


FORM INSP <small>Rev 05/11</small>	State of Colorado Oil and Gas Conservation Commission <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 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: SCHURE, KYM
	219347	312193		

Inspection Date: 07/06/2012

Document Number: 663300283

Overall Inspection: **Unsatisfactory**

Operator Information:

OGCC Operator Number: 95620 Name of Operator: WESTERN OPERATING COMPANY

Address: 518 17TH ST STE 200

City: DENVER State: CO Zip: 80202

Contact Information:

Contact Name	Phone	Email	Comment
James, Steven	(303) 893-2438	s.d.james@att.net	
AXELSON, JOHN		john.axelson@state.co.us	
LINDBLOM, STEVE		steven.lindblom@state.co.us	

Compliance Summary:

QtrQtr: L8NW Sec: 2 Twp: 8N Range: 54W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/25/2011	200295879	PR	PR	S	I		N
04/04/2003	200037310	PR	PR	S		P	N
04/13/1999	500152927	CO					
01/09/1996	500152923	PR	PR			F	Y

Inspector Comment:

Inspection on facility performed in response to spill/release notification by operator. Operator indicated that the spill was caused by valve malfunction following a lightning strike on July 4, 2012. Operator indicated an estimated 200bbl. release/spill. Release originated from tank at battery, breached containment berm, migrated west by south west approx. 125' to area of wellhead, followed natural drainage basin approx. 350' in a south by south easterly direction. Point of origin is highest elevation of effected area, flow traveling down-hill into natural (dry) drainage low. Stormwater drainage follows identical path into natural (dry) drainage, effected area may extend further downhill due to current heavy rainfall, resulting from surface run-off prior to corrective action.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name
219347	WELL	PR	03/09/1999	OW	075-06203	ARTHUR EDENS 1 <input checked="" 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

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	No placards on horizontal tanks/vessels at separator.	Install sign to comply with rule 210.b.	08/10/2012
CONTAINERS	Unsatisfactory	Chemical additive containers at wellhead and battery have no labels/placards for contents.	Install sign to comply with rule 210.b.	08/10/2012
TANK LABELS/PLACARDS	Unsatisfactory	No placards on (2) 300bbl. PW tanks.	Install sign to comply with rule 210.b.	08/10/2012
WELLHEAD	Unsatisfactory	NO signage at wellhead	Install sign to comply with rule 210.b.	08/10/2012
TANK LABELS/PLACARDS	Unsatisfactory	Can not read placard on (1) 300bbl. crude tank, north end of battery.	Install sign to comply with rule 210.b.	08/10/2012
BATTERY	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: Emerg. contact number received at office of Western Operating. Emergency contact number is required to be in service by live-attendant, 24-7-365 days per year.

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory	Tanks/vessels at separator	Remove unused equipment from property.	08/10/2012
TRASH	Unsatisfactory	Trash on ground around wellhead and 55gal. barrel for trash overflowing.	Remove trash from property.	08/10/2012

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	WELLHEAD	<= 5 bbls	Remove or remediate stained soil at wellhead.	07/13/2012
Produced Water		> 5 bbls	Remove or remediate effected surface from tank battery to wellhead into (dry) natural drainage area approximately 500' in length, varying in width of flow from battery to drainage area.	07/13/2012
PW/CO	Tank	> 5 bbls	Repair berm, remove and/or remediate effected soil within battery containment area.	07/13/2012

Multiple Spills and Releases?

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Deadman # & Marked	4	Satisfactory			

Bird Protectors	1	Satisfactory			
Ancillary equipment	2	Unsatisfactory	NO secondary containment of chemical additive and injectors.	Install secondary containment for all chemical additive tanks/vessels/containers.	08/10/2012
Gas Meter Run	1	Satisfactory			
Flow Line	1	Satisfactory			
Submersible Pump	1	Satisfactory			
Horizontal Heated Separator	1	Satisfactory			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
OTHER	1	100 BBLS	STEEL AST	,

S/U/V: _____ Comment: Placards/labels in tank battery and separator non-compliant.

Corrective Action: _____ Corrective Date: _____

Paint

Condition	Inadequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Insufficient	Base Sufficient	Inadequate

Corrective Action Remove contaminated soils from battery containment berm area and directional surface of release/spill. Reconstruct berm and containment area with adequate materials in accordance with COGCC rules and regulations. Corrective Date 08/10/2012

Comment Area of berm and height of berm inadequate

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLS	STEEL AST	,

S/U/V: _____ Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action _____ Corrective Date _____

Comment _____

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	4	300 BBLS	STEEL AST	40.000000,103.000000	
S/U/V:	Comment:				
Corrective Action:					Corrective Date:
Paint					
Condition					
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action					Corrective Date
Comment					
Venting:					
Yes/No	Comment				
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 312193

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: 219347 Type: WELL API Number: 075-06203 Status: PR Insp. Status: PR

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: