

**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:

08/30/2013

Document Number:

663902099

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335902	335902	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
Clark, Chris		Chris_Clark@oxy.com	
KELLERBY, SHAUN		shaun.kellerby@state.co.us	

Compliance Summary:

QtrQtr: LOT 12 Sec: 4 Twp: 6S Range: 97W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/30/2013	663801070			U	F		N
10/09/2012	668500162			S	I		N

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
285254	WELL	AL	12/10/2009	LO	045-12408	CASCADE CREEK 697-4-54D	<input checked="" type="checkbox"/>
285255	WELL	AL	12/10/2009	LO	045-12405	CASCADE CREEK 697-3-41D	<input checked="" type="checkbox"/>
285256	WELL	AL	12/10/2009	LO	045-12406	CASCADE CREEK 697-4-29D	<input checked="" type="checkbox"/>
285257	WELL	AL	12/10/2009	LO	045-12407	CASCADE CREEK 697-4-39D	<input checked="" type="checkbox"/>
285258	WELL	AL	12/10/2009	LO	045-12404	CASCADE CREEK 697-3-25D	<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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER	Satisfactory	Pit Facility # 291970		

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

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Unsatisfactory	Bottles and food wrappers	Pick up trash	09/06/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
PIT	Unsatisfactory	Fence around back of pit has been damaged and several panels partial laying over.	Maintain fencing	09/06/2013

Venting:				
Yes/No	Comment			

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335902

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: 285254 Type: WELL API Number: 045-12408 Status: AL Insp. Status: AL

Facility ID: 285255 Type: WELL API Number: 045-12405 Status: AL Insp. Status: AL

Facility ID: 285256 Type: WELL API Number: 045-12406 Status: AL Insp. Status: AL

Inspector Name: LONGWORTH, MIKE

Facility ID: 285257 Type: WELL API Number: 045-12407 Status: AL Insp. Status: AL

Facility ID: 285258 Type: WELL API Number: 045-12404 Status: AL Insp. Status: AL

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. Debris removed? _____ CM _____
CA _____ CA Date _____
Waste Material Onsite? _____ 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 removed? _____ 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? _____

Inspector Name: LONGWORTH, MIKE

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: Conductor closed since last Inspection
Well plugged _____ Pit mouse/rat holes, cellars backfilled _____ Fail
Debris removed _____ Fail No disturbance /Location never built _____ Fail
Access Roads Regraded _____ Fail Contoured _____ Fail Culverts removed _____ Fail
Gravel removed _____ Fail
Location and associated production facilities reclaimed _____ Fail Locations, facilities, roads, recontoured _____ Fail
Compaction alleviation _____ Dust and erosion control _____ Fail
Non cropland: Revegetated 80% _____ Cropland: perennial forage _____
Weeds present _____ Subsidence _____
Comment: _____
Corrective Action: Begin Final Reclamation Date 09/20/2013
Overall Final Reclamation Fail Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
		Ditches				
Seeding	Fail	Culverts				
Berms		Berms				
Compaction		Compaction				

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

Pits:

Inspector Name: LONGWORTH, MIKE

Pit Type: _____ Lined: _____ Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: _____ 2+ feet Freeboard: _____

Pit (S/U/V): _____ Comment: Location id. 291970

Corrective Action: Date: _____