

Inspector Name: SCHURE, KYM

**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:

05/08/2013

Document Number:

664000949

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>414506</u>	<u>414488</u>	<u>SCHURE, KYM</u>	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10177 Name of Operator: ENERPLUS RESOURCES (USA) CORPORATIONAddress: 950 17TH STREET #2200City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
		<u>rparham@enerplus.com</u>	

Compliance Summary:QtrQtr: SESE Sec: 27 Twp: 6N Range: 52W**Inspector Comment:**P&A SATISFACTORY**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
<u>414506</u>	<u>WELL</u>	<u>XX</u>	<u>11/18/2009</u>	<u>GW</u>	<u>075-09384</u>	<u>KOESTER 6-52-27-44</u>	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Special Purpose Pits: <u> </u>	Drilling Pits: <u>1</u>	Wells: <u>1</u>	Production Pits: <u> </u>
Condensate Tanks: <u>1</u>	Water Tanks: <u>1</u>	Separators: <u>1</u>	Electric Motors: <u> </u>
Gas or Diesel Motors: <u> </u>	Cavity Pumps: <u> </u>	LACT Unit: <u> </u>	Pump Jacks: <u> </u>
Electric Generators: <u> </u>	Gas Pipeline: <u>1</u>	Oil Pipeline: <u> </u>	Water Pipeline: <u> </u>
Gas Compressors: <u> </u>	VOC Combustor: <u> </u>	Oil Tanks: <u> </u>	Dehydrator Units: <u> </u>
Multi-Well Pits: <u> </u>	Pigging Station: <u> </u>	Flare: <u>1</u>	Fuel Tanks: <u> </u>

LocationEmergency Contact Number: (S/U/V) Corrective Date: Comment: Corrective Action: **Spills:**

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Venting:**

Yes/No	Comment
<u> </u>	<u> </u>

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 414488

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: 414506 Type: WELL API Number: 075-09384 Status: XX Insp. Status: PA

<u>Cement</u>	
<u>Cement Contractor</u>	
Contractor Name: <u>Magna Energy</u>	Contractor Phone: <u>970-867-9007</u>
<u>Surface Casing</u>	
Cement Volume (sx): <u>31</u>	Circulate to Surface: <u>YES</u>
Cement Fall Back: <u>YES</u>	Top Job, 1" Volume: <u> </u>
<u>Intermediate Casing</u>	
Cement Volume (sxs): <u> </u>	Good Return During Job: <u> </u>
<u>Production Casing</u>	
Cement Volume (sx): <u>100</u>	Good Return During Job: <u>YES</u>
<u>Plugging Operations</u>	
Depth Plugs(feet range): <u>2530'</u>	Cement Volume (sx): <u>40</u>
Good Return During Job: <u>YES</u>	Cement Type: <u>15.8# CGC</u>
Comment: <div style="border: 1px solid black; padding: 2px; display: inline-block; min-height: 20px;">Satisfactory</div>	

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:	

<u>Water Well:</u>		Lat	Long
DWR Receipt Num: _____	Owner Name: _____	GPS : _____	_____

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: **RANGELAND**

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? _____

RESTORATION AND REVEGETATIONCropland

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 _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND

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 ☐

Inspector Name: SCHURE, KYM

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____