

**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:  
05/27/2014

Document Number:  
668602697

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                     |                          |             |
|---------------------|---------------|---------------|---------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:     | On-Site Inspection       | 2A Doc Num: |
|                     | <u>208225</u> | <u>321852</u> | <u>QUINT, CRAIG</u> | <input type="checkbox"/> |             |

**Operator Information:**

|                       |                                                   |
|-----------------------|---------------------------------------------------|
| OGCC Operator Number: | <u>72185</u>                                      |
| Name of Operator:     | <u>PRODUCTION MANAGEMENT INC</u>                  |
| Address:              | <u>5000 BUTTE ST #107</u>                         |
| City:                 | <u>BOULDER</u> State: <u>CO</u> Zip: <u>80301</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 |
|-----------------|--------------|---------------------------|---------|
| KOEHLER, BOB    |              | bob.koehler@state.co.us   |         |
| Whiting, Jim    | 719-688-0064 | jimwhiting_99@yahoo.com   |         |
| Warren, William | 303-449-0557 | williamwarren@hotmail.com |         |

**Compliance Summary:**

QtrQtr: SWNW Sec: 18 Twp: 16S Range: 45W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 04/28/2014 | 668602564 | IJ         | AC          | <b>ACTION REQUIRED</b>        | P        |                | No              |
| 06/07/2013 | 668600895 | IJ         | AC          | SATISFACTOR Y                 |          |                | No              |
| 10/22/2012 | 663901868 | IJ         | SI          | <b>VIOLATION</b>              |          |                | Yes             |
| 05/06/2011 | 200310045 | RT         | AC          | SATISFACTOR Y                 |          |                | No              |
| 04/19/2010 | 200243557 | RT         | AC          | SATISFACTOR Y                 |          |                | No              |
| 05/19/2009 | 200210937 | RT         | AC          | SATISFACTOR Y                 |          |                | No              |
| 03/27/2008 | 200129468 | MI         | AC          | SATISFACTOR Y                 |          |                | No              |
| 04/27/2007 | 200109740 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 07/20/2006 | 200094586 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 04/26/2006 | 200090214 | RT         | AC          | <b>ACTION REQUIRED</b>        |          | Fail           | Yes             |
| 07/29/2005 | 200074937 | RT         | AC          | <b>ACTION REQUIRED</b>        |          | Fail           | Yes             |
| 06/24/2004 | 200058254 | RT         | AC          | SATISFACTOR Y                 |          | Pass           | No              |
| 01/21/2003 | 200034529 | MI         | SI          | SATISFACTOR Y                 |          | Pass           | No              |

Inspector Name: QUINT, CRAIG

|            |           |    |    |  |   |      |     |
|------------|-----------|----|----|--|---|------|-----|
| 04/01/1999 | 500140217 | SR | PA |  | P | Pass | No  |
| 01/25/1999 | 500140216 | SR | PA |  | F | Fail | Yes |
| 07/13/1998 | 500140219 | CA | PA |  | F | Pass | No  |
| 06/11/1997 | 500140215 | ID | TA |  |   | Pass | No  |
| 01/17/1996 | 500140218 | ID | TA |  |   | Fail | Yes |
| 10/20/1994 | 500140214 |    | TA |  |   |      | Yes |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type         | Status | Status Date | Well Class | API Num   | Facility Name          | Insp Status |
|-------------|--------------|--------|-------------|------------|-----------|------------------------|-------------|
| 159088      | UIC DISPOSAL | AC     | 01/21/2003  |            | -         | COE TRUST 12B-18 SWD 2 | AC          |
| 208225      | WELL         | IJ     | 09/24/2011  | DSPW       | 017-07160 | COE TRUST 12B-18 2     | SI          |

**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**

**Signs/Marker:**

| Type     | Satisfactory/Action Required | Comment            | Corrective Action | CA Date |
|----------|------------------------------|--------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 | LEASE SIGN BY WELL |                   |         |

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Spills:**

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

**Venting:**

| Yes/No | Comment |
|--------|---------|
|        |         |

**Flaring:**

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|------------------------------|---------|-------------------|---------|
|      |                              |         |                   |         |

**Predrill**

Location ID: 208225

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/AV:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

**S/AV:** \_\_\_\_\_ **Comment:**

**CA:**  **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**S/AV:** \_\_\_\_\_ **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: 208225 Type: WELL API Number: 017-07160 Status: IJ Insp. Status: SI

**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

**UIC Routine**

Inj./Tube: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
(e.g. 30 psig or -30" Hg) Inj Zone: STLSP

TC: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ Last MIT: 06/07/2013

Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

Comment: \_\_\_\_\_

Method of Injection: GRAVITY FEED

Test Type: Verification of Repairs Tbg psi: 0 Csg psi: 0 BH psi: \_\_\_\_\_

Insp. Status: Pass

Comment: **REPLACED 5 JTS TBG, CRIMPED 3JTS, 51ST HAD PIN HOLE, 55TH BAD COLLAR. REPLACED AND SET PACKER @ 4200'. MIRU COMPRESSOR, PRESSURE CASING TO 318 PSIG, MONITORED FOR 30 MINUTES WITH NO PRESUURE LOSS, (PASS), RESUME INJECTING.**

**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

| <b>Storm Water:</b> |                 |                         |                       |               |                          |         |
|---------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Loc Erosion BMPs    | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
| Compaction          | Pass            | Other                   | Pass                  |               |                          |         |
| Berms               | Pass            | Compaction              | Pass                  |               |                          |         |
| Other               | Pass            |                         |                       |               |                          |         |

S/A/V: SATISFACTOR                      Corrective Date: \_\_\_\_\_  
Y \_\_\_\_\_

Comment: ACCESS AND LOCATION ARE FARMED OVER.

CA: \_\_\_\_\_

**Pits:**     NO SURFACE INDICATION OF PIT