

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:
12/01/2015

Document Number:
675202278

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>336051</u>	<u>336051</u>	<u>CONKLIN, CURTIS</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>16700</u>
Name of Operator:	<u>CHEVRON USA INC</u>
Address:	<u>6001 BOLLINGER CANYON RD</u>
City:	<u>SAN RAMON</u> State: <u>CA</u> Zip: <u>94583</u>

- 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
Justus, Julie	(970) 257-6042	jjustus@chevron.com	All Inspections

Compliance Summary:

QtrQtr: NWSE Sec: 9 Twp: 6S Range: 98W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/04/2014	675200742			ACTION REQUIRED			No
11/08/2013	663902368			SATISFACTORY			No

Inspector Comment:

Expired permits are being refiled.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
298733	WELL	XX	07/18/2015	LO	045-17396	SKR-698-09-BV 22	XX	<input checked="" type="checkbox"/>
298734	WELL	XX	07/18/2015	LO	045-17397	SKR-698-09-BV 21	XX	<input checked="" type="checkbox"/>
298735	WELL	XX	07/18/2015	LO	045-17398	SKR-698-09-BV 20	XX	<input checked="" type="checkbox"/>
298736	WELL	XX	07/18/2015	LO	045-17399	SKR-698-09-BV 19	XX	<input checked="" type="checkbox"/>
298737	WELL	XX	07/18/2015	LO	045-17400	SKR-698-09-BV 18	XX	<input checked="" type="checkbox"/>
298738	WELL	XX	07/18/2015	LO	045-17401	SKR-698-09-BV 17	XX	<input checked="" type="checkbox"/>
298739	WELL	XX	07/18/2015	LO	045-17402	SKR-698-09-BV 16	XX	<input checked="" type="checkbox"/>
298740	WELL	XX	07/18/2015	LO	045-17403	SKR-698-09-BV 15	XX	<input checked="" type="checkbox"/>
298741	WELL	XX	07/18/2015	LO	045-17404	SKR-698-09-BV 14	XX	<input checked="" type="checkbox"/>
298742	WELL	XX	07/18/2015	LO	045-17405	SKR-698-09-BV 13	XX	<input checked="" type="checkbox"/>

298743	WELL	XX	07/18/2015	LO	045-17406	SKR-698-09-BV 12	XX	✗
298744	WELL	XX	07/18/2015	LO	045-17407	SKR-698-09-BV 11	XX	✗
298745	WELL	XX	07/18/2015	LO	045-17408	SKR-698-09-BV 09	XX	✗
298746	WELL	XX	07/18/2015	LO	045-17409	SKR-698-09-BV 08	XX	✗
298747	WELL	XX	07/18/2015	LO	045-17410	SKR-698-09-BV 07	XX	✗
298748	WELL	XX	07/18/2015	LO	045-17411	SKR-698-09-BV 06	XX	✗
298749	WELL	XX	07/18/2015	LO	045-17412	SKR-698-09-BV 05	XX	✗
298750	WELL	XX	07/18/2015	LO	045-17413	SKR-698-09-BV 04	XX	✗
298751	WELL	XX	07/18/2015	LO	045-17414	SKR-698-09-BV 02	XX	✗
298752	WELL	XX	07/18/2015	LO	045-17415	SKR-698-09-BV 01	XX	✗
298836	WELL	XX	07/18/2015	LO	045-17431	SKR-698-09-BV 10	XX	✗
298837	WELL	XX	07/18/2015	LO	045-17432	SKR-698-09-BV 03	XX	✗
412812	WELL	XX	07/18/2015	LO	045-18626	SKR-698-09-BV 24	XX	✗
412813	WELL	XX	07/18/2015	LO	045-18625	SKR-698-09-BV 23	XX	✗

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
WELLHEAD	ACTION REQUIRED	No signs at conductors or location. Noted on previous inspection DOC# 675200743	Install sign to comply with rule 210.	02/01/2016

Emergency Contact Number (S/A/V): ACTION Corrective Date: 02/01/2016
 Comment: **No emergency contact number.**

Corrective Action:

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

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
PIT	SATISFACTORY			

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 336051

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AV: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Stormwater:

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: 298733 Type: WELL API Number: 045-17396 Status: XX Insp. Status: XX

Facility ID: 298734 Type: WELL API Number: 045-17397 Status: XX Insp. Status: XX

Facility ID: 298735 Type: WELL API Number: 045-17398 Status: XX Insp. Status: XX

Facility ID: 298736 Type: WELL API Number: 045-17399 Status: XX Insp. Status: XX

Facility ID: 298737 Type: WELL API Number: 045-17400 Status: XX Insp. Status: XX

Facility ID: 298738 Type: WELL API Number: 045-17401 Status: XX Insp. Status: XX

Facility ID: <u>298739</u>	Type: <u>WELL</u>	API Number: <u>045-17402</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298740</u>	Type: <u>WELL</u>	API Number: <u>045-17403</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298741</u>	Type: <u>WELL</u>	API Number: <u>045-17404</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298742</u>	Type: <u>WELL</u>	API Number: <u>045-17405</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298743</u>	Type: <u>WELL</u>	API Number: <u>045-17406</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298744</u>	Type: <u>WELL</u>	API Number: <u>045-17407</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298745</u>	Type: <u>WELL</u>	API Number: <u>045-17408</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298746</u>	Type: <u>WELL</u>	API Number: <u>045-17409</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298747</u>	Type: <u>WELL</u>	API Number: <u>045-17410</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298748</u>	Type: <u>WELL</u>	API Number: <u>045-17411</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298749</u>	Type: <u>WELL</u>	API Number: <u>045-17412</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298750</u>	Type: <u>WELL</u>	API Number: <u>045-17413</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298751</u>	Type: <u>WELL</u>	API Number: <u>045-17414</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298752</u>	Type: <u>WELL</u>	API Number: <u>045-17415</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298836</u>	Type: <u>WELL</u>	API Number: <u>045-17431</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>298837</u>	Type: <u>WELL</u>	API Number: <u>045-17432</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>412812</u>	Type: <u>WELL</u>	API Number: <u>045-18626</u>	Status: <u>XX</u>	Insp. Status: <u>XX</u>
Facility ID: <u>412813</u>	Type: <u>WELL</u>	API Number: <u>045-18625</u>	Status: <u>XX</u>	Insp. Status: <u>XX</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. 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? _____

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 _____

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
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Pit Type: Drilling Pit Lined: NO Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

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

Pit (S/A/V): SATISFACTOR Comment: _____

Corrective Action: _____ Date: _____

Attached Documents

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

Document Num	Description	URL
675202289	No signs at wells	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3730986

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)