

FORM INSP Rev 05/11	State of Colorado Oil and Gas Conservation Commission <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109</small>		DE	ET	OE	ES
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FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>NEIDEL, KRIS</u>
	<u>301961</u>	<u>316596</u>		

Inspection Date:
02/23/2012

Document Number:
662300222

Overall Inspection:
Unsatisfactory

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:

Compliance Summary:

QtrQtr: NESW Sec: 35 Twp: 1S Range: 98W

Inspector Comment:

2 bermed areas on pad that have sand/mud in them, they could be removed. fuel tank >15' of wellhead, not labeled; diesel?methanol? tank should be removed. location is still under recent completions.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
287639	WELL	PR	10/31/2006	LO	103-10934	FEDERAL RGU 23-35-198	<input checked="" type="checkbox"/>
301961	WELL	PR	12/08/2011	LO	103-11490	FEDERAL RGU 322-35-198	<input checked="" type="checkbox"/>
301962	WELL	PR	02/23/2011	LO	103-11491	FEDERAL RGU 412-35-198	<input checked="" type="checkbox"/>
301963	WELL	PR	02/23/2011	LO	103-11492	FEDERAL RGU 522-35-198	<input checked="" type="checkbox"/>
301964	WELL	PR	04/05/2011	LO	103-11493	FEDERAL RGU 532-35-198	<input checked="" type="checkbox"/>
301965	WELL	DG	01/11/2012	LO	103-11494	Federal RGU 13-35-198	<input type="checkbox"/>
316596	LOCATION	AC	04/14/2009		-	Federal RGU 23-35-198	<input type="checkbox"/>
419627	WELL	XX	09/30/2010		103-11801	Federal RGU 523-35-198	<input type="checkbox"/>
419628	WELL	XX	09/30/2010		103-11802	Federal RGU 413-35-198	<input type="checkbox"/>
419629	WELL	XX	09/30/2010		103-11803	Federal RGU 33-35-198	<input type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: <u>3</u>	Wells: <u>9</u>	Production Pits: _____
Condensate Tanks: <u>6</u>	Water Tanks: <u>6</u>	Separators: <u>2</u>	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: <u>1</u>	Oil Pipeline: _____	Water Pipeline: <u>2</u>
Gas Compressors: _____	VOC Combustor: <u>1</u>	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Unsatisfactory	No sign.	Install sign to comply with rule 210.b.	06/01/2012

Inspector Name: NEIDEL, KRIS

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?				

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK BATTERY	Satisfactory			
SEPARATOR	Satisfactory			

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Pig Station	1	Satisfactory			
Dehydrator	5	Satisfactory			

Tanks/Berms: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	500 BBLS	HEATED STEEL AST	,

S/U/V: Satisfactory Comment: _____

Corrective Action: _____ Corrective Date: **04/01/2012**

Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action _____ Corrective Date _____

Comment _____

Tanks/Berms: <input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	4	500 BBLS	HEATED STEEL AST	,
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date: 04/01/2012
Paint				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	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: 316596

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	kubeczkod	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations; including, but not limited to, construction of a berm or diversion dike, diversion/collection trenches within and/or outside of berms/dikes, site grading, or other comparable measures sufficiently protective of nearby surface water. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	08/30/2010
OGLA	kubeczkod	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	08/30/2010

OGLA	kubeczkod	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	08/30/2010
OGLA	kubeczkod	Reserve pit must be lined. If the existing reserve/drilling or multi-well pit is not lined, then it must be lined in accordance with COGCC Rule 904 prior to being used.	08/30/2010

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: <u>287639</u>	API Number: <u>103-10934</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>301961</u>	API Number: <u>103-11490</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>301962</u>	API Number: <u>103-11491</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>301963</u>	API Number: <u>103-11492</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Facility ID: <u>301964</u>	API Number: <u>103-11493</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: RANGELAND
Comment: _____

1003a. Debris removed? Fail CM _____ CA Date **05/01/2012**
CA remove _____
Waste Material Onsite? Fail CM _____ CA Date **05/01/2012**
CA remove _____
Unused or unneeded equipment onsite? Fail CM _____ CA Date **05/01/2012**
CA remove _____
Pit, cellars, rat holes and other bores closed? Pass CM _____ CA Date _____
Guy line anchors removed? _____ CM _____ CA Date _____
Guy line anchors marked? Pass CM _____ CA Date _____

1003b. Area no longer in use? Fail Production areas stabilized ? Fail
1003c. Compacted areas have been cross ripped? _____
1003d. Drilling pit closed? Pass 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? Fail 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 _____

