

**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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| DE | ET | OE | ES |
|----|----|----|----|

Inspection Date:

09/10/2013

Document Number:

670200840

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|---------------|---------------|----------------------|--------------------|--|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | |
| | <u>297487</u> | <u>335521</u> | <u>BURGER, CRAIG</u> | 2A Doc Num: | |

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 |
|-----------------|----------------|------------------------------|---------------------|
| Merry, Jesse | (970) 876-1959 | jmerry@billbarrettcorp.com | Production Foreman |
| Kellerby, Shaun | | Shaun.Kellerby@state.co.us | NW Field Supervisor |
| Axelson, Aaron | (970) 876-1959 | aaxelson@billbarrettcorp.com | Production Foreman |

Compliance Summary:

| | | | | | | | |
|---------------------|-----------|----------------|----------------|------------------------------|-------------------|----------------|-----------------|
| QtrQtr: <u>SENW</u> | | Sec: <u>21</u> | Twp: <u>6S</u> | | Range: <u>92W</u> | | |
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 11/20/2010 | 200284629 | PR | PR | S | | | N |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | |
|-------------|------|--------|-------------|------------|-----------|----------------|---|
| 297301 | WELL | PR | 04/22/2009 | GW | 045-16382 | JCJ 22C-21-692 | X |
| 297476 | WELL | PR | 04/08/2009 | GW | 045-16854 | JCJ 11A-21-692 | X |
| 297477 | WELL | PR | 04/20/2009 | GW | 045-16855 | JCJ 21B-21-692 | X |
| 297478 | WELL | PR | 04/20/2009 | GW | 045-16856 | JCJ 21A-21-692 | X |
| 297479 | WELL | PR | 03/26/2009 | GW | 045-16857 | JCJ 12D-21-692 | X |
| 297480 | WELL | PR | 03/25/2009 | GW | 045-16858 | JCJ 12C-21-692 | X |
| 297481 | WELL | PR | 03/26/2009 | GW | 045-16859 | JCJ 12B-21-692 | X |
| 297482 | WELL | PR | 03/30/2009 | GW | 045-16860 | JCJ 12A-21-692 | X |
| 297483 | WELL | PR | 04/09/2009 | GW | 045-16861 | JCJ 11D-21-692 | X |
| 297484 | WELL | PR | 04/09/2009 | GW | 045-16862 | JCJ 11C-21-692 | X |
| 297485 | WELL | PR | 03/25/2009 | GW | 045-16863 | JCJ 11B-21-692 | X |
| 297486 | WELL | PR | 04/22/2009 | GW | 045-16864 | JCJ 22D-21-692 | X |
| 297487 | WELL | PR | 04/22/2009 | GW | 045-16865 | JCJ 22B-21-692 | X |
| 297488 | WELL | PR | 04/09/2009 | GW | 045-16866 | JCJ 22A-21-692 | X |
| 297489 | WELL | PR | 04/08/2009 | GW | 045-16867 | JCJ 21D-21-692 | X |
| 297490 | WELL | PR | 04/13/2009 | GW | 045-16868 | JCJ 21C-21-692 | 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 | | | |
| BATTERY | Satisfactory | | | |
| TANK LABELS/PLACARDS | Satisfactory | | | |

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

Comment: _____

Corrective Action: _____

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

☐ Multiple Spills and Releases?

Fencing/:

| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|-----------|-----------------------------|-----------------------|-------------------|---------|
| SEPARATOR | Satisfactory | wire and tubing fence | | |
| WELLHEAD | Satisfactory | cattle panel | | |

Equipment:

| Type | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
|-----------------------------|----|-----------------------------|----------------|-------------------|---------|
| Plunger Lift | 16 | Satisfactory | | | |
| Bird Protectors | 13 | Satisfactory | | | |
| Ancillary equipment | 4 | Satisfactory | descaler units | | |
| Gas Meter Run | 1 | Satisfactory | | | |
| Deadman # & Marked | 8 | Satisfactory | | | |
| Emission Control Device | 1 | Satisfactory | | | |
| Horizontal Heated Separator | 16 | Satisfactory | | | |

Inspector Name: BURGER, CRAIG

| | | | | | |
|------------------------|-----------------------------|-----------------------------------|---------------------|-----------------------|--|
| Facilities: | | <input type="checkbox"/> New Tank | | Tank ID: _____ | |
| Contents | # | Capacity | Type | SE GPS | |
| CONDENSATE | 8 | 500 BBLS | HEATED STEEL AST | 39.514560,-107.676610 | |
| 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 | | bradenhead valves open | | | |
| Flaring: | | | | | |
| Type | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date | |
| Ignitor/Combustor | Satisfactory | | | | |

Predrill

Location ID: 335521

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: 297301 Type: WELL API Number: 045-16382 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 297476 Type: WELL API Number: 045-16854 Status: PR Insp. Status: PR

| | | | | |
|--|-------------------|------------------------------|-------------------|-------------------------|
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297477</u> | Type: <u>WELL</u> | API Number: <u>045-16855</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297478</u> | Type: <u>WELL</u> | API Number: <u>045-16856</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297479</u> | Type: <u>WELL</u> | API Number: <u>045-16857</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297480</u> | Type: <u>WELL</u> | API Number: <u>045-16858</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297481</u> | Type: <u>WELL</u> | API Number: <u>045-16859</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297482</u> | Type: <u>WELL</u> | API Number: <u>045-16860</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297483</u> | Type: <u>WELL</u> | API Number: <u>045-16861</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297484</u> | Type: <u>WELL</u> | API Number: <u>045-16862</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297485</u> | Type: <u>WELL</u> | API Number: <u>045-16863</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297486</u> | Type: <u>WELL</u> | API Number: <u>045-16864</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |
| Facility ID: <u>297487</u> | Type: <u>WELL</u> | API Number: <u>045-16865</u> | Status: <u>PR</u> | Insp. Status: <u>PR</u> |
| Producing Well | | | | |
| Comment: <input type="text" value="plunger lift"/> | | | | |

Facility ID: 297488 Type: WELL API Number: 045-16866 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 297489 Type: WELL API Number: 045-16867 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 297490 Type: WELL API Number: 045-16868 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: Could not verify pilot light was on.

Pilot: Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment: Revegetation not to 80% in some reclamation areas.

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
 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? In

Production areas have been stabilized? Pass 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 In Process

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Waddles | Pass | | | | | |
| Gravel | Pass | Gravel | Pass | | | |

Inspector Name: BURGER, CRAIG

| | | | | | | |
|---------|------|------------|------|------|------|--|
| Berms | Pass | Compaction | Pass | MHSP | Pass | |
| Rip Rap | Pass | | | | | |
| Ditches | Pass | Culverts | Pass | | | |

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____