

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402177469

Date Received:
09/16/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 66561

Name of Operator: OXY USA INC

Address: PO BOX 27757 #110

City: HOUSTON State: TX Zip: 77227-7757

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Wade Ditrich

575-390-2828

Wade_ditrich@oxy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 697000057

Inspection Date: 09/12/2019

FIR Submit Date: 09/13/2019

FIR Status: _____

Inspected Operator Information:

Company Name: OXY USA INC

Company Number: 66561

Address: PO BOX 27757 #110

City: HOUSTON State: TX Zip: 77227-7757

LOCATION - Location ID: 324493

Location Name: GARCIA-627S70W Number: 35NESE County: HUERFANO

Qtrqtr: NESE Sec: 35 Twp: 27S Range: 70W Meridian: 6

Latitude: 37.655840 Longitude: -105.180780

FACILITY - API Number: 05-055-00 Facility ID: 211777

Facility Name: GARCIA (EPA) Number: 1-WD

Qtrqtr: NESE Sec: 35 Twp: 27S Range: 70W Meridian: 6

Latitude: 37.655840 Longitude: -105.180780

CORRECTIVE ACTIONS:

1 CA# 130540

Corrective Action: Per Rule 907.b.(2) Submit impacted soil disposal records to COGCC via eForm Field Inspection Resolution Response (FIRR) to this inspection within 5 days.

Date: 09/18/2019

Response: CA COMPLETED

Date of Completion: 09/13/2019

Operator Comment: Please see attached.

COGCC Decision: _____

COGCC
Representative:

2 CA# 130541

Corrective Action: Obtain discreet soil samples from spill location demonstrating compliance with COGCC Table 910-1 and submit to Commission via Form 19 Supplemental.

Date: 10/11/2019

Operator shall delineate vertical and horizontal extent of release. Confirmation soils samples from spill area shall be obtained to determine compliance with COGCC Table 910-1 constituents prior to requesting closure of spill. All affected soils must be remediated or removed and disposed of at an approved facility. Soil samples from spill location and background location should be submitted on a Form 19 Subsequent. Operator shall attach a copy of the analytical results, a .PDF of COGCC Table 910-1 filled in for each sample location and a sample location map to the Form 19 Subsequent. If soils are to be remediated operator shall submit Form 27 Remediation Plan.

Response: CA COMPLETED

Date of Completion: 09/16/2019

Operator
Comment:

Please see attached.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attachment.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Wade Dittrich

Signed: _____

Title: Environmental Coordinator

Date: 9/16/2019 9:49:24 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
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402177471	Field Analysis
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Total Attach: 1 Files