

**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:
02/23/2012

Document Number:
662300220

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>NEIDEL, KRIS</u>
	<u>294085</u>	<u>335612</u>		

Operator Information:

OGCC Operator Number: 96850 Name of Operator: WILLIAMS PRODUCTION RMT COMPANY LLC
 Address: 1001 17TH STREET - SUITE #1200
 City: DENVER State: CO Zip: 80202

Contact Information:

Contact Name	Phone	Email	Comment
Hejl, Kent	(970) 263-2715	Kent.Hejl@Williams.com	completions super
Moss, Brad	(970) 285-9377	Brad.Moss@Williams.com	Production foreman

Compliance Summary:

QtrQtr: NWSW Sec: 36 Twp: 1S Range: 98W

Inspector Comment:

aprox 500' diameter holding tank, tarped on top, 2nd contain. tank is >40' from wellhead, this is a violation. provide infromation to inspector on use of tank.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
287170	WELL	PR	12/31/2008	OW	103-10908	FEDERAL RGU 13-36-198	<input checked="" type="checkbox"/>
294085	WELL	PR	12/26/2007	LO	103-11147	FEDERAL RGU 43-35-198	<input checked="" type="checkbox"/>
294088	WELL	PR	12/26/2007	LO	103-11148	FEDERAL RGU 44-35-198	<input checked="" type="checkbox"/>
294089	WELL	PR	12/26/2007	LO	103-11149	FEDERAL RGU 343-35-198	<input checked="" type="checkbox"/>
294091	WELL	PR	12/31/2008	OW	103-11150	FEDERAL RGU 344-35-198	<input checked="" type="checkbox"/>
335612	LOCATION	AC	04/14/2009		-	FEDERAL RGU-61S98W 36NWSW	<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
WELLHEAD	Satisfactory			

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

Corrective Date: _____

Comment: _____
 Corrective Action: _____

Spills:

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

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Dehydrator	3	Satisfactory			

Tanks/Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	500 BBLS	HEATED STEEL AST	,

S/U/V: Satisfactory Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

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 _____

Comment _____

Tanks/Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	500 BBLS	HEATED STEEL AST	,

S/U/V: Satisfactory Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

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 _____

Comment _____

Venting:	
Yes/No	Comment
NO	

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

Predrill	
Location ID: <u>335612</u>	
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):	
<u>Surface Owner Contact Information:</u>	
Name: _____	Address: _____
Phone Number: _____	Cell Phone: _____
<u>Operator Rep. Contact Information:</u>	
Landman Name: _____	Phone Number: _____
Date Onsite Request Received: _____	Date of Rule 306 Consultation: _____
Request LGD Attendance: _____	
<u>LGD Contact Information:</u>	
Name: _____	Phone Number: _____
Agreed to Attend: _____	
<u>Summary of Landowner Issues:</u>	

<u>Summary of Operator Response to Landowner Issues:</u>	

<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>	

Well				
Facility ID: <u>287170</u>	API Number: <u>103-10908</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>	
Facility ID: <u>294085</u>	API Number: <u>103-11147</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>	
Facility ID: <u>294088</u>	API Number: <u>103-11148</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>	
Facility ID: <u>294089</u>	API Number: <u>103-11149</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>	
Facility ID: <u>294091</u>	API Number: <u>103-11150</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>	

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:

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

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: _____