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

FIELD INSPECTION FORM

DE	ET	OE	ES

Inspection Date: 03/20/2014

Document Number: 673701797

Overall Inspection: **Unsatisfactory**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection ☐
	209243	322143	Sherman, Susan	2A Doc Num:

Operator Information:

OGCC Operator Number:

Name of Operator: OVERLAND RESOURCES LLC

Address: 5600 S QUEBEC ST #110-A

City: GREENWOOD State: CO Zip: 80111

☐ 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
Anderson, Robert	(303) 800-6175	admin@overlandresourcesllc.com	

Compliance Summary:

QtrQtr: NWSW Sec: 18 Twp: 6S Range: 62W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/10/2012	664000570			Unsatisfactory			No
01/06/2012	656500005	PR	PR	Satisfactory	P		No
12/02/2010	200285850	PR	SI	Unsatisfactory			Yes
07/28/2010	200264813	PR	PR	Unsatisfactory			Yes
02/18/2010	200231894	PR	PR	Unsatisfactory			Yes
03/12/2008	200127921	PR	PR	Satisfactory			No
11/30/2007	200122867	PR	PR	Unsatisfactory			Yes
09/10/2007	200118719	PR	PR	Unsatisfactory			Yes
08/13/2004	1470032	ES	AO	Satisfactory			No
05/27/1999	500141254	PR	PR			Fail	Yes

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
111239	PIT	CL	09/23/1999		-	CLARK 13-18	CL	☐
111240	PIT	CL	09/23/1999		-	CLARK 13-18	CL	☐
209243	WELL	PR	01/31/2010	OW	039-06147	CLARK 13-18	PR	☒

Equipment: Location Inventory

Inspector Name: Sherman, Susan

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

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
TANK LABELS/PLACARDS	Unsatisfactory	One tank and treater not labeled (see attached photo).	Install sign to comply with rule 210.	**05/01/2014**
WELLHEAD	Satisfactory			

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

Comment:

Corrective Action:

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	WELLHEAD	<= 5 bbls	Remove and remediate stained soil at wellhead (see attached photo). Also on 5/10/12 inspection.	04/18/2014
Lube Oil	Pump Jack	<= 5 bbls	Remove and remediate stained soil at pump jack engine (see attached photo). Also on 5/10/12 inspection.	04/18/2014

☐ Multilple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK BATTERY	Satisfactory	barbed wire		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Pump Jack	1	Satisfactory			
Gas Meter Run	1	Satisfactory	solar telemetry		
Bird Protectors	2	Satisfactory	Treater and unlabeled tank.		
Prime Mover	1	Satisfactory	gas		
Veritcal Heater Treater	1	Unsatisfactory	Needs painting per 5/10/12 inspection.berms 39.52404, -104.38486	Paint.	05/01/2014
Deadman # & Marked	4	Satisfactory			

Inspector Name: Sherman, Susan

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
OTHER	1	OTHER	FIBERGLASS AST	,

S/U/V:		Comment:	Same berms as crude oil tanks.Netting on top of tank, plastic liner under tank.
Corrective Action:		Corrective Date:	

Paint

Condition	

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
Comment			

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	2	300 BBLS	STEEL AST	39.524150,-104.384890

S/U/V:	Unsatisfactory	Comment:	
Corrective Action:		Corrective Date:	

Paint

Condition	Inadequate

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Corrective Action		Corrective Date	
Comment			

Venting:	
Yes/No	Comment

Flaring:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Inspector Name: Sherman, Susan

Predrill

Location ID: 209243

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: 209243 Type: WELL API Number: 039-06147 Status: PR Insp. Status: PR

Producing Well

Comment: PR
Dec 2013 last production records. Submit production records to COGCC.

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Inspector Name: Sherman, Susan

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: Winter wheat

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? _____ CM _____

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? Pass CM _____

CA _____ CA Date _____

1003b. Area no longer in use? Pass 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? Pass

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established Pass

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

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
Gravel	Pass	Gravel	Pass	SR	Pass	
Compaction	Pass	Compaction	Pass	MHSP	Pass	

S/U/V: _____ Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (https://cogcc.state.co.us/weblink/) and search by document number:

Document Num	Description	URL
673701908	Overland Clark 13-18 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305485
673701909	Overland Clark 13-18 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305486
673701910	Overland Clark 13-18 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305487
673701911	Overland Clark 13-18 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305488
673701912	Overland Clark 13-18 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305489
673701913	Overland Clark 13-18 Bat	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305490
673701914	Overland Clark 13-18 well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3305491