

**FORM  
INSP**Rev  
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Inspection Date:

04/23/2012

Document Number:

662300416

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>222936</u>	<u>312938</u>		<u>NEIDEL, KRIS</u>

**Operator Information:**

OGCC Operator Number: 87900 Name of Operator: THOROFARE RESOURCES, INC  
 Address: 346 AMORETTI STREET #5  
 City: THERMOPOLIS State: WY Zip: 82443

**Contact Information:**

Contact Name	Phone	Email	Comment
Clay, Evans		clayevans@yahoo.com	

**Compliance Summary:**

QtrQtr: <u>NESE</u>	Sec: <u>7</u>	Twp: <u>11N</u>	Range: <u>97W</u>				
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/27/2010	200285220	PR	SI	U			Y

**Inspector Comment:**

Inspector met with the current owner/operator/pumper of the well, Clay Evens (Antler energy LLC, 10407) . The well is still under the name Thorofare Resources. Clay has discussed form 6 with COGCC ; Antler is awaiting form 10 completion from Thorofare. The ignition source of the fire was most likely small hole in a tank heater tube. It looks like the hole in the heater tube allowed some oil into the tube, when the operator shut off the heater he noticed that there was some smoldering in the tube, he then pulled off the service panel on the heater, then the fire woof'd out ignited the tank. The heater tube has not been pulled from the tank and/or inspected yet. The oil this well produces is heavy, the tank heater is manually operated and only is fired when they are heating a tank for unloading. Until the heater tube is pulled and inspected it cannot be certain that this is the cause of the fire but it appears that this was the source of the ignition. The truck driver was on top of the tank, gauging the tank when it caught fire. There was a haul truck parked near the tanks, the truck had not connected any lines to the tank at the time of the fire. The truck was completely burned (cab 100% gone and trailer 30% burned). This well sells gas, the condensate is comingled in the oil tanks, so there was a lighter oil in the tanks at the time of the fire. Combine that with the fact that they were gauging the tank at the time of ignition all appear to be contributing factors.

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
222936	WELL	SI	03/01/1996		081-06298	ROSS-GOVERNMENT-USA 43 -7	<input checked="" type="checkbox"/>
312938	LOCATION	AC	04/14/2009		-	ROSS-GOVERNMENT-USA-611N97W 7NESE	<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**

Inspector Name: NEIDEL, KRIS

<b><u>Signs/Marker:</u></b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	no lables on tanks.	Install sign to comply with rule 210.b.	06/30/2012
WELLHEAD	Satisfactory			

Emergency Contact Number: (S/U/V) Unsatisfactory Corrective Date: 06/30/2012

Comment:

Corrective Action:	Install sign to comply with rule 210.b.
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<u>Good Housekeeping:</u>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WEEDS	Unsatisfactory	weeds in/around equipment.	Treat/remove weeds per rule 603.j	06/30/2012

<b><u>Spills:</u></b>				
Type	Area	Volume	Corrective action	CA Date

## Multiple Spills and Releases?

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heater Treater	1	Unsatisfactory	treaters are considered a tank and should have 2nd containment.	install berm.	06/30/2012

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents		#	Capacity	Type	SE GPS
PRODUCED WATER		2	300 BBLS	STEEL AST	,
S/U/V:	Satisfactory		Comment:		
Corrective Action:					Corrective Date:

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
Comment				

<b>Facilities:</b>		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	300 BBLS	HEATED STEEL AST	,	
S/U/V:	Satisfactory		Comment: _____		
Corrective Action: _____				Corrective Date: _____	
<b>Paint</b>					
Condition	_____				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
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: 312938

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_

Pads: \_\_\_\_\_

Soil Stockpile: \_\_\_\_\_

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

Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:****Comment:****CA:****Date:****Wildlife BMPs:****Comment:****CA:****Date:****Stormwater:**

Erosion BMPs

Present

Other BMPs

Present

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

Comments: Erosion BMPs: \_\_\_\_\_

Other BMPs: \_\_\_\_\_

**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:****Facility**

Facility ID: 222936

API Number: 081-06298

Status: SI

Insp. Status: SI

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: NEIDEL, KRIS

Comment: <input style="width: 700px;" type="text"/>			
Corrective Action: _____		Date: _____	
Reportable: _____	GPS: Lat _____	Long _____	
Proximity to Surface Water: _____		Depth to Ground Water: _____	
<b>Water Well:</b>			
		Lat _____	Long _____
DWR Receipt Num: _____	Owner Name: _____	GPS : _____	
<b>Field Parameters:</b>			
<input style="width: 300px;" type="text"/>			
Sample Location: <input style="width: 400px;" type="text"/>			
Emission Control Burner (ECB): _____			
Comment: _____			
Pilot: _____	Wildlife Protection Devices (fired vessels): _____		

**Reclamation - Storm Water - Pit**

<b>Interim Reclamation:</b>			
Date Interim Reclamation Started: _____		Date Interim Reclamation Completed: _____	
Land Use: _____			
Comment: <input style="width: 750px;" type="text"/>			
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? _____
<b>RESTORATION AND REVEGETATION</b>			
<u>Cropland</u>			
	Top soil replaced _____	Recontoured _____	Perennial forage re-established _____

Inspector Name: NEIDEL, KRIS

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: \_\_\_\_\_