

**FORM
INSP**Rev
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



| | | | |
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| DE | ET | OE | ES |
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Inspection Date:

10/05/2011

Document Number:

664000093

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

| | | | | |
|---------------------------|------------|-------------|-------------------------------|---------------|
| Location Identifier | API Number | Facility ID | Loc ID | Tracking Type |
| | 061-06397 | 213036 | 324839 | |
| Facility Name: FRAZEE B 5 | | | Inspector Name: LEONARD, MIKE | |

Operator Information:OGCC Operator Number: 8005 Name of Operator: BERRY ENERGY INC*WALTERAddress: 1717 WASHINGTON AVECity: GOLDENState: COZip: 80401-**Contact Information:**

| Contact Name | Phone | Email | Comment |
|--------------|----------------|------------------------------|--------------------|
| Bidle, Holly | (303) 279-0190 | berryenergyhreed@comcast.net | Regulatory manager |
| Whiting, Jim | (719) 688-0064 | jimwhiting_99@yahoo.com | pumper |

Compliance Summary:QtrQtr: SWNE Sec: 9 Twp: 19S Range: 50W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 04/12/2007 | 200109025 | PR | SI | U | | F | Y |
| 06/21/2011 | 200313049 | SR | PA | U | | | Y |
| 08/23/1997 | 500145154 | PR | PR | | | F | Y |
| 01/04/2008 | 200125070 | ID | SI | U | | | Y |
| 05/12/2010 | 200248643 | CA | TA | S | | | N |
| 02/02/1996 | 500145152 | PR | PR | | | P | N |
| 11/16/1994 | 500145151 | | PR | | | | |
| 01/12/1999 | 500145155 | PR | SI | | | P | N |
| 10/22/1996 | 500145153 | PR | PR | | | F | Y |
| 05/12/2010 | 200248676 | SR | PA | U | F | F | N |
| 12/28/2010 | 200290396 | SR | PA | U | F | F | Y |
| 11/08/2000 | 200011932 | PR | PR | S | I | P | N |

Inspector Comment:

SEE COMMENTS IN FINAL RECLAMATION TAB

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num |
|-------------|------|--------|-------------|------------|-----------|
| 213036 | WELL | PA | 05/12/2010 | OW | 061-06397 |

Equipment:Location Inventory

Inspector Name: LEONARD, MIKE

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| 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

Emergency Contact Number: (S/U/V) _____

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

Venting:

| Yes/No | Comment |
|--------|---------|
|--------|---------|

Flaring:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|------|-----------------------------|---------|-------------------|---------|
|------|-----------------------------|---------|-------------------|---------|

Predrill

Location ID: 324839

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**Wildlife BMPs:****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:****Well**

Facility ID: 213036

API Number: 061-06397

Status: PA

Insp. Status: PA

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:

Inspector Name: LEONARD, MIKE

DWR Receipt Num: _____ Owner Name: _____ GPS File: _____

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: _____

Final Reclamation/ Abandoned Location:

Inspector Name: LEONARD, MIKE

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____
Reminder: _____

Comment: LEASE IN GRASSLAND

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed Fail Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% Fail Cropland: perennial forage _____

Weeds present Pass Subsidence Pass

Comment: BATTERY, CEMENT PAD . DEBRIS STILL IN PLACE.

Corrective Action: REMOVE REMAINING SURFACE EQUIPMENT, CLEAN UP DEBRIS AND RECLAIM
WELLSITE NA DBATTERY SITE

Date 12/30/2011

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|

COGCC Comments

| Comment | User | Date |
|---------------------------------------|----------|------------|
| SEE COMMENTS IN FINAL RECLAMATION TAB | leonardm | 11/04/2011 |