Vintage Production California LLC
A subsidiary of Occidental Petroleum Corporation

270 Quail Court, Suite 201
Santa Paula, California 93060
Phone 805.525.8008, Fax 805.525.7372

May 15, 2012

Mr. Dan Searcy, Manager Enforcement
Ventura County APCD
669 County Square Drive
Ventura, CA 93003

Dear Mr. Searcy,

The purpose of this correspondence is to transmit to your office the enclosed Annual Title V report for the Grubb/Rincon facility, Title V PTO 00008.

Should you have any further questions or require additional information please contact me at (805)933-5661.

Sincerely,

Jim Lovins
HES Consultant
Vintage Production California LLC

RECEIVED
VENTURA COUNTY
12 MAY 15 PM 3:30
A.P.C.D.

Ventura County
Air Pollution
Control District

ANNUAL COMPLIANCE CERTIFICATION
SIGNATURE COVER FORM

A copy of each Annual Compliance Certification shall be submitted to Ventura County APCD, at the following address:

Mr. Dan Searcy, Manager Enforcement
Ventura County Air Pollution Control District
669 County Square Drive
Ventura, CA 93003

Confidentiality

All information in a Part 70 permit compliance certification is public information. The Part 70 permit is also public information.

Certification by Responsible Official

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in this compliance certification are true, accurate, and complete.

Signature and Title of Responsible Official:	Date:
William E Sweeney Title: VPC S. Ops Lead	5/15/12

Time Period Covered by Compliance Certification

__04__ / __01_ / _11__ (MM/DD/YY) to ___03 / __31_ / _12___ (MM/DD/YY)

Ventura County
Air Pollution
Control District

ANNUAL COMPLIANCE CERTIFICATION
PERMIT ATTACHMENT FORM

Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: 71.1.N.1	D. Frequency of monitoring Quarterly component inspection
B. Description: Quarterly component inspection. Fugitive Emission Inspection and Prevention Program.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Quarterly inspection of various components in hydrocarbon service utilizing Method 21. Each storage tank is visited daily to confirm that vapor recovery is in operation. Operator verifies that vapor recovery is operational and signs daily report. Records certifying that the system is in operation are maintained at the facility for a minimum of three years.	F. Currently in Compliance? (Y or N): ___Y__ G. Compliance Status? (C or I): ___C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): __Y___ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: 71.1.N.3	D. Frequency of monitoring:
B. Description: Annual Compliance certification verifying integrity of roof and pressure-vacuum valves.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Visual and quarterly inspection utilizing Method 21. Each tank is visited daily to verify the integrity of it's roof. Operator verifies the integrity of the roof and pressure-vacuum valve then signs daily record. Records certifying the system is in operation are maintained at the facility for a minimum of three years.	F. Currently in Compliance? (Y or N): __Y____ G. Compliance Status? (C or I): ___C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N___ *If yes, attach Deviation Summary Form

Ventura County Air Pollution

ANNUAL COMPLIANCE CERTIFICATION DEVIATION SUMMARY FORM

Period Covered by Compliance Certification: 04 / 01 / 11 (MM/DD/YY) to 03 / 31 / 12 (MM/DD/YY)

A. Attachment # or Permit Condition #:	B. Equipment description:	C. Deviation Period:
Attachment 71.1.N.1	Vapor recovery units, main field compressor and wells.	Date & Time Begin: 8/15/11 – 8:30PM
		End: 4/30/11 – 8:00 AM
		When Discovered: Date & Time 8/16/11 – 12:00 AM
D. Parameters monitored: Tanks and VRU units	ELimit:	F. Actual:
G. Probable Cause of Deviation: Main compressor (CP1) went down due to a liquid carry over.	H. Corrective actions taken: Main compressor intake was cleared of liquids and restarted.	

A. Attachment # or Permit Condition #:	B. Equipment description:	C. Deviation Period:
Attachment 71.1.N.1	Main vapor recovery compressor.	Date & Time Begin: 9/20/2011 – 11:15am
		End: 9/20/11 – 11:30am
		When Discovered: Date & Time 9/20/2011 – 11:30am
D. Parameters monitored: Tanks and VRU units	ELimit:	F. Actual:
G. Probable Cause of Deviation: Area wide electric outage caused loss of power to the VRU.	H. Corrective actions taken: Power was restored after approximately 15 minutes and the vapor recovery compressor resumed operation.	

BREAKDOWN REPORT FORM
Ventura County APCD
(805) 654-2797

Company: Vintage Production California LLC
Location: Grubb/Rincon
Permit No.: 0008

Date	Reported By		Time	
	Person	Phone No.	Reported	Corrected
Aug. 15, 2011	Jim Lovins	805.525.8008	8:52 PM	12:00 PM

Failed Equipment:

Main field Compressor

Time Failure Observed:

8:30 PM

1. State how and when breakdown occurred (Be specific).

Main compressor (CP1) at went down due to a liquid carry over. The main compressor collects all of the field gas and VRU gas from the facilities.

2. State how and when it was corrected.

Main compressor intake was cleared of liquids and restarted.

3. Estimate emissions resulting from breakdown (attach calculations).

Sulfur Dioxide (SO_2)_____ Hydrocarbons (HC) _____

Nitrogen Dioxide (NO_2)_____ Particulate Matter (PM)_____

Hydrogen Sulfide (H_2S)_____ Other _____

Signature: _____ _____

Date: _____

BREAKDOWN REPORT FORM

Ventura County APCD
(805) 654-2797

Company: Vintage Production California LLC
Location: Grubb/Rincon
Permit No.: 0008

Date	Reported By		Time	
	Person	Phone No.	Reported	Corrected
09/20/2011	Dan Gremaud	805-525-8008	12:30PM	11:30am

Failed Equipment:

Time Failure Observed: 11:15AM

Vapor recovery compressor

1. State how and when breakdown occurred (Be specific).

Area wide electric outage caused loss of power

2. State how and when it was corrected.

Power resumed approximately 15 minutes later and vapor recovery compressor resumed operation.

3. Estimate emissions resulting from breakdown (attach calculations).

Sulfur Dioxide		Hydrocarbons	0
Nitrogen Dioxide		Particulate Matter	
Hydrogen sulfide		Other	

Signature: _____

Date: 09/22/2011

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Period Covered by Compliance Certification: __04_ / __01_ / __11 (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: 71.1.N.4	D. Frequency of monitoring:
B. Description: Annual Compliance and routine surveillance of tank contents and method of operation.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Verification by routine surveillance that tank contents and method of operation haven't changed. Annual validation, pursuant to Rule 71.1.E.2 may be required t justify exemption pursuant to Rule 71.1.D.3. Such justification shall be submitted to the District upon request. During compliance period, District made no formal request for validation pursuant to Rule 71.1.E.2.	F. Currently in Compliance? (Y or N): ___Y___ G. Compliance Status? (C or I): ___C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N___ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: 71.1.N.6	D. Frequency. of monitoring:
B. Description: Verification of portable tank roof integrity.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Each portable tank brought on the facility is inspected for integrity of the roof and pressure-vacuum valve prior to being placed into operation. Documentation regarding the number of days each tank held or stored crude oil and at which site. Throughputs are submitted to the District on an annual basis. Records are kept at the facility for a minimum of three years.	F. Currently in Compliance? (Y or N): __Y____ G. Compliance Status? (C or I): __C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: 71.3.N.1	D. Frequency of monitoring:
B. Description: Annual compliance verification of crude oil loading facilities.	No crude oil loading operations occurred at this location during the compliance period.
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring:	F. Currently in Compliance? (Y or N): ___Y____
Maintain records of loading operations and hydrocarbon leak detection using Method 21. All product left the location via pipeline.	G. Compliance Status? (C or I): ___C____
	H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: 71.4.N.1	D. Frequency of monitoring:
B. Description: Petroleum sumps, pits, ponds and well cellars.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring:	F. Currently in Compliance? (Y or N): ___Y____
Annual verification of integrity of pit covers. The integrity of each cover for all sumps, pits, and ponds, which must comply with Rule 71.4.B.2, is verified on a daily basis by visual inspection. The covers sealing mechanism and other components are subject to the leak requirement of Rule 74.10. Quarterly inspections (compliance with Rule 74.10) ensure compliance with Rule 74.4.B.2.	G. Compliance Status? (C or I): ___C____
	H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: 71.4.N.2	D. Frequency of monitoring:
B. Description: Emergency pit utilization.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Maintain records of emergency pit usage. The emergency pits at the Hobson 'C' lease were not used during the compliance period. The filter flush pit at the water plant was not utilized during the compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ____N___ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: 71.1.N.4-00008	D. Frequency of monitoring:
B. Description: Petroleum sumps, pits, ponds and well cellars.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Annual verification that there is no change in physical condition, liquid contents or method of operation of facility sumps. During the compliance period, there was no change in the physical condition, liquid contents or method of operation of sumps subject to Rule 71.4.C.1.d located at this facility.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: 71.5.N.1	D. Frequency of monitoring:
B. Description: Glycol dehydrators.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Quarterly inspection and maintenance using Method 21. Visual inspection occurs on a daily basis. During the compliance period, the glycol dehydrator emission system was visually inspected to assure the system is a closed system and the tank storing condensed hydrocarbon liquid is closed and the glycol unit was leak free.	F. Currently in Compliance? (Y or N): __Y_____ G. Compliance Status? (C or I): ____C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: PO0008PC1, Condition 1	D. Frequency of monitoring
B. Description: Monthly throughput and consumption limits.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Records of monthly throughput and consumption limits are maintained at the facility. These are summed and presented to the District inspector at the annual Permit to Operate Inspection..	F. Currently in Compliance? (Y or N): ___Y__ G. Compliance Status? (C or I): ___C__ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N___ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC1, Condition 2	D. Frequency of monitoring:
B. Description: Combustion equipment fired on natural gas only.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Periodic monitoring and verification that all permitted fuel burning equipment is being fired on natural gas. This equipment can only be fired on natural gas. This is verified by fuel charts showing fuel usage.	F. Currently in Compliance? (Y or N): ___Y___ G. Compliance Status? (C or I): ____C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): _____N_ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: PO0008PC1, Condition 3	D. Frequency of monitoring:
B. Description: Fugitive emissions based upon 445 oil wells.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: During the compliance period, new oil wells were drilled at the facility. A Permit to Construct and Permit to Operate application was submitted for each new well. Each new oil well replaced an old permitted well.	F. Currently in Compliance? (Y or N): ___Y___ G. Compliance Status? (C or I): ___C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N___ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC1, Condition 4	D. Frequency. of monitoring:
B. Description: Free flowing, gas lift or electric motor driven restriction for Hobson A8-2, Padre 71 and Padre 108.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Visual verification and daily monitoring that listed wells are being operated as required. During the compliance period, Hobson A8-2 and Padre 71 operated with electric motor artificial lift. Padre 108 did not operate during this period.	F. Currently in Compliance? (Y or N): __Y____ G. Compliance Status? (C or I): __C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: PO0008PC1, Condition 5	D. Frequency of monitoring:
B. Description: Solvent cleaning activities.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Records of solvent purchase, usage, amount recycled or disposed are maintained at the facility.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC2	D. Frequency of monitoring:
B. Description: Stationary Gas Turbine.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Annual compliance source testing and emission limits of NOx and ROC.The turbine unit was removed from service in August of 2008. ERC's for the turbine were granted on 7-21-09	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: PO0008PC3	D. Frequency of monitoring:
B. Description: Grubb lease compressor plant power grid.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Annual certification that compressors are powered by grid electricity. During the compliance period, compressors #7 and #8 were powered by grid electricity. Compressors #4, #5, #6, and #9 are inoperable and did not operate during the compliance period.	F. Currently in Compliance? (Y or N): __Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC4	D. Frequency of monitoring: Equipment not used during the compliance period.
B. Description: Oak Grove and Hobson 'C' lease crude oil loading facilities	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: The crude oil loading facilities at the Oak Grove lease and the Hobson 'C' lease did not operate during the compliance period. All production left the property via pipeline. Should the facilities be placed into operation, the vapor disposal system for each unit will direct all vapors to a gas sales system..	F. Currently in Compliance? (Y or N): __Y_____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N ____ *If yes, attach Deviation Summary Form

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Period Covered by Compliance Certification: __04_ / __01_ / 11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: PO0008PC5	D. Frequency of monitoring: Weekly
B. Description: Open top blow down tanks	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Weekly surveillance and verification that any open top blow down tank has been emptied of accumulated hydrocarbon liquids	F. Currently in Compliance? (Y or N): __Y____ G. Compliance Status? (C or I): ____C___ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC6	D. Frequency of monitoring:
B. Description: .Verification of operation hours and visual confirmation that only one engine is operational at any one time. The portable internal combustion engines did not operate during this compliance period.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: . Equipment did not operate during the compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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Period Covered by Compliance Certification: __04_ / __01_ / 11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: PO0008PC7	D. Frequency of monitoring:
B. Description: Portable open top mixing tanks.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Routine surveillance and verification that portable open top mixing tanks are used properly and not for storage of petroleum products or reactive organic compounds.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC8	D. Frequency of monitoring:
B. Description: Grubb lease C.E.Natco Heater Treater.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Verification by routine surveillance that the heater treater is using only one burner (S/N 16388). The heater treater burner was not in operation during the compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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Period Covered by Compliance Certification: __04_ / __01_ / 11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment ##: PO0008PC8 (Rev.451)	D. Frequency of monitoring:
B. Description: Free Water Knock Outs.	Daily observation
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Verification by routine surveillance that all produced water discharged from all Free Water Knock Outs at are directed to tankage with vapor recovery.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: PO0008PC9	D. Frequency of monitoring:
B. Description: Out of service turbines.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: The two out-of-service turbines have been removed from the facility and transferred out of state	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

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Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 50	D. Frequency of monitoring: Daily visual inspections
B. Description: Rule 50 – Opacity Revised 11/1/10	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable EPA Method 9 or a certified, calibrated monitoring system
C. Method of monitoring: Verification and routine surveillance through daily visual inspections of all fuel burning equipment for visible emissions. This is documented on Daily operations reports. (Monitoring is conducted according to District requirements.).	F. Currently in Compliance? (Y or N): __Y_____ G. Compliance Status? (C or I): ___C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N ____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 54.B.1	D. Frequency of monitoring: Quarterly to comply with Rule 64
B. Description: Sulfur compounds	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable EPA Method 6, 6A, 8, 15, 16A, 16B, or AQMD Method 307-94
C. Method of monitoring: GC analysis for sulfur content in fuel gas. Fuel burning equipment did not operated during the compliance period.	F. Currently in Compliance? (Y or N): __Y____ G. Compliance Status? (C or I): ___C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: Attachment 54.B.2	D. Frequency of monitoring:
B. Description: Sulfur compounds	Continuously to ensure constant compliance
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable Approved Systems by EPA/600/4-90/003
C. Method of monitoring:	F. Currently in Compliance? (Y or N): ___Y____
Fuel analysis for sulfur content in fuel. Fuel burning equipment did not operate during the compliance period.	G. Compliance Status? (C or I): ___C____
	H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 57.1	D. Frequency of monitoring:
B. Description: Particulate Matter Emissions from Fuel Burning Equipment	When requested by District Compliance Division
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable CARB Method 5
C. Method of monitoring: Periodic monitoring is not necessary to certify compliance with Rule 57.1. To certify compliance, a reference to Rule 57.B District analysis dated December 3, 1997 is sufficient.	F. Currently in Compliance? (Y or N): ___Y____
	G. Compliance Status? (C or I): ___C____
	H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: Attachment 64.B.1	D. Frequency of monitoring:
B. Description: Sulfur content of fuels	Quarterly Monitoring
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable ASTM D4810-88, ASTM D4084-94, ASTM D1072-90, or AQMD Method 307-94
C. Method of monitoring: Annual analysis for sulfur content of fuel if other than PUC quality natural gas is being combusted. Chemical stain tube. Fuel burning equipment did not operate during the compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 64.B.2	D. Frequency of monitoring:
B. Description: Sulfur content of fuels: solid or liquid	Quarterly to comply with Rule 64
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable ASTM D4294-98 or D2622-98
C. Method of monitoring: No liquid or solid fuel is burned at this facility	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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A. Attachment # or Permit Condition #: Attachment 71.1C	D. Frequency of monitoring: Daily surveillance
B. Description: Crude oil production and separation – produced gas	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Verification and surveillance that the produced gas collection system is in place and operational. Daily surveillance and inspection that the flare is operating properly and there are no visible emissions. This is documented on the daily operations reports.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 71.4.B.1	D. Frequency of monitoring: Annual Certification
B. Description: Petroleum sumps, pits, ponds and well cellars	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: This facility has no first stage sumps as defined by this rule.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

Ventura County
Air Pollution
Control District

ANNUAL COMPLIANCE CERTIFICATION
PERMIT ATTACHMENT FORM

Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 71.4.B.3	D. Frequency of monitoring: Routine surveillance
B. Description: Petroleum sumps, pits, ponds and well cellars	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Routine surveillance and visual inspection of well cellars to ensure that all cellars are maintained	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 74.6	D. Frequency of monitoring: Routine surveillance
B. Description: Surface cleaning and degreasing	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable ASTM E168-67, E169-87, E260-85, D2879-86, or the manufacturers MSDS
C. Method of monitoring: Perform routine surveillance of solvent cleaning activities to ensure compliance. Maintain inventory of solvent used and identify compounds in solvents used based upon manufacturers data (MSDS).	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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Control District

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Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 74.10	D. Frequency of monitoring: Quarterly inspection
B. Description: Components at crude oil and natural gas production and processing facilities	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable EPA Method 21
C. Method of monitoring: Quarterly inspection of components in hydrocarbon service utilizing Method 21. A current 'Operator Management Plan' is on-site and at the District.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): __C_____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___Y____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 74.11.1	D. Frequency of monitoring:
B. Description: Large Water Heaters and Small Boilers	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: This rule only applies to future installation of small boilers and large water heaters.	F. Currently in Compliance? (Y or N): _____ G. Compliance Status? (C or I): _____ H. *Excursions, exceedances, or other non-compliance? (Y or N): _____ *If yes, attach Deviation Summary Form

Ventura County Air Pollution

ANNUAL COMPLIANCE CERTIFICATION DEVIATION SUMMARY FORM

Period Covered by Compliance Certification: 04 / 01 / 11 (MM/DD/YY) to 03 / 31 / 12 (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 74.10	B. Equipment description: Components at crude oil and natural gas production and processing facilities. Notice to Comply No. 11486	C. Deviation Period: Date & Time Begin:5/12/11
		End:
		When Discovered: Date & Time 5/12/11
D. Parameters monitored: nits	ELimit:	F. Actual:
G. Probable Cause of Deviation: Components discovered leaking during annual Inspection..		H. Corrective actions taken: All leaking components repaired and re-inspected.

A. Attachment # or Permit Condition #	B. Equipment description:	C. Deviation Period: Date & Time Begin:
		End:
		When Discovered: Date & Time
D. Parameters monitored:	ELimit:	F. Actual:
G. Probable Cause of Deviation:		H. Corrective actions taken:

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ANNUAL COMPLIANCE CERTIFICATION
PERMIT ATTACHMENT FORM

Period Covered by Compliance Certification: __04_ / __01_ / 11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 74.22	D. Frequency of monitoring: Annual verification
B. Description: Natural gas-fired fan-type central furnaces	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Verification, on an annual basis, that all natural gas-fired fan-type furnaces at this stationary source are in compliance with Rule 74.22.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

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Control District

ANNUAL COMPLIANCE CERTIFICATION
PERMIT ATTACHMENT FORM

Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 74.1	D. Frequency of monitoring: Routine surveillance and visual inspections
B. Description: Abrasive blasting	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: No Abrasive blasting took place at this facility during the compliance period	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 74.2	D. Frequency of monitoring: Routine surveillance
B. Description: Architectural coatings	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Routine surveillance of architectural coating operations to ensure compliance with Rule 74.2. VOC content of coatings, if used on location, are maintained at the facility	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): __N_____ *If yes, attach Deviation Summary Form

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Control District

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PERMIT ATTACHMENT FORM

Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 74.4D	D. Frequency of monitoring:
B. Description: Cutback asphalt – road oils.	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Application of road oil did not occur at this facility during this compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 74.16	D. Frequency of monitoring:
B. Description: Oilfield drilling operations	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable CARB Method 100
C. Method of monitoring: Drilling operations were conducted in compliance with Attachment. Applications for diesel exemptions were submitted and granted for drilling operations.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 74.26	D. Frequency of monitoring:
B. Description: Crude oil storage tank degassing operations	Routine Surveillance
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable ASTM D323-82, EPA Method 21, EPA Method 2A, or EPA Method 25A
C. Method of monitoring: Storage tank degassing operations, as defined by this rule, did not occur at this facility during this compliance period	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 74.29	D. Frequency of monitoring:
B. Description: Soil Decontamination Operations	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Soil Decontamination Operations, as defined by this Rule, did not occur at this facility during this compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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ANNUAL COMPLIANCE CERTIFICATION
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Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment PO General	D. Frequency of monitoring:
B. Description: General Permit to Operate Conditions	Constant accessibility of permit or copy of permit
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: A copy of the permit to operate will be posted near the equipment according to APCD Rule 19. The equipment cannot be transferred unless it is listed as portable.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): ___C____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment PO0004	D. Frequency of monitoring:
B. Description: Engine Permit Shields	Routine monitoring of equipment
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Existing engines were in operation prior to June 12, 2006. Any new engines installed are subject to 40 CFR Part 60 Subpart JJJJ and/or 40 CFR Part 63 Subpart ZZZZ. Records are to be kept for all current and new engines. No new engines have been installed during the compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): _____ H. *Excursions, exceedances, or other non-compliance? (Y or N): ___N____ *If yes, attach Deviation Summary Form

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PERMIT ATTACHMENT FORM

Period Covered by Compliance Certification: __04_ / __01_ / __11_ (MM/DD/YY) to _03_ / __30_ / __12_ (MM/DD/YY)

A. Attachment # or Permit Condition #: Attachment 40 CFR 68	D. Frequency of monitoring:
B. Description: List of Regulated Substances and Thresholds for Accidental Release Prevention	Annual Certification
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Should a stationary source become subject to Part 68, a Risk Management Plan shall be submitted to ensure compliance with Part 70. The stationary source is not subject to Part 68.	F. Currently in Compliance? (Y or N): ____Y___ G. Compliance Status? (C or I): _____ H. *Excursions, exceedances, or other non-compliance? (Y or N): _____ *If yes, attach Deviation Summary Form

A. Attachment # or Permit Condition #: Attachment 40 CFR 82	D. Frequency of monitoring:
B. Description: Protection of Stratospheric Ozone	Routine Surveillance and during service of refrigerant units.
	E. Source test reference method, if applicable. Attach Source Test Summary Form, if applicable
C. Method of monitoring: Service of any refrigerant units, including motor vehicle air conditioning, is to comply with 40 CFR 82 Subpart B and the disposal of the refrigerant is to comply with 40 CFR 82 Subpart F. No refrigerant units, including motor vehicle air conditioning were serviced at the facility during the compliance period.	F. Currently in Compliance? (Y or N): ___Y____ G. Compliance Status? (C or I): _____ H. *Excursions, exceedances, or other non-compliance? (Y or N): _____ *If yes, attach Deviation Summary Form

Ventura County
Air Pollution
Control District

669 County Square Drive 2nd Flr.
Ventura CA 93003

Tel: 805/645-1400
Fax: 805/645-1444

NOTICE OF VIOLATION

No. 22692

Name: Vintage Production CA, LLC Date: 06/08/11

Address: 270 Quail Court, 2ND FLOOR City/Zip: S.P. CA 93060

Inspection Address: Grubb/Rincon Field P.O./ID#: 0008

City/Zip: Ventura Phone: (805) 525-8008

You are hereby notified that a **VIOLATION of RULE** 10.B of the Rules and Regulations of the Ventura County Air Pollution Control District, **SECTION** _____ of the California Heath and Safety Code, **SECTION** _____ of the California Code of Regulations, was committed on 06/08/11

by: Failure to obtain Permit to Operate prior to operation of three oil production wells. Observed Grubb #474, #475 & #476 in operation during annual compliance inspection. These units are not listed on current Title V Permit.

Pursuant to Section 42400 of the Health and Safety Code of the State of California, any person who violates any Order, Rule, or Regulation of the State Board or of an Air Pollution Control District is guilty of a MISDEMEANOR. Every day during any portion of which such violation occurs constitutes a separate offense.

ADVISE THIS DISTRICT, IN WRITING, WITHIN TEN (10) DAYS, OF THE CORRECTIVE ACTION TAKEN TO RESOLVE THIS VIOLATION. YOUR RESPONSE DOES NOT PRECLUDE THE POSSIBLITY OF FURTHER LEGAL ACTION.

E. Wilhelm | 05/06 | 06/08/11 | 1700

Issued by (Signature) | Sector | Date | Time

SIGNING THIS NOTICE ACKOWLEDGES RECEIPT OF THIS NOTICE. IT IS NOT AN ADMISSION OF GUILT.

Mr. William Hill | Title V Responsible Official

Issued To (please print) | Title (please print)

* Sent Via Certified Mail * | | |

Signature of Person Receiving Notice | Title | Date

Follow-up Action: _____

Disposition: _____

White-Office Copy Yellow-Field Copy Pink-Site Copy

Ventura County
Air Pollution
Control District

ANNUAL COMPLIANCE CERTIFICATION
DEVIATION SUMMARY FORM

Period Covered by Compliance Certification: 04 / 01 / 11 (MM/DD/YY) to 03 / 31 / 12 (MM/DD/YY)

A. Attachment # or Permit Condition #	B. Equipment description: Permits to Operate wells 475 and 476	C. Deviation Period: Date & Time Begin:
District Rule 10.B		End: June 14,2011
		When Discovered: Date & Time 6/8/11 @ 5:00PM
D. Parameters monitored: Permits for all equipment that may emit air contaminants	E Limit:	F. Actual:
G. Probable Cause of Deviation: Oil production wells 474, 475 and 476 were found to be operating without PTO's and were not listed on the Title V permit.	H. Corrective actions taken: The applications for Permits to Operate were completed and submitted for all three wells on June 14, 2011	

A. Attachment # or Permit Condition #	B. Equipment description:	C. Deviation Period: Date & Time Begin:
		End:
		When Discovered: Date & Time
D. Parameters monitored:	E Limit:	F. Actual:
G. Probable Cause of Deviation:	H. Corrective actions taken:	