

**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
----	----	----	----

Inspection Date:

07/06/2012

Document Number:

669400017

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier: 214128 Facility ID: 325150 Loc ID:                      Tracking Type:                      Inspector Name: LABOWSKIE, STEVE

**Operator Information:**OGCC Operator Number: 26625 Name of Operator: ELM RIDGE EXPLORATION CO LLCAddress: 12225 GREENVILLE AVE STE 950City: DALLAS State: TX Zip: 95243**Contact Information:**

Contact Name	Phone	Email	Comment
Mackey, Amy		amackey1@elmridge.net	Administrative Manager
Lindeman, Terry	(505) 632-3476 x 210	tlindeman@elmridge.net	

**Compliance Summary:**QtrQtr: NWNW Sec: 17 Twp: 33N Range: 8W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
12/23/2007	200123867	PR	PR	S			N
11/29/2007	200122826	PR	PR	U			Y
06/27/2005	200076309	PR	PR	S		P	N
06/27/2005	200076308	PR	PR	S		P	N
04/18/2005	200076284	BH	PR	U		F	Y
04/18/2005	200076283	BH	PR	U		F	Y
05/18/2000	200006951	PR	PR	S		P	N
05/19/1998	500146811	BH	SI			P	N
05/16/1997	500146810	BH	PR			P	N
03/20/1996	500146809	PR	PR				Y
06/29/1994	500146808		PR				

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
214128	WELL	PR	10/17/1958	GW	067-05439	HARMON MVRD UNIT 1	<input checked="" type="checkbox"/>

**Equipment:**Location Inventory

Inspector Name: LABOWSKIE, STEVE

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	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
TANK LABELS/PLACARDS	Unsatisfactory		Install labels and placards to comply with rule 210.d.	09/07/2012
WELLHEAD	Satisfactory			

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

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

Comment: \_\_\_\_\_

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

#### Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
DEBRIS		thread protectors on ground		

#### Spills:

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

☐ Multiple Spills and Releases?

#### Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Separator	1	Satisfactory			
Bird Protectors	1	Satisfactory			
Gas Meter Run	1	Satisfactory			
Flow Line	1	Satisfactory			

<b>Facilities:</b>		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	OTHER	Open Top	37.107920,-107.746760	
S/U/V:	Unsatisfactory		Comment: _____		
Corrective Action: label tank with contents, capacity and NFPA				Corrective Date: _____	
<b>Paint</b>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Inadequate	Walls Sufficient	Base Sufficient	Inadequate	
Corrective Action	raise/maintain berms			Corrective Date	09/07/2012
Comment	_____				
<b>Venting:</b>					
Yes/No	Comment				
_____					
<b>Flaring:</b>					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

**Predrill**

Location ID: 325150

**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: 214128 Type: WELL API Number: 067-05439 Status: PR Insp. Status: PR

**Producing Well**

Comment:

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

Inspector Name: LABOWSKIE, STEVE

Type of Spill: _____	Description: _____	Estimated Spill Volume: _____
Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
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>
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Sample Location: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
1003a.	Debris removed? <u>  In  </u> CM <u>  thread protectors  </u>
CA	<div style="border: 2px solid red; padding: 2px;">remove</div> CA Date _____
	Waste Material Onsite? <u>  Pass  </u> CM _____
CA	_____ CA Date _____
	Unused or unneeded equipment onsite? <u>  Pass  </u> CM _____
CA	_____ CA Date _____
	Pit, cellars, rat holes and other bores closed? <u>  Pass  </u> CM _____
CA	_____ CA Date _____
	Guy line anchors removed? <u>  Pass  </u> CM _____
CA	_____ CA Date _____
	Guy line anchors marked? _____ CM _____
CA	_____ CA Date _____
1003b.	Area no longer in use? <u>  In  </u> Production areas stabilized ? <u>  Pass  </u>
1003c.	Compacted areas have been cross ripped? <u>  Pass  </u>
1003d.	Drilling pit closed? <u>  Pass  </u> Subsidence over on drill pit? <u>  Pass  </u>
	Cuttings management: _____
1003e.	Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? <u>  In  </u>
	Production areas have been stabilized? <u>  Pass  </u> Segregated soils have been replaced? <u>  Pass  </u>
RESTORATION AND REVEGETATION	
<u>Cropland</u>	

Inspector Name: LABOWSKIE, STEVE

Top soil replaced \_\_\_\_\_

Recontoured \_\_\_\_\_

Perennial forage re-established \_\_\_\_\_

Non-Cropland

Top soil replaced Pass

Recontoured Pass

80% Revegetation In

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 \_\_\_\_\_

Multi-Well Location ☐

**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: \_\_\_\_\_