

**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
----	----	----	----

Inspection Date:

09/20/2013

Document Number:

670200888

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	291334	335162	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
Merry, Jesse	(970) 876-1959	jmerry@billbarrettcorp.com	Production Foreman
Axelsson, Aaron	(970) 876-1959	aaxelson@billbarrettcorp.com	Production Foreman
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor

Compliance Summary:

QtrQtr:	NENW	Sec:	28	Twp:	6S	Range:	92W
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/25/2011	200311965	PR	PR	S			N
01/30/2009	200207174	PR	PR	S			N

Inspector Comment:

Location contains production equipment for location #335156.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	
290772	WELL	PR	12/05/2007	GW	045-14197	SPECIALTY 11C-28-692	<input checked="" type="checkbox"/>
291037	WELL	PR	12/04/2007	GW	045-14264	SPECIALTY 11B-28-692	<input checked="" type="checkbox"/>
291038	WELL	PR	12/24/2007	GW	045-14263	SPECIALTY 11A-28-692	<input checked="" type="checkbox"/>
291334	WELL	PR	12/05/2007	GW	045-14331	SPECIALTY 11D-28-692	<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
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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory	cattle panel		
SEPARATOR	Satisfactory	includes combustor		
OTHER	Satisfactory	wire fence at gathering line manifold		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Emission Control Device	1	Satisfactory			
Gathering Line	1	Satisfactory			
Plunger Lift	4	Satisfactory			
Bird Protectors	11	Satisfactory			
Ancillary equipment	4	Satisfactory	descaler and methanol units		
Gas Meter Run	3	Satisfactory			
Horizontal Heated Separator	12	Satisfactory			
Deadman # & Marked	5	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	39.504040,-107.675860	
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: 335162

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: 290772 Type: WELL API Number: 045-14197 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 291037 Type: WELL API Number: 045-14264 Status: PR Insp. Status: PR

Producing WellComment: Facility ID: 291038 Type: WELL API Number: 045-14263 Status: PR Insp. Status: PR**Producing Well**Comment: Facility ID: 291334 Type: WELL API Number: 045-14331 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:

Lat _____ Long _____

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

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? Pass 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 ? Pass1003c. Compacted areas have been cross ripped? Pass1003d. 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? InProduction 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 _____

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
Ditches	Pass	Culverts	Pass			
Waddles	Pass	Check Dams	Pass	MHSP	Pass	
Berms	Pass					
Rip Rap	Pass					

Inspector Name: BURGER, CRAIG

Check Dams	Pass	Ditches	Pass			
Sediment Traps	Pass	Gravel	Pass			

S/U/V: Satisfactory Corrective Date:

Comment:

CA: