

**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:

12/13/2013

Document Number:

600000417

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

|                     |             |        |                  |                          |             |
|---------------------|-------------|--------|------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name:  | On-Site Inspection       | 2A Doc Num: |
|                     | 203716      | 320419 | JOHNSON, RANDELL | <input type="checkbox"/> |             |

**Operator Information:**

OGCC Operator Number:

Name of Operator: PDC ENERGY INCAddress: 1775 SHERMAN STREET - STE 3000City: DENVER State: CO Zip: 80203

- ☐ 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  |
|-----------------|-----------------------------------|-------------------------|----------|
| Bruns, Brandon  | O:303-831-3971,<br>C:720-281-7255 | brandon.bruns@pdce.com  |          |
| Heneghan, Adell | O:303-831-3973,<br>C:970-420-3274 | adell.heneghan@pdce.com | VP - EHS |
| Green, Daniel   | 970-371-8794                      | daniel.green@pdce.com   |          |

**Compliance Summary:**QtrQtr: SWNW Sec: 17 Twp: 1S Range: 67W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Unsatisfactory | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|------------------------------|----------|----------------|-----------------|
| 05/01/2008 | 200198180 | PR         | PR          | Satisfactory                 |          |                | No              |
| 06/26/2002 | 200028157 | PR         | PR          | Unsatisfactory               |          | Fail           | Yes             |
| 07/24/1997 | 500133709 | PR         | PR          |                              |          | Fail           | Yes             |
| 11/16/1995 | 500133708 | PR         | PR          |                              |          | Pass           | No              |
| 06/05/1995 | 500133706 | PR         | PR          |                              |          | Pass           | No              |
| 12/21/1994 | 500133707 | DG         | WO          |                              |          | Fail           | No              |
| 12/01/1994 | 500133705 | DG         | DG          |                              |          | Pass           | No              |
| 10/19/1994 | 500133704 |            | ND          |                              |          | Pass           | No              |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name  | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|-------------------------------------|
| 203716      | WELL | PR     | 09/13/2013  | OG         | 001-09276 | MCELWAIN 12-17 | SI          | <input checked="" type="checkbox"/> |

**Equipment:****Location Inventory**

Inspector Name: JOHNSON, RANDELL

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| 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

|                      |                             |         |                   |         |
|----------------------|-----------------------------|---------|-------------------|---------|
| <b>Signs/Marker:</b> |                             |         |                   |         |
| Type                 | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| WELLHEAD             | Satisfactory                |         |                   |         |

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

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

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

|                           |                             |  |                         |            |
|---------------------------|-----------------------------|--|-------------------------|------------|
| <b>Good Housekeeping:</b> |                             |  |                         |            |
| Type                      | Satisfactory/Unsatisfactory | Comment  | Corrective Action       | CA Date    |
| UNUSED EQUIPMENT          | Unsatisfactory              | Wooden posts laying on the ground next to wellhead | Remove unused equipment | 01/13/2014 |

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

|                   |   |                             |         |                   |         |
|-------------------|---|-----------------------------|---------|-------------------|---------|
| <b>Equipment:</b> |   |                             |         |                   |         |
| Type              | # | Satisfactory/Unsatisfactory | Comment | Corrective Action | CA Date |
| Plunger Lift      | 1 | Satisfactory                |         |                   |         |

|   |              |  |                     |                       |  |
|---|--------------|--|---------------------|-----------------------|--|
| <b>Facilities:</b> <input type="checkbox"/> New Tank Tank ID: _____ |              |  |                     |                       |  |
| Contents  | #            | Capacity   | Type                | SE GPS                |  |
|   |              |  | CENTRALIZED BATTERY | 39.969710,-104.921550 |  |
| S/U/V:  | Satisfactory | Comment: See related inspection document #600000416 for information concerning shared facilities and equipment |                     |                       |  |
| 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     |
| Earth             | Adequate | Walls Sufficient    | Base Sufficient     | Adequate        |
| Corrective Action |          |                     |                     | Corrective Date |
| Comment           |          |                     |                     |                 |

|                 |         |  |
|-----------------|---------|--|
| <b>Venting:</b> |         |  |
| Yes/No          | Comment |  |
| NO              |         |  |

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

**Predrill**

Location ID: 203716

**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: 203716 Type: WELL API Number: 001-09276 Status: PR Insp. Status: SI

**Idle Well**

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: \_\_\_\_\_  
 S/V: \_\_\_\_\_ CA Date: \_\_\_\_\_  
 CA: \_\_\_\_\_  
 Comment: **Producing intermittently**

**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): \_\_\_\_\_

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? Fail CM **Wooden posts laying on the ground next to wellhead**  
 CA **Remove unused equipment** CA Date \_\_\_\_\_  
 Pit, cellars, rat holes and other bores closed? Pass CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Guy line anchors removed? Pass CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_  
 Guy line anchors marked? \_\_\_\_\_ CM \_\_\_\_\_  
 CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? Pass

Production areas stabilized ? Pass

Inspector Name: JOHNSON, RANDELL

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? Pass

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 Pass

#### **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 \_\_\_\_\_ Well Release on Active Location ☐ Multi-Well Location ☐

#### **Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

S/U/V: Satisfactory Corrective Date: \_\_\_\_\_

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

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

**Pits:** ☒ NO SURFACE INDICATION OF PIT