


FORM INSP Rev 05/11	State of Colorado Oil and Gas Conservation Commission <small>1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109</small>		DE	ET	OE	ES
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FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____
	239238	317532	SCHURE, KYM		

Inspection Date:
06/12/2013

Document Number:
664001051

Overall Inspection:
Violation

Operator Information:

OGCC Operator Number: 7800 Name of Operator: BEREN CORPORATION

Address: 2020 N BRAMBLEWOOD STREET

City: WICHITA State: KS Zip: 67206

Contact Information:

Contact Name	Phone	Email	Comment
Richmond, Emma	(316) 337-8370	ecrichmond@berexco.com	
KOEHLER, BOB		bob.koehler@state.co.us	
LEONARD, MIKE		mike.leonard@state.co.us	
BURN, DIANA		diana.burn@state.co.us	

Compliance Summary:

QtrQtr: SESW Sec: 29 Twp: 12N Range: 56W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/06/2003	200040120	PR	PR	S		P	N
06/05/2003	200039986	PR	PR	S		P	N
04/09/2003	200037475	PR	PR	U		F	Y
10/04/2001	200020364	PR	PR	U		F	Y
06/12/2001	200017810	PR	PR	S	I	P	Y
11/02/1998	500160782	CO					
10/20/1998	500160781	PR	PR			P	N
11/18/1997	500160780	MT	TA			F	Y
09/24/1996	500160779	CO	PR			F	Y
03/06/1996	500160778	PR	PR			F	Y
01/13/1995	500160777	PR	PR				

Inspector Comment:

Invalid emergency contact no. (violation)COGCC Inspector called (308) 334-5680 at 7:00pm on 06/12/2013 answered by machine, resulting in violation.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
239238	WELL	PR	02/01/2011	OW	123-07025	MOYER UNIT 14-29	<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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	Unsatisfactory		Install sign to comply with rule 210.d.	07/31/2013
BATTERY	Unsatisfactory	Signage at battery must include all related wells listed.	Install sign to comply with rule 210.d.	07/31/2013
WELLHEAD	Satisfactory	Invalid emergency contact no.		

Emergency Contact Number: (S/U/V) _____ Violation _____ Corrective Date: 07/31/2013

Comment: Emergency contact no. is invalid, answered by machine after hours.

Corrective Action: Install signage with valid emergency contact no.

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Unsatisfactory		remove trash	07/31/2013

Spills:

Type	Area	Volume	Corrective action	CA Date
Lube Oil	Pump Jack	<= 5 bbls	Repair leak at gear box, remove/remediate affected soils at pump jack and wellhead	07/31/2013
PW/CO	WELLHEAD	<= 5 bbls	Remove/remediate stained/saturated soils at wellhead.	07/31/2013
Other	WELLHEAD	<= 5 bbls	Leak at chemical/lubricant additive tank/injector for stuffing box.	07/31/2013

Multiple Spills and Releases?

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ancillary equipment	1	Unsatisfactory	Leak at chemical additive tank for stuffing box.	Repair leak, remove/remediate affected soils.	07/31/2013
Pump Jack	1	Unsatisfactory	Leak at gear box	Repair leak at gear box, remove/remediate affected soils	07/31/2013

Venting:

Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 317532

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: 239238 Type: WELL API Number: 123-07025 Status: PR Insp. Status: PR

Producing Well

Comment:

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:

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

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? _____

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: _____

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

S/U/V: **Unsatisfactory** Corrective Date: **07/31/2013**

Comment: **No BMP's in place**

CA: **Install and maintain BMP's for lease road, well site and battery**