


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: _____
	335872	335872	LONGWORTH, MIKE		

Inspection Date:
09/12/2013

Document Number:
663902177

Overall Inspection:
Satisfactory

Operator Information:

OGCC Operator Number: 10091 Name of Operator: BERRY PETROLEUM COMPANY

Address: 1999 BROADWAY STE 3700

City: DENVER State: CO Zip: 80202

Contact Information:

Contact Name	Phone	Email	Comment
Freeman, Chris		cpf@bry.com	
KELLERBY, SHAUN		shaun.kellerby@state.co.us	

Compliance Summary:

QtrQtr: SWSE Sec: 33 Twp: 5S Range: 96W

Inspector Comment:

Not drilled wells permit s expire 9/20/14

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
292100	WELL	PR	08/22/2008	GW	045-14594	CHEVRON 33-1D	X
292101	WELL	XX	08/27/2012	LO	045-14593	CHEVRON 33-2D	X
292102	WELL	XX	08/27/2012	LO	045-14592	CHEVRON 33-3D	X
292103	WELL	PR	08/01/2008	GW	045-14591	CHEVRON 33-9D	X
292104	WELL	PR	08/01/2008	GW	045-14590	CHEVRON 33-10 D	X
292105	WELL	PR	08/27/2008	GW	045-14589	CHEVRON 33-11D	X
292106	WELL	XX	08/27/2012	LO	045-14588	CHEVRON 33-12D	X
292107	WELL	XX	08/27/2012	LO	045-14587	CHEVRON 33-13D	X
292108	WELL	PR	09/23/2008	GW	045-14586	CHEVRON 1-29D	X
292109	WELL	PR	12/09/2009	GW	045-14585	CHEVRON 1-30 D	X

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

Lease Road:				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory			

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
CONTAINERS	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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
LOCATION	Satisfactory			

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Ancillary equipment	1	Satisfactory	Well treatment chemical tote at wells		
Horizontal Heated Separator	6	Satisfactory			
Plunger Lift	6	Satisfactory			
Bird Protectors	7	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	100 BBLS	PBV STEEL		
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					

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	300 BBLS	HEATED STEEL AST	39.565720,108.172140	
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					

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335872

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: 292100 Type: WELL API Number: 045-14594 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292101 Type: WELL API Number: 045-14593 Status: XX Insp. Status: ND

Facility ID: 292102 Type: WELL API Number: 045-14592 Status: XX Insp. Status: ND

Facility ID: 292103 Type: WELL API Number: 045-14591 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292104 Type: WELL API Number: 045-14590 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292105 Type: WELL API Number: 045-14589 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292106 Type: WELL API Number: 045-14588 Status: XX Insp. Status: ND

Facility ID: 292107 Type: WELL API Number: 045-14587 Status: XX Insp. Status: ND

Facility ID: 292108 Type: WELL API Number: 045-14586 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292109 Type: WELL API Number: 045-14585 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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? 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? Fail CM Unmarked anchors

CA Mark or remove anchors CA Date 10/12/2013

Guy line anchors marked? Fail CM Unmarked anchors

CA Mark or remove anchors CA Date 10/12/2013

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

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? Fail

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 Fail

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 _____

Inspector Name: LONGWORTH, MIKE

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
		Check Dams	Pass			
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			
Ditches	Pass	Ditches	Fail			
Seeding		Culverts	Pass			
Berms	Pass	Berms	Pass	MHSP	Pass	Secondary containment

S/U/V: Satisfactory

Corrective Date:

Comment:

CA: