

**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:

07/11/2013

Document Number:

668300518

Overall Inspection:

Unsatisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	246475	327177	JOHNSON, RANDELL	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10325 Name of Operator: RECOVERY ENERGY INCAddress: 1900 GRANT STREET #720City: DENVER State: CO Zip: 80203**Contact Information:**

Contact Name	Phone	Email	Comment
Parker, Roger	888-887-4449 X10	rparker@recoveryenergyco.com	CEO

Compliance Summary:QtrQtr: SWSE Sec: 32 Twp: 1N Range: 65W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/15/2013	668300034			U	P		N
04/05/2010	200245850	PR	PR	U			Y
02/29/2008	200128113	PR	PR	U			Y
06/24/2004	200056624	PR	PR	S		P	N
09/18/1998	500170845	CO	PR				
09/11/1998	500170844	CO	PR				
03/23/1998	500170839	PR	PR			P	N
09/11/1997	500170838	CO	PR			F	Y
03/28/1997	500170837	PR	PR				

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
246475	WELL	PR	07/20/2005	OW	123-14272	SAWYER 32-2	<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 Motors: _____	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	Two steel production tanks do not have the required NFPA, contents or capacity signage	Install sign to comply with rule 210.d.	08/11/2013
CONTAINERS	Unsatisfactory	Two barrels at wellhead do not have the required NFPA or contents signage	Install sign to comply with rule 210.d.	08/11/2013
WELLHEAD	Unsatisfactory	Wellhead does not have the required operator name, well name, well location or emergency contact number	Install sign to comply with rule 210.d.	08/11/2013

Emergency Contact Number: (S/U/V) Unsatisfactory Corrective Date: 08/11/2013

Comment: Incorrect emergency contact information

Corrective Action: Erect sign at battery with correct emergency contact information

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TRASH	Unsatisfactory	Trash on location	Remove trash	08/11/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date
Lube Oil	Pump Jack	<= 5 bbls	Prevent soil contamination from blow-by through exhaust of pump jack motor/Remove or remediate oil-contaminated soil	08/11/2013
Crude Oil	WELLHEAD	<= 5 bbls	Prevent leaks at stuffing box/Remove or remediate oil-contaminated soil	08/11/2013
Crude Oil	Separator	<= 5 bbls	Prevent leaks at separator line outside of berm/Remove or remediate oil-contaminated soil	08/11/2013
Lube Oil	Pump Jack	<= 5 bbls	Prevent leaks at gear box on pump jack/Remove or remediate oil-contaminated soil	08/11/2013
PW/CO	Tank	<= 5 bbls	Prevent leaks at front of steel production tank/Remove or remediate contaminated soil	08/11/2013

☒ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER	Satisfactory	Barbed wire fencing around meter run		
TANK BATTERY	Satisfactory	Barbed wire fencing		
OTHER	Satisfactory	Barbed wire fencing around wellhead and pump jack		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Prime Mover	1	Satisfactory	Gas engine powering pump jack		
Gas Meter Run	1	Satisfactory			
Bird Protectors	1	Satisfactory			
Horizontal Heated Separator	1	Satisfactory			
Pump Jack	1	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
OTHER	2	OTHER	STEEL AST	40.001560,-104.685580	
S/U/V:			Comment:		
Corrective Action:					Corrective Date:

Paint	
Condition	Adequate
Other (Content) _____	
Other (Capacity) _____	
Other (Type) _____	

Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action			Corrective Date	
Comment				

Venting:	
Yes/No	Comment
NO	

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 327177

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: 246475 Type: WELL API Number: 123-14272 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

Inspector Name: JOHNSON, RANDELL

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?	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?	Pass	CM		
	CA				CA Date
	Guy line anchors removed?		CM		
	CA				CA Date
	Guy line anchors marked?	Fail	CM	Deadmen not marked	
	CA	Mark deadmen			CA Date
					08/11/2013

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

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? Pass

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

RESTORATION AND REVEGETATION

Cropland

Inspector Name: JOHNSON, RANDELL

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 _____ Pass _____

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
Compaction	Pass	Compaction	Pass			
Other	Pass	Other	Pass			Vegetation
Gravel	Pass	Gravel	Pass			

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

Comment: _____

CA: _____

COGCC Comments

Comment	User	Date
Reinspection - Second overall unsatisfactory inspection - First overall unsatisfactory inspection 04/15/13 (Doc. #668300034)	johnsonr	07/11/2013