

**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



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

01/25/2012

Document Number:

663900484

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name      |
|---------------------|---------------|---------------|---------------|---------------------|
|                     | <u>252888</u> | <u>303313</u> |               | <u>QUINT, CRAIG</u> |

**Operator Information:**OGCC Operator Number: 94701 Name of Operator: FIDELITY EXPLORATION & PRODUCTION COMPANYAddress: 1700 LINCOLN ST STE 2800City: DENVERState: COZip: 80203**Contact Information:**

| Contact Name  | Phone                    | Email                 | Comment             |
|---------------|--------------------------|-----------------------|---------------------|
| Andrews, Gary | 970-354-7477<br>(Idalia) | gary.andrews@wbip.com | 970-332-0678 (Wray) |

**Compliance Summary:**QtrQtr: SWNE Sec: 4 Twp: 5S Range: 43W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 12/08/2010 | 200286928 | PR         | PR          | S                            |          |                | N               |
| 09/17/2008 | 200195712 | PR         | PR          | S                            |          |                | N               |
| 08/09/2006 | 200097053 | PR         | PR          | S                            |          | P              | N               |
| 10/01/1998 | 500179739 | PR         | PR          |                              |          | P              | N               |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name |                                     |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------------------------------|
| 252888      | WELL | PR     | 10/25/1995  | GW         | 125-06764 | DEVLIN 32-4   | <input checked="" type="checkbox"/> |

**Equipment:**Location Inventory

|                             |                        |                     |                         |
|-----------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____   | Wells: _____        | Production Pits: _____  |
| Condensate Tanks: _____     | Water Tanks: _____     | Separators: _____   | Electric Motors: _____  |
| Gas or Diesel Motors: _____ | 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/Unsatisfactory | comment                      | Corrective Action | Date |
|--------|-----------------------------|------------------------------|-------------------|------|
| Access | Satisfactory                | GRAVEL ROAD THROUGH PASTURE. |                   |      |

Inspector Name: QUINT, CRAIG

| <b>Signs/Marker:</b> |                             |                             |                   |         |
|----------------------|-----------------------------|-----------------------------|-------------------|---------|
| Type                 | Satisfactory/Unsatisfactory | Comment                     | Corrective Action | CA Date |
| WELLHEAD             | Satisfactory                | LEASE SIGN MOUNTED ON FENCE |                   |         |
| TANK LABELS/PLACARDS | Satisfactory                | METAL SIGN BY TANK          |                   |         |

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

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

| <b>Fencing/:</b> |                             |                                   |                   |         |
|------------------|-----------------------------|-----------------------------------|-------------------|---------|
| Type             | Satisfactory/Unsatisfactory | Comment                           | Corrective Action | CA Date |
| WELLHEAD         | Satisfactory                | STEEL PANELS AROUND ALL EQUIPMENT |                   |         |

| <b>Equipment:</b>   |   |                             |  |                     |            |
|---------------------|---|-----------------------------|--|---------------------|------------|
| Type                | # | Satisfactory/Unsatisfactory | Comment  | Corrective Action   | CA Date    |
| Gas Meter Run       | 1 | Satisfactory                |  |                     |            |
| Vertical Separator  | 1 | Satisfactory                | 50% BURIED                                     |                     |            |
| Ancillary equipment | 2 | Unsatisfactory              | ELEC PANEL, METHANOL TANK WITHOUT CONTAINMENT. | INSTALL CONTAINMENT | 04/25/2012 |
| Prime Mover         | 1 | Satisfactory                | ELEC MOTOR                                     |                     |            |
| Pump Jack           | 1 | Satisfactory                | 25 JENSEN ON A CEMENT PAD                      |                     |            |

**Tanks/Berms:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents       | # | Capacity | Type     | SE GPS                |
|----------------|---|----------|----------|-----------------------|
| PRODUCED WATER | 1 | 200 BBLS | Open Top | 39.654370,-102.183660 |

S/U/V: Satisfactory Comment: 210BBL OTFGWT 50% BURIED W/ADEQUATE WIRE WILDLIFE SCREENING.

Corrective Action: \_\_\_\_\_ Corrective Date: \_\_\_\_\_

**Paint**

| Condition | Adequate |
|-----------|----------|
|-----------|----------|

Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

| <b>Berms</b>      |          |                     |                     |                 |
|-------------------|----------|---------------------|---------------------|-----------------|
| Type              | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance     |
|                   |          |                     |                     |                 |
| Corrective Action |          |                     |                     | Corrective Date |
| Comment           |          |                     |                     |                 |

|                 |         |  |
|-----------------|---------|--|
| <b>Venting:</b> |         |  |
| Yes/No          | Comment |  |
| NO              |         |  |

|                 |                             |         |                   |         |
|-----------------|-----------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                             |         |                   |         |
| Type            | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|                 |                             |         |                   |         |

**Predrill**

Location ID: 303313

**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: 252888 API Number: 125-06764 Status: PR Insp. Status: PR

**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:**

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_  
 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? Pass CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Waste Material Onsite? Pass CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Unused or unneeded equipment onsite? Pass CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Pit, cellars, rat holes and other bores closed? Pass 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? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: \_\_\_\_\_

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

**RESTORATION AND REVEGETATION**Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ Perennial forage re-established \_\_\_\_\_

Non-Cropland

Top soil replaced Pass Recontoured Pass 80% Revegetation Pass

1003 f. Weeds Noxious weeds? \_\_\_\_\_ P \_\_\_\_\_

Comment: UNUSED AREAS OF THE LOCATION ARE PASTURE.

Inspector Name: QUINT, CRAIG

Overall Interim Reclamation Pass

**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

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Compaction       | Pass            | Gravel                  | Pass                  | MHSP          | Fail                     |         |

S/U/V: Unsatisfactory

Corrective Date: 04/25/2012

Comment: METHANOL TANK WITHOUT CONTAINMENT.

CA: INSTALL CONTAINMENT.