

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:
10/30/2012

Document Number:
663800551

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>293056</u>	<u>311853</u>		<u>LONGWORTH, MIKE</u>

Operator Information:

OGCC Operator Number:	<u>10384</u>	Name of Operator:	<u>GENESIS GAS & OIL COLORADO LLC</u>
Address:	<u>1701 WALNUT STREET - 4TH FL</u>		
City:	<u>KANSAS CITY</u>	State:	<u>MO</u>
		Zip:	<u>64108</u>

Contact Information:

Contact Name	Phone	Email	Comment
Behner, Robert	816-222-7500	bbehner@genesisco.com	

Compliance Summary:

QtrQtr:	<u>LOT 16</u>	Sec:	<u>3</u>	Twp:	<u>1N</u>	Range:	<u>100W</u>
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Inspector Comment:

Oil stains at the well head of the FG 3-31 and at the doorway of the pumpshed. Signs, labels and placards needed and added too. No contact number on signs or location. Weeds need cut and controled.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
286511	WELL	PR	10/12/2008	OG	103-10888	FLETCHER GULCH 3-31	<input checked="" type="checkbox"/>
293056	WELL	IJ	10/19/2007	STRT	103-11095	FLETCHER GULCH 3-31WD	<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	Violation	Tanks are marked produced water. No NFPA placards, no operator name, no operator number, and no volumes are on tanks	Install sign to comply with rule 210.b.	11/16/2012
BATTERY	Unsatisfactory	No signs for the FG3-31. Nearest county road is not listed and no emergency contact number on sign.	Install sign to comply with rule 210.b.	11/16/2012
WELLHEAD	Unsatisfactory	No signs at the well heads	Install sign to comply with rule 210.b.	11/16/2012

Emergency Contact Number: (S/U/V) Violation Corrective Date: 11/16/2012

Comment: No emergency contact number found on location.

Corrective Action: Add Emergency contact number to Battery sign and tanks

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WEEDS	Unsatisfactory	Weeds growing around edges of location	Cut and control weeds on location	11/16/2012

Spills:				
Type	Area	Volume	Corrective action	CA Date
		<= 5 bbls	Oil stains at the well head of the Fletcher Gulch 3-31 and at the doors of the pump shed. Clean up and remediate per COGCC Rule series 900.	11/30/2012

Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Deadman # & Marked	4	Satisfactory			
Dehydrator	1	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	4	400 BBLS	STEEL AST	40.083120,108.609970
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:
Paint				
Condition	Adequate			
Other (Content)	_____			
Other (Capacity)	_____			
Other (Type)	_____			
Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Inadequate
Corrective Action	Get weeds out of berm.			Corrective Date 11/16/2012
Comment	Weeds inside of berm. Brings the integrity of the liner into ?.			
Venting:				
Yes/No	Comment			
Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 311853

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: 286511 Type: WELL API Number: 103-10888 Status: PR Insp. Status: PR

Producing Well

Comment: Oil stain around wellhead

Facility ID: 293056 Type: WELL API Number: 103-11095 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg 215
(e.g. 30 psig or -30" Hg)

Previous Test Pressure _____

MPP _____

Inj Zone: SEGO

TC: Pressure or inches of Hg _____

Previous Test Pressure _____

Last MIT: 10/02/2008

Brhd: Pressure or inches of Hg _____

Previous Test Pressure _____

AnnMTRReq: _____

Comment: no gauges on the tubing/casing or the braden. No personel on location. Pumping is run and injecting.

Method of Injection: PUMP FEED

Test Type: _____

Tbg psi: _____

Csg psi: _____

BH psi: _____

Insp. Status: _____

Comment: _____

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? Pass CM _____

CA _____ CA Date _____

Waste Material Onsite? _____ CM _____

CA _____ CA Date _____

Unused or unneeded equipment onsite? In 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? In 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? _____

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? _____ 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
Compaction	Pass	Compaction	Pass			

Inspector Name: LONGWORTH, MIKE

Berms	Pass	Berms	Pass			
Gravel	Pass	Gravel	Pass			
Seeding		Culverts	Pass			
Ditches	Pass	Ditches	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

COGCC Comments

Comment	User	Date
Oil stains at the well head of the FG 3-31 and at the doorway of the pumpshed. Signs, labels and placards needed and added too. No contact number on signs or location. Weeds need cut and controlled.	longworm	10/30/2012