found in database. No subsequent report was found. | longworm | 08/02/2013 |