

**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:

05/14/2013

Document Number:

670200449

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>
	300529	383321	BURGER, CRAIG	2A Doc Num: _____

Operator Information:OGCC Operator Number: 10071 Name of Operator: BARRETT CORPORATION* BILLAddress: 1099 18TH ST STE 2300City: DENVERState: COZip: 80202**Contact Information:**

Contact Name	Phone	Email	Comment
Merry, Jesse		jmerry@billbarrettcop.com	Area Superintendent
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor
Axelson, Aaron		aaxelson@billbarrettcop.com	Production Foreman

Compliance Summary:QtrQtr: SESE Sec: 31 Twp: 6S Range: 91W**Inspector Comment:**

2007 NOAV noted above was not for this location. It was on API #045-06821 (location #323875) and MIT was performed in 2008 resolving the issue. Bradenhead valves of API #'s 045-17932, 17925, 17935, 17936 and 17933 are piped to a 200 bbl tank on location.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
300520	WELL	PR	12/31/2009	GW	045-17925	GGU MILLER 14A-32-691	<input checked="" type="checkbox"/>
300521	WELL	PR	11/30/2009	GW	045-17926	GGU MILLER 43A-31-691	<input checked="" type="checkbox"/>
300522	WELL	PR	11/30/2009	GW	045-17927	GGU MILLER 44C-31-691	<input checked="" type="checkbox"/>
300523	WELL	PR	11/30/2009	GW	045-17928	GGU MILLER 44A-31-691	<input checked="" type="checkbox"/>
300524	WELL	PR	12/29/2009	GW	045-17929	GGU MILLER 14B-32-691	<input checked="" type="checkbox"/>
300525	WELL	PR	12/19/2009	GW	045-17930	GGU MILLER 14C-32-691	<input checked="" type="checkbox"/>
300526	WELL	PR	07/26/2010	GW	045-17931	GGU MILLER 14D-32-691	<input checked="" type="checkbox"/>
300527	WELL	PR	11/25/2009	GW	045-17932	GGU MILLER 44D-31-691	<input checked="" type="checkbox"/>
300528	WELL	PR	11/07/2009	GW	045-17933	MILLER 43B-6-791	<input checked="" type="checkbox"/>
300529	WELL	PR	11/07/2009	GW	045-17934	MILLER 43D-6-791	<input checked="" type="checkbox"/>
300530	WELL	PR	11/03/2009	GW	045-17935	MILLER 43C-6-791	<input checked="" type="checkbox"/>
300531	WELL	PR	11/07/2009	GW	045-17936	MILLER 43A-6-791	<input checked="" type="checkbox"/>

Equipment:Location Inventory

Inspector Name: BURGER, 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

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Spills:

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

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
IGNITOR/COMBUST OR	Satisfactory	wire fence		
SEPARATOR	Satisfactory	wire fence		
WELLHEAD	Satisfactory	cattle panel		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	12	Satisfactory			
Ancillary equipment	3	Satisfactory	descaler units		
Pig Station	1	Satisfactory			
Plunger Lift	12	Satisfactory			
Bird Protectors	10	Satisfactory			
Gathering Line	1	Satisfactory			
Emission Control Device	1	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	200 BBLS	STEEL AST	39.477500,-107.588930	
S/U/V:	Satisfactory		Comment:		
Corrective Action:				Corrective Date:	
<u>Paint</u>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment		HDPE lined			
Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	500 BBLS	HEATED STEEL AST	39.475960,-107.588880	
S/U/V:			Comment:		
Corrective Action:				Corrective Date:	
<u>Paint</u>					
Condition					
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<u>Berms</u>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment					

Inspector Name: BURGER, CRAIG

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	5	500 BBLS	STEEL AST	,	
S/U/V:	Satisfactory		Comment: same berm as heated tanks		
Corrective Action:					Corrective Date:
Paint					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action					Corrective Date
Comment					
Venting:					
Yes/No		Comment			
YES		bradenhead valves open			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Ignitor/Combustor	Satisfactory				

Predrill

Location ID: 383321

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: 300520 Type: WELL API Number: 045-17925 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300521 Type: WELL API Number: 045-17926 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300522 Type: WELL API Number: 045-17927 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300523 Type: WELL API Number: 045-17928 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300524 Type: WELL API Number: 045-17929 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300525 Type: WELL API Number: 045-17930 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300526 Type: WELL API Number: 045-17931 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300527 Type: WELL API Number: 045-17932 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300528 Type: WELL API Number: 045-17933 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300529 Type: WELL API Number: 045-17934 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300530 Type: WELL API Number: 045-17935 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 300531 Type: WELL API Number: 045-17936 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Environmental**Spills/Releases:**

Type of Spill: Description: Estimated Spill Volume:

Inspector Name: BURGER, CRAIG

Comment:

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location:

Emission Control Burner (ECB): Y _____

Comment: _____

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

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? In 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? Pass _____ Production areas stabilized ? Pass _____

1003c. Compacted areas have been cross ripped? Pass _____

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? _____

Production areas have been stabilized? Pass _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Inspector Name: BURGER, CRAIG

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____ P _____

Comment:

Overall Interim Reclamation _____

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
Sediment Traps	Pass	Sediment Traps	Fail			
		Rip Rap	Pass			
Blankets	Pass	Culverts	Pass			
Berms	Pass	Check Dams	Fail	MHSP	Pass	
Rip Rap	Pass	Waddles	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment:

CA: