

FORM INSP <small>Rev 05/11</small>	State of Colorado				DE	ET	OE	ES	
	Oil and Gas Conservation Commission				Inspection Date: <u>01/10/2014</u>				
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109				Document Number: <u>670201131</u>					

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	<u>267007</u>	<u>334962</u>	<u>BURGER, CRAIG</u>	2A Doc Num:	

Overall Inspection:
Satisfactory

Operator Information:

OGCC Operator Number:			
Name of Operator: <u>BARRETT CORPORATION* BILL</u>			
Address: <u>1099 18TH ST STE 2300</u>			
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>	

- 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
AHLSTRAND, DENNIS		dennis.ahlstrand@state.co.us	
Axelson, Aaron	(970) 876-1959	aaxelson@billbarrettcorp.com	Production Foreman
Ghan, Scott	(970) 876-1959	sghan@billbarrettcorp.com	Environmental Health & Safety Coordinator
Kellerby, Shaun		Shaun.Kellerby@state.co.us	NW Field Supervisor
Merry, Jesse	(970) 876-1959	jmerry@billbarrettcorp.com	Production Foreman

Compliance Summary:

QtrQtr: <u>SWNW</u>	Sec: <u>36</u>	Twp: <u>6S</u>	Range: <u>92W</u>
---------------------	----------------	----------------	-------------------

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/11/2013	670200339	PR	PR	Satisfactory			No
03/21/2008	200129155	PR	PR	Satisfactory			No
04/18/2007	200109863	PR	PR	Satisfactory	I	Pass	No
11/21/2006	200103602	CO	PR	Satisfactory	I	Pass	No
08/03/2006	200100329	PR	PR	Satisfactory	I	Pass	No
07/13/2006	200099025	CO	PR	Satisfactory	I	Pass	No
07/08/2006	200099006	CO	PR	Satisfactory	I	Pass	No
06/12/2006	200096996	CO	PR	Satisfactory	I	Pass	No
09/22/2005	200081842	CO	PR	Unsatisfactory		Pass	No

Inspector Comment:

Added 11 wells to this location that the COGCC database shows as individual locations. They are producing wells API#s 045-18680 through 045-18690.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
267006	WELL	PR	03/01/2011	GW	045-09192	MILLER 5-36	PR	<input checked="" type="checkbox"/>
267007	WELL	PR	10/01/2010	GW	045-09191	MILLER 4-36	PR	<input checked="" type="checkbox"/>

412889	WELL	PR		GW	045-18680	MILLER 23D-36-692	PR	✗
412890	WELL	PR		GW	045-18681	MILLER 22A-36-692	PR	✗
412891	WELL	PR		GW	045-18682	MILLER 23C-36-692	PR	✗
412892	WELL	PR		GW	045-18683	MILLER 13D-36-692	PR	✗
412893	WELL	PR		GW	045-18684	MILLER 13C-36-692	PR	✗
412894	WELL	PR		GW	045-18685	MILLER 12D-36-692	PR	✗
412895	WELL	PR		GW	045-18686	MILLER 12C-36-692	PR	✗
412896	WELL	PR		GW	045-18687	MILLER 11A-36-692	PR	✗
412897	WELL	PR		GW	045-18688	MILLER 11B-36-692	PR	✗
412898	WELL	PR		GW	045-18689	MILLER 11D-36-692	PR	✗
412899	WELL	PR		GW	045-18690	MILLER 12A-36-692	PR	✗

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: _____ Piggig Station: _____ Flare: _____ Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WELLHEAD	Satisfactory			
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

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

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
STORAGE OF SUPL	Satisfactory	Fence posts and a coil of 1/2" dia tubing on location.		

Spills:

Type	Area	Volume	Corrective action	CA Date

Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
SEPARATOR	Satisfactory	Cattle panel.		
WELLHEAD	Satisfactory	Cattle panel		
OTHER	Satisfactory	cattle panel around lined landfarm area		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Horizontal Heated Separator	13	Satisfactory	Earth berm provided. A couple gallons of parafin was present next to units. Pumper arrived on location and cleaned up.		
Bird Protectors	12	Satisfactory			
Plunger Lift	13	Satisfactory			
Emission Control Device	1	Satisfactory	Pilot light off. Pumper arrived and relit unit.		
Ancillary equipment	2	Satisfactory	descaler units		
Gas Meter Run	3	Satisfactory			
Gathering Line	1	Satisfactory			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	OTHER	HEATED STEEL AST	39.485700,-107.621890
S/U/V:	Satisfactory	Comment:		
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
-----------	----------

Other (Content) _____

Other (Capacity) 625 bbl _____

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: 267007

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: 267006 Type: WELL API Number: 045-09192 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 267007 Type: WELL API Number: 045-09191 Status: PR Insp. Status: PR

Producing Well

Comment: plunger lift

Facility ID: 412889	Type: WELL	API Number: 045-18680	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412890	Type: WELL	API Number: 045-18681	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412891	Type: WELL	API Number: 045-18682	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412892	Type: WELL	API Number: 045-18683	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412893	Type: WELL	API Number: 045-18684	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412894	Type: WELL	API Number: 045-18685	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412895	Type: WELL	API Number: 045-18686	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412896	Type: WELL	API Number: 045-18687	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412897	Type: WELL	API Number: 045-18688	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412898	Type: WELL	API Number: 045-18689	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
Facility ID: 412899	Type: WELL	API Number: 045-18690	Status: PR	Insp. Status: PR
Producing Well				
Comment: plunger lift				
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: _____

Waste Management:

Type	Management	Condition	Comment	GPS (Lat)	(Long)
Frac Sand	Landfarm	Adequate		39.485100	-107.623230

Emission Control Burner (ECB): Y
 Comment: **Pilot appeared to be off. Snow build up in unit. Pumper arrived and relit.**
 Pilot: OFF Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____
 Land Use: _____
 Comment: **Snow cover limited inspection.**
 1003a. Debris removed? Pass CM _____ CA _____ CA Date _____
 Waste Material Onsite? In CM **landfarm on location** CA _____ CA Date _____
 Unused or unneeded equipment onsite? Pass CM _____ CA _____ CA Date _____
 Pit, cellars, rat holes and other bores closed? _____ CM _____ CA _____ CA Date _____
 Guy line anchors removed? _____ CM _____ CA _____ CA Date _____
 Guy line anchors marked? _____ CM _____ CA _____ CA Date _____
 1003b. Area no longer in use? _____ Production areas stabilized ? Pass
 1003c. Compacted areas have been cross ripped? _____
 1003d. Drilling pit closed? Pass 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? _____
 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? _____

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 _____ 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: _____ Corrective Date: _____

Comment: Snow cover prevented inspection.

CA: _____

Pits: NO SURFACE INDICATION OF PIT