

**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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Inspection Date:  
10/02/2013

Document Number:  
663902254

Overall Inspection:  
Satisfactory

**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	<u>417618</u>	<u>417618</u>	<u>LONGWORTH, MIKE</u>	2A Doc Num:	

**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
White, Brent		bkw@bry.com	Production Foreman
KELLERBY, SHAUN		shaun.kellerby@state.co.us	
Johnson, Derek	970-285-2200	DSJ@Bry.com	
Freeman, Chris		cpf@bry.com	

**Compliance Summary:**

QtrQtr: LOT 1 Sec: 19 Twp: 5S Range: 96W

**Inspector Comment:**

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name
417600	WELL	XX	06/03/2010	LO	045-19572	CHEVRON 19-18D
417602	WELL	XX	06/03/2010	LO	045-19573	CHEVRON 19-19D
417611	WELL	XX	06/03/2010	LO	045-19574	CHEVRON 19-20D
417614	WELL	XX	06/03/2010	LO	045-19575	CHEVRON 19-17D
417682	WELL	PR	01/13/2011	GW	045-19591	CHEVRON 19-21D
423714	PIT	AC	07/28/2011		-	CHEVRON C-19

**Equipment:**

Location Inventory

Special Purpose Pits: <u>        </u>	Drilling Pits: <u>1</u>	Wells: <u>5</u>	Production Pits: <u>1</u>
Condensate Tanks: <u>3</u>	Water Tanks: <u>1</u>	Separators: <u>3</u>	Electric Motors: <u>3</u>
Gas or Diesel Mortors: <u>6</u>	Cavity Pumps: <u>        </u>	LACT Unit: <u>        </u>	Pump Jacks: <u>        </u>
Electric Generators: <u>3</u>	Gas Pipeline: <u>1</u>	Oil Pipeline: <u>        </u>	Water Pipeline: <u>1</u>
Gas Compressors: <u>        </u>	VOC Combustor: <u>        </u>	Oil Tanks: <u>1</u>	Dehydrator Units: <u>        </u>
Multi-Well Pits: <u>        </u>	Pigging Station: <u>        </u>	Flare: <u>        </u>	Fuel Tanks: <u>1</u>

**Location**

*(This section is currently blank.)*

<b>Lease Road:</b>				
Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Main	Satisfactory	Road grader and storm water crews out doing maintenance.		

<b>Signs/Marker:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
CONTAINERS	Satisfactory			
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			
WELLHEAD	Satisfactory			

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

<b>Spills:</b>				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

<b>Fencing/:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

<b>Equipment:</b>					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	5	Satisfactory			
Horizontal Heated Separator	1	Satisfactory			
Plunger Lift	1	Satisfactory			

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	100 BBLS	PBV STEEL	,
S/U/V:	Satisfactory		Comment: _____	
Corrective Action:			Corrective Date:	
<b>Paint</b>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action			Corrective Date	
Comment				

<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	300 BBLS	HEATED STEEL AST	39.606270,108.213010
S/U/V:	Satisfactory		Comment: _____	
Corrective Action:			Corrective Date:	
<b>Paint</b>				
Condition	Adequate			
Other (Content) _____				
Other (Capacity) _____				
Other (Type) _____				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action			Corrective Date	
Comment				

<b>Venting:</b>	
Yes/No	Comment

<b>Flaring:</b>				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

<b>Predrill</b>				
Location ID: 417618				
<b>Site Preparation:</b>				
Lease Road Adeq.: _____		Pads: _____		Soil Stockpile: _____
Corrective Action: _____			Date: _____	CDP Num.: _____

**Form 2A COAs:**

Group	User	Comment	Date
Agency	yokleyb	Reserve pit must be lined.	06/03/2010
Agency	yokleyb	The moisture content of any drill cuttings in a cuttings pit, trench, or pile shall be as low as practicable to prevent accumulation of liquids greater than de minimis amounts. At the time of closure, the drill cuttings must also meet the applicable standards of table 910-1.	06/03/2010
Agency	yokleyb	The nearby hillside must be monitored for any day-lighting of drilling fluids throughout the drilling of the surface casing interval.	06/03/2010
Agency	yokleyb	Operator must ensure 110 percent secondary containment for any volume of fluids contained at well site during drilling and completion operations. If fluids are conveyed via pipeline, operator must implement best management practices to contain any unintentional release of fluids.	06/03/2010
Agency	yokleyb	No portion of any pit that will be used to hold liquids shall be constructed on fill material, unless the pit and fill slope are designed and certified by a professional engineer, subject to review and approval by the director prior to construction of the pit. The construction and lining of the pit shall be supervised by a professional engineer or their agent. The entire base of the pit must be in cut.	06/03/2010
Agency	yokleyb	All pits must be lined.	06/03/2010

**Comment:** Pit is lined. Landfarming on east side of location.

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**Comment:** 20 mph speed limits set on main road.

**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:

\_\_\_\_\_

**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: RANGELAND

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? Fail CM Open cellar and conductor for expired permit.

CA Close in accordance with COGCC Conductor Setting Policy CA Date 11/07/2013

Guy line anchors removed? Fail CM \_\_\_\_\_



Inspector Name: LONGWORTH, MIKE

Berms	Pass	Berms	Pass	MHSP	Pass	Secondary containment for chemical totes.
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S/U/V: Satisfactory Corrective Date: \_\_\_\_\_

Comment: Road and Bmp crews out maintaining road and BMPs

CA: \_\_\_\_\_

Permit:	Facility ID	Permit Num	Expiration Date
	423714	1642035	