

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:
02/13/2014

Document Number:
671100051

Overall Inspection:
Unsatisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	240351	317999	MONTOYA, JOHN	2A Doc Num:	

Operator Information:

OGCC Operator Number: _____

Name of Operator: TOP OPERATING COMPANY

Address: 10881 ASBURY AVE STE 230

City: LAKEWOOD State: CO Zip: 80227

- 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
Herring, Paul	303-727-9915	paul.herring@topoperating.com	

Compliance Summary:

QtrQtr: NENE Sec: 25 Twp: 2N Range: 67W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/04/2013	668001660	SI	FR	Unsatisfactory	P		No
12/10/2009	200233542	PR	PR	Unsatisfactory			No
12/01/2009	200233268	PR	SI	Unsatisfactory			Yes
10/24/2003	200045648	PR	PR	Unsatisfactory		Fail	Yes
02/12/2003	200035038	PR	PR	Satisfactory		Pass	No
12/15/1999	200002012	PR	PR	Unsatisfactory			Yes
12/15/1999	200002067	PR	PR	Satisfactory		Pass	No
08/06/1997	500162280	PR	PR				
06/27/1996	500162279	PR	SI				

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
103387	PIT		09/23/1999		-	SCHNEIDER 1 & 4	<input type="checkbox"/>
240351	WELL	SI	08/16/2012	OW	123-08139	SCHNEIDER 1	SI <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 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	Unsatisfactory	ROAD IS NOT MAINTAINED TO WELL	ROAD NEEDS TO BE REPAIRED	03/13/2014

Signs/Marker:

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

Emergency Contact Number: (S/U/V) Unsatisfactory Corrective Date: 03/13/2014

Comment: **EMERGENCY CONTACY NUMBER AT AT WELLHEAD IS INCORRECT**

Corrective Action: **NEED CORRECT EMERGENCY NUMBER ON SIGNAGE**

Good Housekeeping:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WEEDS	Unsatisfactory	WEEDS AROUND TANK BATTERY AND METER RUNS	CUT WEEDS AT LOCATION	03/13/2014

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	Unsatisfactory	FENCING DOWN AT WELLHEAD	REPAIR FENCE	03/13/2014

Equipment:

Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Bird Protectors	1	Satisfactory			
Vertical Heated Separator	1	Unsatisfactory	TREATER IS NOT IN SERVICE	TREATER NEEDS ALL LINES HOOKED UP	03/13/2014
Vertical Separator	1	Satisfactory			
Gas Meter Run	2	Satisfactory			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	2	300 BBLS	STEEL AST	40.069620,-104.499470	
S/U/V:	Unsatisfactory		Comment: STENCIL CAPACITY ON TANKS		
Corrective Action:	NEEDS CAPACITY ON PROD TANKS			Corrective Date:	03/13/2014
Paint					
Condition	Adequate				
Other (Content)	_____				
Other (Capacity)	_____				
Other (Type)	_____				
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action	_____			Corrective Date	_____
Comment	_____				
Venting:					
Yes/No	Comment				_____
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 240351

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: 240351 Type: WELL API Number: 123-08139 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/V: _____ CA Date: _____

CA: **I NEED TO KNOW WHAT YOU ARE GOING TO DO ABOUT THIS WELL AND LOCATION**

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): _____

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? _____ CM _____
- CA _____ CA Date _____
- Waste Material Onsite? _____ CM _____
- CA _____ CA Date _____
- Unused or unneeded equipment onsite? _____ 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 ? _____

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? _____

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

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: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
I NEED TO KNOW WHAT YOU PLAN TO DO WITH THIS BATTERY AND LOCATION	montoyaj	02/13/2014