

**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
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Inspection Date:

06/20/2014

Document Number:

675200113

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____
	334708	334708	CONKLIN, CURTIS		

**Operator Information:**OGCC Operator Number: 10071Name of Operator: BARRETT CORPORATION\* BILLAddress: 1099 18TH ST STE 2300City: 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
Fallang, Tracey		tfallang@billbarrettcorp.com	
Kellerby, Shaun		shuan.kellerby@state.co.us	
Hirtler, Chrisinta	303-312-8597/ (303) 981-2562	chirtler@billbarrettcorp.com	All Inspections

**Compliance Summary:**QtrQtr: SESW Sec: 6 Twp: 7S Range: 91W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
290402	WELL	PR	10/07/2007	GW	045-14098	MILLER 14D-6-791	PR	<input checked="" type="checkbox"/>
290403	WELL	PR	10/09/2007	GW	045-14097	MILLER 14C-6-791	PR	<input checked="" type="checkbox"/>
290404	WELL	PR	04/02/2008	GW	045-14096	MILLER 14A-6-791	PR	<input checked="" type="checkbox"/>
290405	WELL	PR	10/16/2007	GW	045-14099	MILLER 14B-6-791	PR	<input checked="" type="checkbox"/>
296665	WELL	PR	01/28/2009	GW	045-16092	MILLER FEDERAL 23A-6-791	PR	<input checked="" type="checkbox"/>
296667	WELL	PR	12/27/2008	GW	045-16093	MILLER 34A-6-791	PR	<input checked="" type="checkbox"/>
296670	WELL	PR	12/30/2008	GW	045-16094	MILLER 34B-6-791	PR	<input checked="" type="checkbox"/>
296672	WELL	PR	01/08/2009	GW	045-16095	MILLER 34C-6-791	PR	<input checked="" type="checkbox"/>
296673	WELL	PR	01/06/2009	GW	045-16096	MILLER 34D-6-791	PR	<input checked="" type="checkbox"/>
296674	WELL	PR	12/28/2008	GW	045-16097	MILLER 24A-6-791	PR	<input checked="" type="checkbox"/>
296675	WELL	PR	01/25/2009	GW	045-16098	MILLER 24B-6-791	PR	<input checked="" type="checkbox"/>
296676	WELL	PR	01/27/2009	GW	045-16099	MILLER 24C-6-791	PR	<input checked="" type="checkbox"/>
296677	WELL	PR	01/31/2009	GW	045-16100	MILLER 24D-6-791	PR	<input checked="" type="checkbox"/>
374700	PIT	AC	04/06/2009		-	MILLER 14A-6-791	AC	<input type="checkbox"/>

**Equipment:****Location Inventory**

Inspector Name: CONKLIN, CURTIS

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: _____

<u>Location</u>
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<b><u>Lease Road:</u></b>				
Type	Satisfactory/Action Required	comment	Corrective Action	Date
Main	SATISFACTORY	Dust mitigation in process		
Access	SATISFACTORY			

<b><u>Signs/Marker:</u></b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	ACTION REQUIRED	Condensate tank on North side of wells does not have the volume listed.	Install sign to comply with rule 210.	06/27/2014

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: \_\_\_\_\_

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

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

<b><u>Good Housekeeping:</u></b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	SATISFACTORY	Panel in containment.		

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

<b><u>Fencing/:</u></b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Panels		
SEPARATOR	SATISFACTORY	Wire panels		
LOCATION	SATISFACTORY	Automatic gate		
PIT	SATISFACTORY	Panels		

<b><u>Equipment:</u></b>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Bird Protectors	13	SATISFACTORY			

Inspector Name: CONKLIN, CURTIS

Ancillary equipment	4	SATISFACTORY	Chem unit w/ containment		
Emission Control Device	1	SATISFACTORY	Pilot lit at time of inspection		
Gathering Line	1	SATISFACTORY			
Deadman # & Marked	14	SATISFACTORY			
Horizontal Heated Separator	13	SATISFACTORY	earth containment		
Pig Station	13	SATISFACTORY			

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	OTHER	STEEL AST	,

S/A/V:	SATISFACTORY	Comment:	
Corrective Action:		Corrective Date:	

Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) No capacity labled on tank

Other (Type) \_\_\_\_\_

Berms

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

Corrective Action		Corrective Date	
Comment			

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	500 BBLs	STEEL AST	,

S/A/V:	SATISFACTORY	Comment:	
Corrective Action:		Corrective Date:	

Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

Other (Type) \_\_\_\_\_

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
Comment	Same as other 500bbl tanks		

<b>Facilities:</b>		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	5	500 BBLS	HEATED STEEL AST	,	
S/A/V:	SATISFACTORY		Comment:		
Corrective Action:				Corrective Date:	
<b>Paint</b>					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
<b>Berms</b>					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment					
<b>Venting:</b>					
Yes/No		Comment			
YES		Ball valves open on Bradenheads			
<b>Flaring:</b>					
Type	Satisfactory/Action Required		Comment	Corrective Action	CA Date

**Predrill**

Location ID: 334708

**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: 290402 Type: WELL API Number: 045-14098 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Facility ID: 290403 Type: WELL API Number: 045-14097 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Facility ID: 290404 Type: WELL API Number: 045-14096 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Facility ID: 290405	Type: WELL	API Number: 045-14099	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296665	Type: WELL	API Number: 045-16092	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296667	Type: WELL	API Number: 045-16093	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296670	Type: WELL	API Number: 045-16094	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296672	Type: WELL	API Number: 045-16095	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296673	Type: WELL	API Number: 045-16096	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296674	Type: WELL	API Number: 045-16097	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296675	Type: WELL	API Number: 045-16098	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296676	Type: WELL	API Number: 045-16099	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
Facility ID: 296677	Type: WELL	API Number: 045-16100	Status: PR	Insp. Status: PR
<b><u>Producing Well</u></b>				
Comment: PR				
<b><u>Environmental</u></b>				
<b><u>Spills/Releases:</u></b>				
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 \_\_\_\_\_

Inspector Name: CONKLIN, CURTIS

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
Seeding	Pass					
Compaction	Pass	Ditches	Pass	VT	Pass	
Gravel	Pass	Rip Rap	Pass			
Retention Ponds	Pass					
Ditches	Pass	Gravel	Pass			
Berms	Pass	Compaction	Pass	MHSP	Pass	
Rip Rap	Pass					
Retention Ponds	Pass					
Drains	Pass	Seeding	Pass			

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

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

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

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

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



Inspector Name: CONKLIN, CURTIS

Pit Type: Workover Lined: \_\_\_\_\_ 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: \_\_\_\_\_

Permit:	Facility ID	Permit Num	Expiration Date
	374700	1433946	
	374700	1433946	

**COGCC Comments**

Comment	User	Date
Include capacity on all tanks. Remove or properly store unused equipment.	conklinc	06/20/2014