

**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

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Inspection Date:

06/10/2014

Document Number:

663301029

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	223051	312964	ANDREWS, DAVID	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10273Name of Operator: HRM RESOURCES LLCAddress: 410 17TH STREET #1100City: DENVER State: CO Zip: 80202

- ☒ 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
PAPE, TERRY	303-893-6621	tpape@hrmres.com	Operations Engineer
ANDREWS, DAVID	970-625-2497 Ext. 1	david.andrews@state.co.us	COGCC engineering

Compliance Summary:QtrQtr: NWNW Sec: 23 Twp: 10N Range: 94W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/01/2014	669600112	PR	WK	ACTION REQUIRED			No
05/31/2014	669600109	PR	SI	ACTION REQUIRED			No
05/29/2014	674300027			ACTION REQUIRED			No
01/02/2014	673400180	PR	PR	ACTION REQUIRED			No
10/15/2012	669300199	PR	PR	ACTION REQUIRED			No
05/09/2011	200311674	PR	PR	ACTION REQUIRED			Yes
06/05/2000	200008037	PR	PR	SATISFACTOR Y		Pass	No

Inspector Comment:

Dave Andrews on location at 09:00 to witness tubing cut. Swabbco workover rig and Cutters Wireline Service on location. Well was dead after releasing SI pressure from first plug yesterday. Casing cut was not successful (tool malfunction). Waiting on new cutting tool, expected tomorrow. Dave Andrews left location at 13:00. Overall inspection status will remain Action Required until the well is plugged and abandoned.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
100090	PIT		09/23/1999		-	BIG HOLE UNIT 23-2	<input type="checkbox"/>
100091	PIT		09/23/1999		-	BIG HOLE UNIT 23-2	<input type="checkbox"/>
100092	PIT		09/23/1999		-	BIG HOLE UNIT 23-2	<input type="checkbox"/>

Inspector Name: ANDREWS, DAVID

100096	PIT		09/23/1999		-	BIG HOLE UNIT 23-2		<input type="checkbox"/>
223051	WELL	PR	03/18/1980	OW	081-06413	F L B UT/BIGHOLE DEEP 23-2	WK	<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

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

Corrective Date: _____

Comment: Signs and labels not addressed during this field inspection. Refer to Field Inspections on 1/2/2014 (#673400180) and 6/3/2014 (#673400623) for Actions Required and Deadlines.

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?

Venting:

Yes/No	Comment
NO	Well dead after setting first plug on 6/9/2014.

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 223051

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: 223051 Type: WELL API Number: 081-06413 Status: PR Insp. Status: WK

Workover

Comment: Plugging operations continue (no cementing today). Wet sample from yesterday set up OK for first plug. RIH on wireline with 2-1/4" gauge ring (GR) but held up shallow; POOH. RIH with 1-7/8" GR to 12003'. Did not tag TOC in tbg (concern with getting GR stuck), but made it past the 13-3/8" shoe. POOH. Tubing stretch indicates that we are free to at least 12000'. RIH with 1-7/8" casing cutter to 12000' and fired tool with 50K lbs tension on tbg. No indication of cut. POOH to check tool. Tried to work the pipe with the rig. No movement other than stretch. Tool malfunction, and no other 1-7/8" cutter available on location. RIH for second attempt with larger 2-1/4 GR. GR held up at 800' (pushed through) and 1000' (no-go). On standby, waiting to see if we can get another 1-7/8" cutter. Located new cutter in Farmington, NM. Plan to re-try casing cut and CBL tomorrow.

ACTION REQUIRED: complete plugging and abandonment of the well.

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

Inspector Name: ANDREWS, DAVID

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/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Inspector Name: ANDREWS, DAVID

Pit Type: Plugging Lined: YES Pit ID: Lat: Long:

Lining:

Liner Type: Liner Condition:

Comment:

Fencing:

Fencing Type: Fencing Condition:

Comment:

Netting:

Netting Type: Netting Condition:

Comment:

Anchor Trench Present: Oil Accumulation: 2+ feet Freeboard:

Pit (S/A/V): Comment:

Corrective Action: Date: