

**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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Inspection Date:

02/08/2012

Document Number:

661600485

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier: 245679 Facility ID: 323750 Loc ID: Tracking Type: Inspector Name: MONTOYA, JOHN

Operator Information:OGCC Operator Number: 10110 Name of Operator: GREAT WESTERN OIL & GAS COMPANY LLCAddress: 700 AUTOMATION DR - UNIT ACity: WINDSOR State: CO Zip: 80550-**Contact Information:**

Contact Name	Phone	Email	Comment
Salaz, Paul	970-686-8831	psalaz@gwogco.com	

Compliance Summary:QtrQtr: SWNW Sec: 27 Twp: 5N Range: 65W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/07/2010	200286215	PR	PR	S			N
09/04/2003	200043284	PR	PR	S		P	N
12/26/2000	200012608	PR	PR	S		P	N
10/30/2000	200011005	PR	PR	S		P	N
08/08/2000	200008870	PR	PR	U		F	Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
245679	WELL	PR	09/10/1987		123-13474	KOWITZ 27-5	<input checked="" type="checkbox"/>
323750	LOCATION	AC	04/14/2009		-	KOWITZ-65N65W 27SWNW	<input type="checkbox"/>

Equipment:Location Inventory

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**Signs/Marker:**

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
CONTAINERS	Satisfactory			

Inspector Name: MONTOYA, JOHN

TANK LABELS/PLACARDS	Unsatisfactory	need placards on prod tank	Install sign to comply with rule 210.b.	04/04/2012
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
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WELLHEAD Satisfactory

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
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Gas Meter Run 1 Satisfactory

Emission Control Device 1 Satisfactory

Horizontal Heated Separator 1 Satisfactory

Bird Protectors 2 Satisfactory

Plunger Lift 1 Satisfactory

Tanks/Berms: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
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CRUDE OIL 1 300 BBLS STEEL AST 40.373520,104.657040

S/U/V: **Violation** Comment: _____

Corrective Action: repaint prod tank Corrective Date: 04/04/2012

Paint

Condition	Inadequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
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Earth Adequate Walls Sufficient Base Sufficient Adequate

Corrective Action _____ Corrective Date _____

Comment _____

Inspector Name: MONTOYA, JOHN

Tanks/Berms: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<50 BBLS	CONCRETE SUMP/VAULT	,

S/U/V:	Unsatisfactory	Comment:	
Corrective Action:	water leak in front of water prod tank needs to be fixed		
Corrective Date:	04/04/2012		

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment	
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Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ignitor/Combustor				

Predrill

Location ID: 323750

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: 245679 API Number: 123-13474 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: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____

Inspector Name: MONTOYA, JOHN

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: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

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

Final Land Use: _____

Reminder: _____

Comment: _____

Inspector Name: MONTOYA, JOHN

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
S/U/V: _____ Corrective Date: _____						
Comment: _____						
CA: _____						