

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:
02/13/2012

Document Number:
663900566

Overall Inspection:
Violation

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>227813</u>	<u>314184</u>		<u>QUINT, CRAIG</u>

Operator Information:

OGCC Operator Number: 8005 Name of Operator: BERRY ENERGY INC*WALTER
 Address: 1717 WASHINGTON AVE
 City: GOLDEN State: CO Zip: 80401-

Contact Information:

Contact Name	Phone	Email	Comment
Whiting, Jim	719-688-0064	jimwhiting_99@yahoo.com	
Dennis, Penny	303-279-0190	berryenergy@comcast.net	

Compliance Summary:

QtrQtr: NENE Sec: 5 Twp: 25S Range: 45W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/28/2010	200290317	SR	PA	U			Y
03/15/2010	200235885	SR	PA	U			Y
10/10/2008	200196617	CA	TA	S			N
10/10/2008	200197320	SR	PA	U	F	F	N
10/08/2008	200196587	ID	SI	U			Y
10/06/2008	200196586	ID	SI	U			Y
09/29/2008	200196020	ID	TA	U			Y
09/25/2008	200196018	ID	TA	U			Y
08/13/1999	500156344	ID	SI			P	N
04/23/1997	500156348	PR	PR			F	Y
04/12/1995	500156347	PR	PR			P	Y

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
227813	WELL	PA	07/08/2009		099-06139	HOFFMAN 1-5	X
314184	LOCATION	AC	04/14/2009		-	HOFFMAN-625S45W 5NENE	

Equipment:

Location Inventory

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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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER	Satisfactory	STEEL PIPE AROUND RISER AND PIPELINE SHUT OFF MANIFOLD.		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Flow Line	1	Unsatisfactory	GMR RISER STILL IN PLACE.	REMOVE RISER	05/14/2012
Gathering Line	1	Satisfactory	LAMAR LIGHT AND GAS SHUT OFF MANIFOLD.		

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 314184

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: 227813 API Number: 099-06139 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:

DWR Receipt Num: _____ Owner Name: _____ GPS: _____ Lat _____ Long _____

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: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

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

Final Land Use: _____

Reminder: _____

Comment: _____

Inspector Name: QUINT, CRAIG

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass
Debris removed Pass No disturbance /Location never built _____
Access Roads Regraded _____ Contoured Fail Culverts removed _____
Gravel removed _____
Location and associated production facilities reclaimed Fail Locations, facilities, roads, recontoured Fail
Compaction alleviation _____ Dust and erosion control _____
Non cropland: Revegetated 80% Fail Cropland: perennial forage _____
Weeds present Pass Subsidence Fail
Comment: WELL WAS PLUGGED 10/10/2008, EQUIPMENT HAS BEEN REMOVED, GAS RISER STILL IN PLACE, GAS PIPELINE SHUT OFF MANIFOLD BELONGS TO LAMAR LIGHT AND GAS, EROSION OFF OF WELL PAD HAS NOT BEEN CORRECTED, LOCATION HAS NO VEGETATION.
Corrective Action: REMOVE RISER, FILL IN ERODED AREAS AND SEED LOCATION, CONTROL WEEDS AND EROSION. Date **05/14/2012**
Overall Final Reclamation Fail

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: _____