

**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



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Inspection Date:

11/20/2012

Document Number:

663902011

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>208589</u>	<u>321935</u>		<u>QUINT, CRAIG</u>

Operator Information:OGCC Operator Number: 74250 Name of Operator: RESOURCE DEVELOPMENT TECHNOLOGY LLCAddress: 7175 W JEFFERSON STE 1200City: LAKEWOOD State: CO Zip: 80235**Contact Information:**

Contact Name	Phone	Email	Comment
Bowman, Tom	303-716-3200	tombowman@usermail.com	

Compliance Summary:QtrQtr: NENE Sec: 35 Twp: 16S Range: 45W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/20/2011	200316340	PR	PR	U			Y
09/24/2010	200276772	PR	PR	S			N
03/30/2010	200240334	PR	PR	U			Y
04/22/2008	200189100	PR	PR	S			N
03/27/2007	200107913	PR	PR	U		F	Y
01/09/2003	200033618	PR	PR	S		P	N
08/23/2000	200011659	PR	PR	S	I	P	N
01/25/1999	500140964	PR	PR			P	N
06/11/1997	500140963	PR	PR			P	N
11/11/1996	500140962	PR	PR			P	N
05/02/1996	500140961	DG	DG			P	Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
208589	WELL	PR	05/26/1996	OW	017-07524	TALLMAN 1-35	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: QUINT, CRAIG

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	DIRT ROAD ON EDGE OF FARM GROUND		

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	LEASE SIGN BY WELL		
BATTERY	Satisfactory	LEASE SIGN BY TANKS		
TANK LABELS/PLACARDS	Satisfactory	STICKERS ON TANKS		

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

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
Lube Oil	Pump Jack	<= 5 bbls	OIL SATURATED DIRT AROUND ENGINE AREA, REPAIR ENGINE LEAK, REMOVE OILY SOIL.	02/20/2013

☐ Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Prime Mover	1	Satisfactory	EA-30 AJAX GAS ENGINE		
Veritcal Heater Treater	1	Satisfactory			
Pump Jack	1	Satisfactory	228 TRIGO		
Ancillary equipment	4	Satisfactory	GAS SCRUBBER, CATHOTIC GENERATOR & RECTIFIER, DAY TANK, CHEMICAL TANK W/CONTAINMENT		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	Open Top	38.626460,-102.422680
S/U/V:			Comment:	200BBL OPEN TOP FIBERGLASS WATER TANK WITH ADEQUATE WILDLIFE SCREENING. SHARED BERM

Corrective Action:		Corrective Date:	
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Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Facilities:	<input type="checkbox"/> New Tank	Tank ID: _____
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Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	300 BBLS	FIBERGLASS AST	38.626460,-102.422680
S/U/V:	Satisfactory	Comment:	SHARED BERM	

Corrective Action:		Corrective Date:	
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Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Inspector Name: QUINT, CRAIG

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	300 BBLS	FIBERGLASS AST	38.626460,-102.422680	
S/U/V:	Satisfactory		Comment:		
Corrective Action:				Corrective Date:	
Paint					
Condition					
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment		BERMS WILL NEED ATTENTION SOON.			
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 321935

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: 208589 Type: WELL API Number: 017-07524 Status: PR Insp. Status: PR

Producing Well

Comment: PRODUCING, ENGINE DOWN AT TIME OF INSPECTION.

Environmental**Spills/Releases:**

Inspector Name: QUINT, CRAIG

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: _____	

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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
1003a.	Debris removed? <u>Pass</u> CM _____
	CA _____ 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? _____ CM _____
	CA _____ CA Date _____
	Guy line anchors marked? _____ CM _____
	CA _____ CA Date _____
1003b.	Area no longer in use? <u>Pass</u> Production areas stabilized ? <u>Pass</u>
1003c.	Compacted areas have been cross ripped? _____
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? _____
	Production areas have been stabilized? <u>Pass</u> Segregated soils have been replaced? <u>Pass</u>
RESTORATION AND REVEGETATION	
<u>Cropland</u>	

Inspector Name: QUINT, CRAIG

Top soil replaced Pass

Recontoured Pass

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? P

Comment: UNUSED AREAS OF THE LOCATION ARE FARMED.

Overall Interim Reclamation Pass

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
Gravel	Pass	Compaction	Pass	MHSP	Pass	

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____