


<b>FORM INSP</b> Rev 05/11	<b>State of Colorado</b> <b>Oil and Gas Conservation Commission</b> 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: 08/06/2012

Document Number: 663901463

Overall Inspection: Satisfactory

**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>QUINT, CRAIG</u>
	<u>417654</u>	<u>417651</u>		

**Operator Information:**

OGCC Operator Number: 96340 Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Address: 4600 S DOWNING ST

City: ENGLEWOOD State: CO Zip: 80113

**Contact Information:**

Contact Name	Phone	Email	Comment
Halde, Kerry	719-346-0653 off	haldesand@centurytel.net	719-340-0329 cell

**Compliance Summary:**

QtrQtr: SENE Sec: 19 Twp: 10S Range: 55W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/11/2011	200308326	PR	PR	S			N
11/02/2010	200284997	PR	PR	S			N
10/05/2010	200276191	PR	PR	U			Y
09/09/2010	200270682	PR	WO	U			N

**Inspector Comment:**

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name
417654	WELL	PR	06/01/2012	OW	073-06420	ALOHA MULA 10 <input checked="" type="checkbox"/>

**Equipment:**

Location Inventory

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

**Location**

**Lease Road:**

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	PARTIALLY ELEVATED GRAVEL ROAD THROUGH PASTURE.		

<b>Signs/Marker:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	LEASE SIGN BY WELL		
BATTERY	Satisfactory	LEASE SIGN BY TANKS W/ASSOCIATED WELLS POSTED.		
TANK LABELS/PLACARDS	Satisfactory	METAL SIGNS BY TANKS & TREATERS		

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

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

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

<b>Spills:</b>				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

<b>Fencing/:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
LOCATION	Satisfactory	LOCATION FENCED WITH WIRE		

<b>Equipment:</b>					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ancillary equipment	4	Satisfactory	GAS SCRUBBER, DAY TANK, CATHOTIC GENERATOR & RECTIFIER		
Pump Jack	1	Satisfactory	320 LUFKIN		
Deadman # & Marked	4	Satisfactory			
Veritcal Heater Treater	2	Satisfactory	2-6'X20'		
Prime Mover	1	Satisfactory	E-40 AJAX GAS ENGINE W/MUFFLER		

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	300 BBLs	FIBERGLASS AST	39.165680,-103.585810
S/U/V:	Satisfactory		Comment:	TAN TANKS
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
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	4	300 BBLs	STEEL AST	39.165680,-103.585810
S/U/V:	Satisfactory		Comment:	CENTRAL BATTERY F/ALOHA MULA #9, 10, 11, 12. TANKS ARE TAN
Corrective Action:				Corrective Date:
<u>Paint</u>				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
<u>Berms</u>				
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

<b>Flaring:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

<b>Predrill</b>				
Location ID: <u>417651</u>				
<b>Site Preparation:</b>				
Lease Road Adeq.:	Pads:	Soil Stockpile:	_____	
Corrective Action:	Date:	CDP Num.:	_____	

**Form 2A COAs:**

**Comment:**

**CA:**

**Date:**

**Wildlife BMPs:**

BMP Type	Comment
<p>PROPOSED BMPs</p>	<p>BMP Plan</p> <p>Wiepking - Fullerton Energy, L.L.C.</p> <p>4600 S. Downing St.</p> <p>Englewood, CO 80113</p> <p>303 - 789 -1798</p> <p>303 -761- 9067(fax)</p> <p>Certification to Discharge</p> <p>Under</p> <p>CDPS General Permit COR -03000</p> <p>Stormwater Discharges Associated with Construction</p> <p>Certification Number COR 39788</p> <p>Aloha Mula # 10 well</p> <p>T10S, R55W</p> <p>Sec. 19: SE1 /4NE1 /4</p> <p>Lincoln County, Colorado</p> <p>Description of Well Site and Construction Area</p> <p>1 -3 acre site with access road for drilling of oil and gas well. Terrain is flat with native grass and sagebrush. No receiving waters will be affected by well pad. Silt fences will be installed on low side site of drill site. Drilling pits closed and reclaimed with the drillsite. Topsoil will be separated and spread on drill site as final operation before reseeding operations which will be completed within 6 months weather permitting. To prevent soil erosion site will be disked and straw crimped in or manure spread.</p> <p>Stormwater Management Plan (SWMP) is on file in Wiepking -Fullerton Energy, L.L.C. office.</p> <p>Spill Prevention, Control and Countermeasure Plan is on file in Wiepking- Fullerton Energy, L.L.C. office.</p>

**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: 417654 Type: WELL API Number: 073-06420 Status: PR Insp. Status: PR

**Producing Well**

Comment: CENTRAL BATTERY FOR ALOHA MULA #9, 10, 11, 12

**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:**

DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_

**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? Pass CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Waste Material Onsite? Pass CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? Pass CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

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

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Guy line anchors marked? Pass CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

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

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? In

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

**RESTORATION AND REVEGETATION**

Cropland

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: UNUSED AREAS OF THE LOCATION HAVE BEEN CONTOURED AND PLANTED WITH GRASS GROWTH EVIDENT, AREA IS ALSO COVERED WITH WEEDS THAT ARE CONTROLLED. WILL NEED TO BE MOWED SOON.

Overall Interim Reclamation In Process

**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: \_\_\_\_\_ Date Final Reclamation Completed: \_\_\_\_\_

Final Land Use: RANGELAND

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
Gravel	Pass	Gravel	Pass			

S/U/V: Satisfactory \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment:

CA: