

**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:

12/18/2012

Document Number:

669400323

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |               |               |               |                         |
|---------------------|---------------|---------------|---------------|-------------------------|
| Location Identifier | Facility ID   | Loc ID        | Tracking Type | Inspector Name:         |
|                     | <u>216165</u> | <u>326283</u> |               | <u>LABOWSKIE, STEVE</u> |

**Operator Information:**OGCC Operator Number: 10000 Name of Operator: BP AMERICA PRODUCTION COMPANYAddress: 501 WESTLAKE PARK BLVDCity: HOUSTON State: TX Zip: 77079**Contact Information:**

| Contact Name | Phone                             | Email               | Comment                         |
|--------------|-----------------------------------|---------------------|---------------------------------|
| Best, Julie  | (970) 375-7540/<br>(970) 394-0131 | julie.best@bp.com   | Environmental Advisor           |
| Kerr, Kyle   | (970) 382-3690/<br>(970) 317-0623 | kyle.kerr@bp.com    | Environmental Advisor           |
| Fauth, Dan   | (970) 749-4238                    | daniel.fauth@bp.com | Environmental Advisor (Durango) |

**Compliance Summary:**QtrQtr: SESE Sec: 24 Twp: 34N Range: 8W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 03/30/2009 | 200207473 | PR         | PR          | S                            |          |                | N               |
| 10/24/2008 | 200198282 | PR         | PR          | S                            |          |                | N               |
| 09/25/2008 | 200195813 | PR         | PR          | S                            |          |                | N               |
| 03/08/2005 | 200069273 | PR         | PR          | S                            |          | P              | N               |
| 06/17/2003 | 200041232 | ID         | SI          | S                            |          | P              | N               |
| 12/20/2001 | 200023571 | PR         | PR          | S                            |          | P              | N               |
| 04/12/2001 | 200016460 | BH         | TA          | U                            |          | F              | Y               |
| 12/13/2000 | 200013036 | PR         | PR          | S                            |          | P              | N               |
| 09/23/1999 | 500150140 | PR         | PR          |                              |          | P              | N               |
| 08/27/1998 | 500150139 | CO         | PR          |                              |          | P              | N               |
| 11/05/1997 | 500150138 | PR         | PR          |                              |          | P              | N               |
| 09/25/1996 | 500150137 | PR         | PR          |                              |          | P              | N               |
| 09/13/1995 | 500150136 | PR         | PR          |                              |          |                | N               |

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

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name           |                                     |
|-------------|------|--------|-------------|------------|-----------|-------------------------|-------------------------------------|
| 216165      | WELL | PR     | 12/31/2001  | GW         | 067-07771 | ANDERSON GAS UNIT "C" 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 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

#### Signs/Marker:

| Type     | Satisfactory/Unsatisfactory | Comment                  | Corrective Action   | CA Date    |
|----------|-----------------------------|--------------------------|---|------------|
| WELLHEAD | Unsatisfactory              | sign still reads "Amoco" | Install sign with correct operator information to comply with rule 210.d. | 03/01/2013 |

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

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

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

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

#### Good Housekeeping:

| Type   | Satisfactory/Unsatisfactory | Comment                         | Corrective Action | CA Date |
|--------|-----------------------------|---------------------------------|-------------------|---------|
| DEBRIS |                             | used rolled-up fencing material |                   |         |

#### Spills:

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

☐ Multiple Spills and Releases?

#### Fencing/:

| Type      | Satisfactory/Unsatisfactory | Comment                           | Corrective Action | CA Date |
|-----------|-----------------------------|-----------------------------------|-------------------|---------|
| OTHER     | Satisfactory                | stock panels around all equipment |                   |         |
| PUMP JACK | Satisfactory                | guard fence                       |                   |         |

#### Equipment:

| Type                        | # | Satisfactory/Unsatisfactory | Comment  | Corrective Action | CA Date |
|-----------------------------|---|-----------------------------|--|-------------------|---------|
| Ancillary equipment         | 1 | Satisfactory                | AC equipment   |                   |         |
| Horizontal Heated Separator | 1 | Satisfactory                |  |                   |         |
| Bird Protectors             | 1 | Satisfactory                |  |                   |         |
| Flow Line                   | 1 | Satisfactory                |  |                   |         |
| Ancillary equipment         | 1 | Satisfactory                | telemetry  |                   |         |
| Prime Mover                 | 1 | Satisfactory                | elec.  |                   |         |
| Gas Meter Run               | 1 | Satisfactory                |  |                   |         |
| Pump Jack                   | 1 | Satisfactory                |  |                   |         |
| Ancillary equipment         | 1 | Satisfactory                | buried culvert/below ground valve access, located off graveled pad (in interim area) |                   |         |

Inspector Name: LABOWSKIE, STEVE

|                    |                             |              |                   |         |  |
|--------------------|-----------------------------|--------------|-------------------|---------|--|
| Deadman # & Marked | 4                           | Satisfactory |                   |         |  |
| <b>Venting:</b>    |                             |              |                   |         |  |
| Yes/No             | Comment                     |              |                   |         |  |
|                    |                             |              |                   |         |  |
| <b>Flaring:</b>    |                             |              |                   |         |  |
| Type               | Satisfactory/Unsatisfactory | Comment      | Corrective Action | CA Date |  |
|                    |                             |              |                   |         |  |

**Predrill**

Location ID: 326283

**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: 216165 Type: WELL API Number: 067-07771 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 : _____ |            |

**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: 

snow covered at time of inspection

|        |   |          |  |  |  |  |  |               |  |
|--------|---|----------|--|--|--|--|--|---------------|--|
| 1003a. | Debris removed? _____                                       | CM _____ |  |  |  |  |  |               |  |
|        | CA _____  |          |  |  |  |  |  | CA Date _____ |  |
|        | Waste Material Onsite? _____                                | CM _____ |  |  |  |  |  |               |  |
|        | CA _____  |          |  |  |  |  |  | CA Date _____ |  |
|        | Unused or unneeded equipment onsite? _____                  | 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? <u>Pass</u>                        | CM _____ |  |  |  |  |  |               |  |
|        | CA _____  |          |  |  |  |  |  | CA Date _____ |  |

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

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

1003d. Drilling pit closed? \_\_\_\_\_ 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? \_\_\_\_\_

Production areas have been stabilized? \_\_\_\_\_ Segregated soils have been replaced? \_\_\_\_\_

RESTORATION AND REVEGETATION

Cropland

Inspector Name: LABOWSKIE, STEVE

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

Recontoured \_\_\_\_\_

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

Non-Cropland

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

Recontoured \_\_\_\_\_

80% Revegetation \_\_\_\_\_

1003 f. Weeds Noxious weeds? \_\_\_\_\_

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: no readily visible stormwater issues

CA: \_\_\_\_\_