

**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:

06/28/2013

Document Number:

670200605

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	412786	413567	BURGER, CRAIG	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10071 Name of Operator: BARRETT CORPORATION* BILL

Address: 1099 18TH ST STE 2300

City: DENVER State: CO Zip: 80202

Contact Information:

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

Compliance Summary:

QtrQtr: NENE Sec: 23 Twp: 6S Range: 92W

Inspector Comment:

Issues from previous inspection (document #670200274) have been addressed.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
412774	WELL	PR	06/24/2010	LO	045-18595	THARP 41D-23-692	X
412775	WELL	PR	07/13/2010	GW	045-18596	THARP 44C-14-692	X
412776	WELL	PR	06/14/2010	GW	045-18597	THARP 44B-14-692	X
412777	WELL	PR	07/26/2010	GW	045-18598	THARP 44A-14-692	X
412778	WELL	PR	07/13/2010	GW	045-18599	THARP 44D-14-692	X
412779	WELL	PR	06/14/2010	GW	045-18600	THARP 11A-24-692	X
412780	WELL	PR	06/01/2010	GW	045-18601	THARP 11B-24-692	X
412781	WELL	PR	06/01/2010	GW	045-18602	THARP 11C-24-692	X
412782	WELL	PR	06/01/2010	GW	045-18603	THARP 11D-24-692	X
412783	WELL	PR	07/26/2010	GW	045-18604	THARP 14A-13-692	X
412784	WELL	PR	07/26/2010	GW	045-18605	THARP 14B-13-692	X
412785	WELL	PR	07/26/2010	GW	045-18606	THARP 14C-13-692	X
412786	WELL	PR	07/13/2010	GW	045-18607	THARP 14D-13-692	X
412787	WELL	PR	06/14/2010	GW	045-18608	THARP 41A-23-692	X
412788	WELL	PR	06/14/2010	GW	045-18609	THARP 41B-23-692	X
412789	WELL	PR	06/24/2010	GW	045-18610	THARP 41C-23-692	X

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
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			
BATTERY	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
SEPARATOR	Satisfactory	wire fence		
IGNITOR/COMBUST OR	Satisfactory	wire fence		
WELLHEAD	Satisfactory	cattle panel		

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ancillary equipment	4	Satisfactory	descaler units		
Horizontal Heated Separator	16	Satisfactory			
Bird Protectors	13	Satisfactory			
Plunger Lift	16	Satisfactory			
Gas Meter Run	3	Satisfactory			
Gathering Line	1	Satisfactory			
Emission Control Device	1	Satisfactory			
Deadman # & Marked	6	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
PRODUCED WATER	1	200 BBLS	STEEL AST	39.518850,-107.625700	
S/U/V:	Satisfactory		Comment:	connected to bradenheads of some wells	
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	
PRODUCED WATER	2	500 BBLS	STEEL AST	39.518840,-107.625830	
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			

Inspector Name: BURGER, CRAIG

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	6	500 BBLS	HEATED STEEL AST	39.519440,-107.625970	
S/U/V:	Satisfactory		Comment:		
Corrective Action:				Corrective Date:	
Paint					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
Venting:					
Yes/No		Comment			
YES		bradenheads venting			
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	
Ignitor/Combustor	Satisfactory				

Predrill

Location ID: 413567

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: 412774 Type: WELL API Number: 045-18595 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 412775 Type: WELL API Number: 045-18596 Status: PR Insp. Status: PR

Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412776</u>	Type: <u>WELL</u>	API Number: <u>045-18597</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412777</u>	Type: <u>WELL</u>	API Number: <u>045-18598</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412778</u>	Type: <u>WELL</u>	API Number: <u>045-18599</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412779</u>	Type: <u>WELL</u>	API Number: <u>045-18600</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412780</u>	Type: <u>WELL</u>	API Number: <u>045-18601</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412781</u>	Type: <u>WELL</u>	API Number: <u>045-18602</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412782</u>	Type: <u>WELL</u>	API Number: <u>045-18603</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412783</u>	Type: <u>WELL</u>	API Number: <u>045-18604</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412784</u>	Type: <u>WELL</u>	API Number: <u>045-18605</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412785</u>	Type: <u>WELL</u>	API Number: <u>045-18606</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				
Facility ID: <u>412786</u>	Type: <u>WELL</u>	API Number: <u>045-18607</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
Producing Well				
Comment: <input type="text" value="plunger lift"/>				

Facility ID: 412787 Type: WELL API Number: 045-18608 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 412788 Type: WELL API Number: 045-18609 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 412789 Type: WELL API Number: 045-18610 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

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): 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? CM cellars not backfilled

CA CA Date

Guy line anchors removed? _____ CM _____
 CA _____ CA Date _____
 Guy line anchors marked? Pass 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? _____ 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? 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
Gravel	Pass	Check Dams	Pass	MHSP	Pass	
Ditches	Pass	Sediment Traps	Pass			

Inspector Name: BURGER, CRAIG

Waddles	Pass	Ditches	Pass			
Check Dams	Pass	Culverts	Pass			

S/U/V: Satisfactory Corrective Date:

Comment: Some check dams silted in.

CA: