

**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:

02/04/2013

Document Number:

664000751

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Tracking Type	Inspector Name:
	<u>236056</u>	<u>311873</u>		<u>SCHURE, KYM</u>

Operator Information:

OGCC Operator Number: 76840 Name of Operator: SCHNEIDER ENERGY SERVICES INC

Address: P O BOX 297

City: FORT MORGAN State: CO Zip: 80701

Contact Information:

Contact Name	Phone	Email	Comment
Schneider, Jeff	970-867-9437/ (214) 244-3819	jeff@schneiderenergy.com	

Compliance Summary:

QtrQtr: NWSE Sec: 23 Twp: 1N Range: 53W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/12/2007	200118785	PR	PR	S			N
08/24/2007	200118185	PR	PR	S			N
09/17/2004	200059985	PR	PR	S		P	N
04/06/2004	200052883	ES	PR	U		F	Y
06/01/2000	200007216	PR	PR	S		F	Y
10/10/1995	500159217	PR	PR			F	Y

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
235819	WELL	AL	07/08/1969	LO	121-08309	LOUIS J GEBAUER 7-23	<input checked="" type="checkbox"/>
236056	WELL	PR	06/17/2005	OW	121-08546	LOUIS J GEBAUER 1A-23	<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	Unsatisfactory	grade road or fill ruts	grade road or fill ruts	03/31/2013

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory	All tanks, vessels & containers are required to have contents, quantities and fire code placards and labels	Install sign to comply with rule 210.b.	03/31/2013

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

Comment: Called No. on signage, Jeff Schneider answered

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	Unsatisfactory	tubing laying on ground at wellhead	remove unused equipment and supplies	03/31/2013
TRASH	Unsatisfactory	trash at pumpjack	remove trash at pump jack	03/31/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	Separator	> 5 bbls	Remove stained/saturated soils from separator toward N. side of P/W pit and off location	03/31/2013
PW/CO	Tank	<= 5 bbls	Remediate P/W inside berm at tank battery	03/31/2013
Lube Oil	Pump Jack	<= 5 bbls	Repair leak at gear box	03/31/2013
Crude Oil	WELLHEAD	<= 5 bbls	Remove stained/saturated soils at wellhead	03/31/2013

☒ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
PUMP JACK	Unsatisfactory	Fence down at pump jack	Repair fence	03/31/2013

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Separator	1	Violation		Repair leak or replace equipment	03/31/2013
Vertical Heated Separator	1	Unsatisfactory	Open port in heating unit	Close port in heating unit	03/31/2013
Ancillary equipment	2	Unsatisfactory	No containment under chemical additive tanks at pump jack.	Install containment under chemical additive barrels at pump jack or remove containers	03/31/2013
Pump Jack	1	Satisfactory			
Deadman # & Marked	4	Unsatisfactory	No markers at deadman	4' high, highly visible markers placed at deadman	03/31/2013

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	1	300 BBLS	STEEL AST		
S/U/V:			Comment:		
Corrective Action:				Corrective Date:	
Paint					
Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	300 BBLS	STEEL AST		
S/U/V:	Unsatisfactory		Comment:		
Corrective Action:				Corrective Date: 03/31/2013	
Paint					
Condition					
Other (Content)					
Other (Capacity)					
Other (Type)					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Inadequate	Walls Insufficient	Base Sufficient	Inadequate	
Corrective Action				Corrective Date	
Repair and maintain berms				03/31/2013	
Comment					
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 311873

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: 235819 Type: WELL API Number: 121-08309 Status: AL Insp. Status: AL

Producing Well

Comment: Pump jack, Location has numerous spills and is being investigated by COGCC Environmental.

Facility ID: 236056 Type: WELL API Number: 121-08546 Status: PR Insp. Status: PR

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? _____ 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? _____ 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? _____ 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? _____

Inspector Name: SCHURE, KYM

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? _____

Comment: Multiple spills have negatively effected the vegetation and enlarged the footprint of the location.

Overall Interim Reclamation _____ Fail _____

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
Other	Fail					

S/U/V: Unsatisfactory Corrective Date: 03/31/2013

Comment: No BMP's in place. Surface erosion observed

CA: Install BMP's

Pits:

Inspector Name: SCHURE, KYM

Pit Type: Produced Water Lined: _____ Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: Inadequate

Comment: Skim pit requires liner. Skim pit needs cleaned from surface, netting needs repair

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: Mesh Netting Condition: Gaps

Comment: Gaps along base of netting at skim pit

Anchor Trench Present: _____ Oil Accumulation: YES 2+ feet Freeboard: _____

Pit (S/U/V): Violation Comment: Unlined skim pit, oil residue on surface of P/W pit.

Corrective Action: Remove/remediate/line skim pit or remove/remediate/replace pit with tank system.
Clean P/W pit of all oil residue.

Date: 03/31/2013

Pits:

Pit Type: Skimming/Settling Lined: NO Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: Inadequate

Comment: No liner in skim pit, skim pit requires cleaning

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: _____ 2+ feet Freeboard: _____

Pit (S/U/V): _____ Comment: _____

Corrective Action: _____

Date: _____