

**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:
12/12/2012

Document Number:
665400596

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name: <u>PRECUP, JIM</u>
	<u>217125</u>	<u>307201</u>		

Operator Information:

OGCC Operator Number: <u>10312</u>	Name of Operator: <u>PROSPECT ENERGY LLC</u>
Address: <u>1600 STOUT ST STE 1710</u>	
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>

Contact Information:

Contact Name	Phone	Email	Comment
Gracey, Cam	970-567-6871	graceyservices@msn.com	foreman for Prospect Energy
ELLSWORTH, STUART		stuart.ellsworth@state.co.us	
Brumley, James	303-973-3228 Ext 231	jbrumley@bdminerals.com	Manages Prospect Energy
ONYSKIW, DENISE		denise.onyskiw@state.co.us	

Compliance Summary:

QtrQtr: <u>SWSW</u>	Sec: <u>17</u>	Twp: <u>8N</u>	Range: <u>68W</u>
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Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/13/2012	665400356	IJ	SI	U	P		N
07/07/2011	200314793	RT	SI	S			N
05/05/2010	200249344	RT	AC	U			Y
06/18/2009	200213372	RT	AC	S			N
06/24/2008	200191589	RT	SI	S			N
06/26/2007	200113699	MI	SI	S		P	N
06/28/2006	200092393	RT	AC	S		P	N
07/21/2005	200074195	RT	AC	S		P	N
07/13/2004	200056836	RT	AC	S		P	N
06/25/2003	200040643	RT	AC	S		P	N
07/23/2002	200028913	MI	AC	S		P	N
07/11/2001	200017871	RT	AC	S		P	N
07/27/2000	200008227	RT	AC	S		P	N
05/02/1995	500151414	RT	AC			P	N
11/02/1994	500151413		AC			P	N

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
217125	WELL	IJ	12/02/1992	DSPW	069-06312	MSSU 17-1	X

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

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

Comment: _____

Corrective Action: _____

Spills:

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

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 307201

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: 217125 Type: WELL API Number: 069-06312 Status: IJ Insp. Status: SI

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____

UIC Routine

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

Previous Test Pressure _____

MPP _____

Inj Zone: MDDYJ

TC: Pressure or inches of Hg _____

Previous Test Pressure _____

Last MIT: 06/26/2007

Brhd: Pressure or inches of Hg _____

Previous Test Pressure _____

AnnMTReq: _____

Comment: _____

Method of Injection: _____

Test Type: Verification of Repairs

Tbg psi: 0

Csg psi: 1540

BH psi: 0

Insp. Status: Pass

Comment: Tubing string and packer was replaced on this well --Initial pressure 1540 Psi--final fifteen munute test 1540 psi --No loss during test. Well passed MIT good for 5 years

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? 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? Pass 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? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? Pass

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 _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? P

Comment: _____

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	Ditches	Pass	SI	Pass	

Inspector Name: PRECUP, JIM

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

COGCC Comments

Comment	User	Date
This well passed MIT--Mit good for 5 years	precupj	12/17/2012