

**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:

10/28/2013

Document Number:

663902320

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	335998	335998	LONGWORTH, MIKE	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:

Name of Operator: BERRY PETROLEUM COMPANYAddress: 1999 BROADWAY STE 3700City: DENVER State: CO Zip: 80202

- ☒ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

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

Compliance Summary:QtrQtr: SWNW Sec: 18 Twp: 6S Range: 96W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/13/2013	663900715			U	F		N

Inspector Comment:

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Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
287137	WELL	PR	01/14/2008	GW	045-12907	CHEVRON 18-25D	PR	<input checked="" type="checkbox"/>
287138	WELL	XX	06/07/2012	LO	045-12906	CHEVRON 18-26D	ND	<input checked="" type="checkbox"/>
287139	WELL	DA	09/05/2007	LO	045-12905	CHEVRON 18-24D	DA	<input checked="" type="checkbox"/>
287140	WELL	PA	05/02/2011	GW	045-12904	CHEVRON 18-23D	PA	<input checked="" type="checkbox"/>
287141	WELL	PR	12/09/2009	GW	045-12903	CHEVRON 18-21D	PR	<input checked="" type="checkbox"/>
287142	WELL	PR	12/28/2007	OW	045-12902	CHEVRON 18-22D	PR	<input checked="" type="checkbox"/>
287143	WELL	XX	06/07/2012	LO	045-12901	CHEVRON 18-12D	ND	<input checked="" type="checkbox"/>
287144	WELL	XX	06/07/2012	LO	045-12900	CHEVRON 18-13D	ND	<input checked="" type="checkbox"/>
291402	WELL	XX	06/07/2012	LO	045-14349	CHEVRON 18-14D	ND	<input checked="" type="checkbox"/>
291403	WELL	XX	06/07/2012	LO	045-14348	CHEVRON 18-15D	ND	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

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Inspector Name: LONGWORTH, MIKE

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			
TANK LABELS/PLACARDS	Satisfactory			
WELLHEAD	Satisfactory			

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

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	3	Satisfactory			
Plunger Lift	3	Satisfactory			
Bird Protectors	5	Satisfactory			
Ancillary equipment	1	Satisfactory	well treatment chemical tote at well		

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS

S/U/V:		Comment:	no change from last inspection
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Corrective Action:		Corrective Date:	
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Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 335998

Site Preparation:

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/U/V: _____

Corrective Action: _____

Date: _____ CDP Num.: _____

Form 2A COAs:**S/U/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/U/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Stormwater:****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: 287137 Type: WELL API Number: 045-12907 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 287138 Type: WELL API Number: 045-12906 Status: XX Insp. Status: ND

Facility ID: 287139 Type: WELL API Number: 045-12905 Status: DA Insp. Status: DA

Facility ID: 287140 Type: WELL API Number: 045-12904 Status: PA Insp. Status: PA

Facility ID: 287141 Type: WELL API Number: 045-12903 Status: PR Insp. Status: PR

Producing WellComment: **Producing well**Facility ID: 287142 Type: WELL API Number: 045-12902 Status: PR Insp. Status: PR**Producing Well**Comment: **Producing well**Facility ID: 287143 Type: WELL API Number: 045-12901 Status: XX Insp. Status: NDFacility ID: 287144 Type: WELL API Number: 045-12900 Status: XX Insp. Status: NDFacility ID: 291402 Type: WELL API Number: 045-14349 Status: XX Insp. Status: NDFacility ID: 291403 Type: WELL API Number: 045-14348 Status: XX Insp. Status: ND**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? <u> In </u> CM _____	
CA _____	CA Date _____
Guy line anchors removed? _____	CM _____
CA _____	CA Date _____
Guy line anchors marked? <u> Pass </u>	CM _____
CA _____	CA Date _____

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 In Process

Date Final Reclamation Started: _____	Date Final Reclamation Completed: _____
Final Land Use: _____	
Reminder: _____	
Comment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
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: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
Corrective Action: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
Date _____	
Overall Final Reclamation _____	Well Release on Active Location <input type="checkbox"/>
	Multi-Well Location <input type="checkbox"/>

Inspector Name: LONGWORTH, MIKE

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms	Pass	Berms	Pass			
Seeding		Gravel	Pass			
		Seeding				
Ditches	Pass	Culverts	Pass			
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Ditches	Pass			

S/U/V: Satisfactory Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Pit Type: _____ Lined: _____ Pit ID: _____ Lat: _____ Long: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment: liner has been removed

Fencing:

Fencing Type: None Fencing Condition: _____

Comment: fence has been taken down

Netting:

Netting Type: _____ Netting Condition: _____

Comment: Netting has been taken down

Anchor Trench Present: _____ Oil Accumulation: NO 2+ feet Freeboard: _____

Pit (S/U/V): Satisfactory Comment: Pit in process of closure

Corrective Action: _____ Date: _____