

**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:

05/21/2014

Document Number:

674900013

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	214125	325149	Hughes, Jim	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 29200Name of Operator: FAULCONER INC* VERNON EAddress: P O BOX 7995City: TYLER State: TX Zip: 75711☐ 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
Pshigoda, Jeff		jpshigoda@vefinc.com	SW Insp Reports
LABOWSKIE, STEVE		steve.labowskie@state.co.us	
FISCHER, ALEX		alex.fischer@state.co.us	
Maclaren, Joe		joe.maclaren@state.co.us	
Sloan, Buddy		rsloan@vefinc.com	SW Insp Reports
Malone, Leslie	(903) 581-4382	lmalon@vefinc.com	All Inspections

Compliance Summary:QtrQtr: SENW Sec: 17 Twp: 33N Range: 9W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
05/29/2013	667700031	PR	PR	ACTION REQUIRED			No
06/11/2010	200299567	CO	PR	SATISFACTOR Y			No
07/10/2009	200214377	CO	PR	ACTION REQUIRED			Yes
11/02/2008	200198601	CO	PR	SATISFACTOR Y			No
05/21/2008	200190370	PR	PR	ACTION REQUIRED			Yes
04/29/2008	200190307	CO	PR	ACTION REQUIRED			Yes
04/19/2007	200109381	CO	PR	ACTION REQUIRED		Fail	Yes
11/21/2006	200109150	CO	PR	ACTION REQUIRED		Fail	Yes
09/12/2006	200096109	CO	PR	ACTION REQUIRED		Fail	Yes
07/18/2005	200074257	CO	WO	ACTION REQUIRED		Fail	Yes
06/28/2005	200073137	PR	PR	SATISFACTOR Y		Pass	No

Inspector Name: Hughes, Jim

06/21/2005	200073086	PR	PR	ACTION REQUIRED		Fail	Yes
06/20/2005	200113784	CO	PR	SATISFACTOR Y		Pass	No
05/31/2005	200074260	PR	PR	SATISFACTOR Y		Pass	No
05/30/2005	200072037	CO	PR	ACTION REQUIRED		Fail	Yes
03/31/2005	200074255	PR	PR	ACTION REQUIRED		Fail	Yes
04/17/2003	200038021	PR	PR	SATISFACTOR Y		Pass	No
11/02/2000	200011790	ES	PR	SATISFACTOR Y		Pass	No
09/29/2000	200010406	PR	PR	ACTION REQUIRED		Fail	Yes
06/21/1999	500146805	PR	PR			Pass	No
01/23/1998	500146804	CO					
12/19/1997	500146803	CO	PR			Pass	No
09/30/1997	500146802						
05/09/1996	500146801	BH	SI				No
10/25/1994	500146800	PR	PR			Pass	No

Inspector Comment:

On May 21, 2014 COGCC SW EPS Jim Hughes met with Faulconer representative Dan Candelaria at the Faulconer Sunical #1 to inspect and discuss a potentially leaky partially buried storage tank.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
105523	PIT		09/23/1999		-	SUNICAL GOVERNMENT 1		<input type="checkbox"/>
214125	WELL	PR	10/28/1963	GW	067-05436	SUNICAL 1	PR	<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/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	ACTION REQUIRED		Install sign to comply with rule 210.	06/06/2014
WELLHEAD	ACTION REQUIRED		Install sign to comply with rule 210.	06/06/2014
CONTAINERS	ACTION REQUIRED		Install sign to comply with rule 210.	06/06/2014

Emergency Contact Number (S/A/V): ACTION Corrective Date: 06/06/2014

Comment: 318-332-1726 when dialed, gets a "sorry this person has not set up a voice mail box". Not appropriate for emergencies.

Corrective Action: Provide a working emergency contact number on wellhead signage per rule 210.

Spills:				
Type	Area	Volume	Corrective action	CA Date
PW/CN	Tank	<= 5 bbls	Historical release associated with the PBT. Perform tank integrity test and collect samples for analysis to determine extent of release.	06/23/2014

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Compressor	1	ACTION REQUIRED	Vent pipe for compressor does not have bird screening.	Install bird screen on vent pipe.	06/06/2014
Gas Meter Run	1	SATISFACTORY			
Horizontal Heated Separator	1	SATISFACTORY			

Venting:		
Yes/No	Comment	

Flaring:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Inspector Name: Hughes, Jim

Predrill

Location ID: 214125

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: 214125 Type: WELL API Number: 067-05436 Status: PR Insp. Status: PR

Producing Well

Comment: _____

Environmental

Spills/Releases:

Type of Spill: FLUID Description: Release from tank Estimated Spill Volume: _____

Comment: Remove tank from service if integrity has been compromised. Submit a Spill Report, Form 19, to COGCC environmental staff detailing historical release.

Corrective Action: Perform tank integrity test. **Date:** 06/23/2014

Inspector Name: Hughes, Jim

Reportable: _____	GPS: Lat _____	Long _____
Proximity to Surface Water: 600	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: _____

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?	_____	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 _____

Inspector Name: Hughes, Jim

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
				MHSP	Fail	chemical container without secondary containment.

S/A/V: **ACTION REQUIRED**

Corrective Date: **06/06/2014**

Comment: _____

CA: **Install spill prevention under unlabelled chemical container near wellhead.**

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
674900014	Wellhead sign and chemical container	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3349831
674900015	Contaminated soil underneath clean fill	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3349832
674900016	Potentially compromised PBT	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3349833