

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised October 10, 2003

Submit 2 Copies to appropriate
District Office in accordance
with Rule 116 on back
side of form

Release Notification and Corrective Action

nJMW 1327052747

OPERATOR

Initial Report Final Report

Name of Company OXY USA WTP LP <i>16696</i>	Contact BERNAL, THOMAS
Address 329 Marathon Rd, Lakewood	Telephone No. (575) 628-4112
Facility Name INDIAN BASIN GAS PLANT	Facility Type GAS PROCESSING FACILITY

Surface Owner	Mineral Owner INDIAN BASIN	Lease No.
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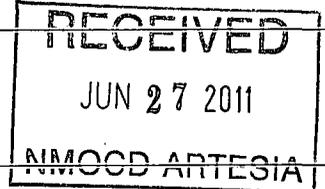
LOCATION OF RELEASE

Unit Letter	Section	Township	Range	Feet from the	North/South Line	Feet from the	East/West Line	County Eddy

Latitude 32°27'52.502" Longitude 104°34'28.004"

NATURE OF RELEASE

Type of Release Gas	Volume of Release 800.9 MCF	Volume Recovered 0
Source of Release Acid Gas Flare	Date and Hour of Occurrence 6/21/2011 5:48:00 PM	Date and Hour of Discovery 6/21/2011 5:48:00 PM
Was Immediate Notice Given? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	If YES, To Whom? MIKE BRATCHER	
By Whom? CLINT KIRKES	Date and Hour 06/23/11 8:55AM	
Was a Watercourse Reached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If YES, Volume Impacting the Watercourse.	



If a Watercourse was Impacted. Describe Fully.*

Describe Cause of Problem and Remedial Action Taken.*

Cause:
ACID GAS COMPRESSOR SHUT DOWN ON SECOND STAGE HIGH DIFFERENTIAL PRESSURE SHUTDOWN. WE ARE STILL TROUBLESHOOTING THE COMPRESSOR TO DETERMINE THE ROOT CAUSE. 6/22/11 CONTACTED CONTRACT COMPRESSION COMPANY TO AID IN THE TROUBLESHOOTING AND REPAIRS OF THE ACID GAS COMPRESSOR. DURING THE TROUBLESHOOTING PROCESS WE DETERMIND WE HAD FAULTY PROCESS SAFETY VALVES. CONTACTED CONTRACT VALVE REPAIR COMPANY TO SERVICE AND REPAIR ALL PROCESS SAFETY VALVES. ALSO DETERMINED THE 1" SAFETY PURGE UNIT SHUTDOWN VALVE WAS LEAKING, WHICH CAUSED OPERATIONAL PROBLEMS WITH THE COMPRESSOR. PROBLEM WITH VALVE WAS CORRECTED. THE VOLUME FLARED IN THIS REPORT INCLUDES THE VOLUME OF 170.73 MCF FROM THE INITIAL REPORT SUBMITTED ON 6/22/11.

Remedial Action Taken:
CALLED OFF SHIFT PERSONNEL TO START WARMING THE SULPHUR PLANT UP IN ORDER FOR IT TO BE PLACED ONLINE IN THE EVENT THAT THE ACID GAS COMPRESSOR CANNOT BE RESTARTED. ALSO CALLED OFF SHIFT PERSONNEL TO HELP TROUBLESHOOT THE COMPRESSOR IN ORDER TO FIND THE ROOT CAUSE. 6/22/11 CONTACTED OXY MEASUREMENT PERSONNEL TO REDUCE THE INLET GAS VOLUME TO THE INDIAN BASIN GAS PLANT. PLACED ACID GAS COMPRESSOR ONLINE AS EXPEDITIOUSLY AS POSSIBLE

Describe Area Affected and Cleanup Action Taken.*

N/A

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.

Signature: <i>Clint Kirkes</i>	<p>OIL CONSERVATION DIVISION</p> <p>Accepted for record NMOCD</p>
Printed Name: Clint Kirkes	

Approved by District Supervisor:

fJMW 1327034125

iJMW 1327053775

2RP-1947

Title: <i>Plant Specialist</i>	Approval Date: SEP 27 2013	Expiration Date:
E-mail Address: clinton_kirkes@oxy.com	Conditions of Approval:	Attached <input type="checkbox"/>
Date: <i>6/23/11</i> Phone: 575-628-4113		

* Attach Additional Sheets If Necessary