

**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



DE	ET	OE	ES
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Inspection Date:

04/30/2012

Document Number:

661700284

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier: 280138 Facility ID: 306933 Loc ID: Tracking Type: Inspector Name: LABOWSKIE, STEVE

Operator Information:OGCC Operator Number: 7125 Name of Operator: BEEMAN OIL & GAS LLCAddress: 91 WEDGEWOOD CIRCity: DURANGO State: CO Zip: 81391**Contact Information:****Compliance Summary:**QtrQtr: NWNW Sec: 12 Twp: 33N Range: 12W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/29/2010	200264723	PR	PR	S			N
03/23/2009	200206549	PR	PR	S			N
07/30/2008	200193176	PR	PR	U			Y
01/03/2008	200124375	ID	SI	S			N
10/31/2007	200121267	PR	PR	U			Y
04/05/2007	200108766	PR	PR	S		P	N
03/15/2007	200108764	PR	PR	U		F	Y
03/06/2007	200108761	PR	PR	U		P	Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
280138	WELL	PR	12/12/2007	OW	067-09070	HUBBS 1	<input checked="" type="checkbox"/>
306933	LOCATION	AC	04/14/2009		-	HUBBS-N33N12W 12NWNW	<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: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory	tools, batteries, AC cord, fittings	clean up unneeded stuff	06/20/2012
TRASH				

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	Pump Jack	<= 5 bbls	clean up oil and stained soils, fix stuffing box leak	06/15/2012

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER		pasture fenced, access controlled		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Pump Jack	1		inactive elec.		
Ancillary equipment	1		AC panel		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
OTHER	1	OTHER	STEEL AST	37.123120,-108.110150
S/U/V: Unsatisfactory		Comment:	also smaller tank reported on Hubbs #2 inspection	
Corrective Action:		label tank with contents, capacity and NFPA per Rule 210.b		Corrective Date: 06/15/2012

Paint

Condition	Adequate
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Other (Content) no content label

Other (Capacity) 300 bbl

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	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 306933

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:****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: 280138

API Number: 067-09070

Status: PR

Insp. Status: PR

Producing Well

Comment: _____

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Inspector Name: LABOWSKIE, STEVE

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? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? Fail CM _____

CA clean up unused supplies, trash CA Date 06/15/2012

Unused or unneeded equipment onsite? Fail CM _____

CA clean up tools and unneeded equip. CA Date 06/15/2012

Pit, cellars, rat holes and other bores closed? Pass CM _____

CA _____ CA Date _____

Guy line anchors removed? Pass CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? In

Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Pass Recontoured Pass Perennial forage re-established In

Non-Cropland

Inspector Name: LABOWSKIE, STEVE

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____ P _____

Comment: _____

Overall Interim Reclamation _____ In Process _____

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: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____