

Inspector Name: QUINT, CRAIG

**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:

04/22/2014

Document Number:

668602531

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	292827		QUINT, CRAIG	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10237

Name of Operator: JONES ENERGY LTD

Address: 807 LAS CIMAS PKWY #350

City: AUSTIN State: TX Zip: 78746

- ☐ 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
RAMOS, MARTHA		martha.ramos@state.co.us	
ROBERTS, DEBORAH	(512) 672-7173	droberts@jonesenergy.com	
BRYSON, STEVE	(512) 328-2953	sbryson@jonesenergy.com	
Arthur, Denise		denise.arthur@state.co.us	

Compliance Summary:

QtrQtr: Sec: Twp: Range:

Inspector Comment:

WITHIN 10 DAYS OF RECEIPT OF THIS INSPECTION SUBMIT A RECLAMATION PLAN TO COGCC.REMOVE EQUIPMENT AND DEBRIS, RECLAIM LOCATION.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
292827	GAS COMPRESSOR	AL	11/05/2010		-	BACA COMPRESSOR	AL	<input checked="" type="checkbox"/>

Equipment:Location Inventory**Location**

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
OTHER	ACTION REQUIRED	NO CURRENT OPERATOR SIGNS.	Install sign to comply with rule 210.	06/22/2014

Emergency Contact Number (S/A/V):

Corrective Date:

Comment:

Corrective Action:

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
DEBRIS	ACTION REQUIRED	PARTS AND DEBRIS OVER WHOLE LOCATION.	REMOVE AND RECLAIM	06/22/2014

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

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
LOCATION	ACTION REQUIRED	LOCATION IS FENCED WITH WIRE THAT IS NOT INTACT.	REMOVE AND RECLAIM	06/22/2014

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Pig Station	2	SATISFACTORY	NOT IN USE		
Gathering Line	1	SATISFACTORY	NOT IN USE		
Vertical Separator	1	ACTION REQUIRED	NOT IN OPERATING CONDITION	REMOVE AND RECLAIM	06/22/2014
Ancillary equipment	4	ACTION REQUIRED	ELEC PANELS, DAMAGED COMPRESSOR SHED, DAMAGED STORAGE SHED, CEMENT PADS	REMOVE AND RECLAIM	06/22/2014
Gas Meter Run	1	ACTION REQUIRED	NOT IN USE, DISCONNECTED	REMOVE AND RECLAIM	06/22/2014

Facilities:				
<input type="checkbox"/> New Tank		Tank ID: _____		
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	100 BBLS	STEEL AST	37.192080,-102.131170
S/A/V:	ACTION REQUIRED	Comment: TANK HAS HOLES AND DAMAGE, NO BERMS		
Corrective Action:	REMOVE AND RECLAIM			Corrective Date: 06/22/2014

Paint	
Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Corrective Action				Corrective Date
Comment				

Inspector Name: QUINT, CRAIG

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	300 BBLS	STEEL AST	37.192540,-102.131160	
S/AV:	ACTION REQUIRED		Comment: TANK IS EMPTY WITH HOLES IN THE BOTTOM.		
Corrective Action: REMOVE AND RECLAIM				Corrective Date: 06/22/2014	
Paint					
Condition					
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Corrective Action				Corrective Date	
Comment		INADEQUATE BERMS			
Venting:					
Yes/No		Comment			
Flaring:					
Type	Satisfactory/Action Required		Comment	Corrective Action	CA Date

Predrill

Location ID: 292827

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/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: 292827 Type: GAS API Number: - Status: AL Insp. Status: AL

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 : _____
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 REVEGETATIONCropland

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 _____ Fail _____

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 **Fail**

No disturbance /Location never built _____

Access Roads Regraded _____

Contoured **Fail**

Culverts removed _____

Gravel removed **Fail**Location and associated production facilities reclaimed **Fail**Locations, facilities, roads, recontoured **Fail**Compaction alleviation **Fail**Dust and erosion control **Fail**

Non cropland: Revegetated 80% _____

Cropland: perennial forage _____

Weeds present **Fail**

Subsidence _____

Comment: **SE CORNER OF LOCATION (37.19169, -102.13031). LOCATION HAS SEVERAL PIECES OF EQUIPMENT, CEMENT PADS, PIPELINE RISERS AND TANKS STILL IN PLACE.**

Corrective Action: **SEE COMMENTS ON FIRST AND LAST PAGE.**Date **06/22/2014**Overall Final Reclamation **Fail**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/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
WITHIN 10 DAYS OF RECEIPT OF THIS INSPECTION SUBMIT A RECLAMATION PLAN TO COGCC. REMOVE EQUIPMENT AND DEBRIS, RECLAIM LOCATION.	quintc	04/23/2014

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

Document Num	Description	URL
668602532	DAMAGED COMPRESSOR SHED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329241
668602533	DAMAGED STORAGE SHED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329242
668602534	METER RUN	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329243
668602535	SEPERATOR	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329244
668602536	PIG STATION	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329245
668602537	CONDENSATE TANK	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329246
668602538	ENTRANCE	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3329247