

**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:

07/23/2014

Document Number:

674101091

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	434059	434077	Rickard, Jeffrey	<input type="checkbox"/>	

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	All Inspections
Hirtler, Chrisinta		chirtler@billbarrettcorp.com	All Inspections
Zavadil, Duane		dzavadil@billbarrettcorp.com	All Inspections

Compliance Summary:QtrQtr: NWSW Sec: 3 Twp: 4N Range: 63W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
434059	WELL	DG	04/09/2014	LO	123-37921	70 Ranch 4-63-03-3225CH	PR	<input checked="" type="checkbox"/>
434067	WELL	DG	04/01/2014	LO	123-37925	70 Ranch 4-63-3-4956CH	PR	<input checked="" type="checkbox"/>
434078	WELL	DG	04/09/2014	LO	123-37930	70 Ranch 4-63-03-3340CH	PR	<input checked="" type="checkbox"/>
434079	WELL	DG	04/09/2014	LO	123-37931	70 Ranch 4-63-03-3225CDH	PR	<input checked="" type="checkbox"/>
434161	WELL	DG	04/01/2014	LO	123-37993	70 Ranch 4-63-3-4841CH	PR	<input checked="" type="checkbox"/>
434162	WELL	DG	04/01/2014	LO	123-37994	70 Ranch 4-63-3-4856CDH	PR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Inspector Name: Rickard, Jeffrey

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>6</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>2</u>	Separators: <u>7</u>	Electric Motors: <u>6</u>
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>6</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: <u>1</u>	VOC Combustor: <u>6</u>	Oil Tanks: <u>12</u>	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: <u>2</u>	Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Gas Meter Run	2	SATISFACTORY			
Compressor	1	SATISFACTORY			
Vertical Separator	6	SATISFACTORY			
Plunger Lift	6	SATISFACTORY			
Horizontal Heated Separator	6	SATISFACTORY			
VRU	1	SATISFACTORY			
Emission Control Device	8	SATISFACTORY			

Inspector Name: Rickard, Jeffrey

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	400 BBLS	STEEL AST	40.339680,-104.433120
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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	_____	Corrective Date	_____
Comment	_____		

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CRUDE OIL	12	400 BBLS	STEEL AST	40.339680,-104.433120
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
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	_____	Corrective Date	_____
Comment	_____		

Venting:	_____
Yes/No	Comment
NO	_____

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

Predrill	
Location ID: 434059	
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:**

BMP Type	Comment
Drilling/Completion Operations	<p>NOTIFICATIONS</p> <ul style="list-style-type: none">• Proper notifications required by COGCC regulations or policy memos will be adhered to <p>TRENCHES/PITS/TEMPORARY FRAC TANKS</p> <ul style="list-style-type: none">• Unlined pits will not be constructed on fill material.• Any free liquids accumulated in the containment would be removed and hauled to an approved waste disposal facility. Drill cuttings would either be hauled to an approved spread field or waste disposal facility or would be treated and disposed of onsite. Disposal methods would comply with COGCC regulations.• Flowback and stimulation fluids from the wells being completed will be sent to tanks and/or filters to allow the sand to settle out before the fluids are hauled to a state approved disposal facility.• Temporary frac tanks installed on location will have proper secondary containment according to SPCC regulations such as either putting a perimeter berm around location or around the frac tanks.

<p>Storm Water/Erosion Control</p>	<p>GENERAL</p> <ul style="list-style-type: none"> • Utilize diking and other forms of containment and diversions around tanks, drums, chemicals, liquids, pits, impoundments, or well pads • Use drip pans, sumps, or liners where appropriate • Limit the amount of land disturbed during construction of pad, access road, and facilities • Employ spill response plan (SPCC) for all facilities • Dispose properly offsite any wastes fluids and other materials <p>MATERIAL HANDLING, ACTIVITIES, PRACTICES AND STORM WATER DIVERSION</p> <ul style="list-style-type: none"> • Secondary containment of tanks, drums, and storage areas is mandatory to prohibit discharges to surface waters. A minimum of 110% capacity required of largest storage tank within a containment area • Material handling and spill prevention procedures and practices will be followed to help prohibit discharges to surface waters • Proper loading, and transportation procedures to be followed for all materials to and from locations <p>EROSION CONTROL</p> <ul style="list-style-type: none"> • Pad and access road to be designed to minimize erosion • Pad and access road to implement appropriate erosion control devices where necessary to minimize erosion • Routine inspections of sites and controls to be implemented with additions, repairs, and optimization to occur as necessary to minimize erosion <p>SELF INSPECTION, MAINTENANCE, AND HOUSEKEEPING</p> <ul style="list-style-type: none"> • All employees are trained in spill response, good housekeeping, material management practices, and procedures for equipment and container washing annually • Conduct internal storm water inspections per applicable stormwater regulations • Conduct routine informal inspections of all tanks and storage facilities at least weekly • All containment areas are to be inspected weekly or following a heavy rain event. • Any excessive precipitation accumulation within containment should be removed as appropriate and disposed of properly • All structural berms, dikes, and containment will be inspected periodically to ensure they are operating correctly <p>SPILL RESPONSE</p> <ul style="list-style-type: none"> • Spill response procedures as per the BBC field SPCC Plan <p>VEHICLE & LOCATION PROCEDURES</p> <ul style="list-style-type: none"> • Vehicles entering location are to be free of chemical, oil, mud, weeds, trash, and debris • Location to be treated to kill weeds and bladed when necessary
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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: _____

Inspector Name: Rickard, Jeffrey

Date Onsite Request Received: _____	Date of Rule 306 Consultation: _____
Request LGD Attendance: _____	
<u>LGD Contact Information:</u>	
Name: _____	Phone Number: _____
Agreed to Attend: _____	
<u>Summary of Landowner Issues:</u>	
<u>Summary of Operator Response to Landowner Issues:</u>	
<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>	

Facility

Facility ID: 434059	Type: WELL	API Number: 123-37921	Status: DG	Insp. Status: PR
<u>Producing Well</u>				
Comment: PR				
<u>BradenHead</u>				
Comment: ~200PSI on braden head.				
CA: _____				
CA Date: _____				
Facility ID: 434067	Type: WELL	API Number: 123-37925	Status: DG	Insp. Status: PR
<u>Producing Well</u>				
Comment: PR				
<u>BradenHead</u>				
Comment: No pressure on braden head.				
CA: _____				
CA Date: _____				
Facility ID: 434078	Type: WELL	API Number: 123-37930	Status: DG	Insp. Status: PR
<u>Producing Well</u>				
Comment: PR				
<u>BradenHead</u>				
Comment: No pressure on braden head.				
CA: _____				
CA Date: _____				
Facility ID: 434079	Type: WELL	API Number: 123-37931	Status: DG	Insp. Status: PR
<u>Producing Well</u>				
Comment: PR				
<u>BradenHead</u>				
Comment: No pressure on braden head.				
CA: _____				
CA Date: _____				
Facility ID: 434161	Type: WELL	API Number: 123-37993	Status: DG	Insp. Status: PR

Inspector Name: Rickard, Jeffrey

Producing Well

Comment: PR

BradenHead

Comment: No pressure on braden head.

CA:

CA Date:

Facility ID: 434162 Type: WELL API Number: 123-37994 Status: DG Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: No pressure on braden head.

CA:

CA Date:

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 : Lat Long

Field Parameters:

Sample Location:

Emission Control Burner (ECB): Y

Comment:

Pilot: ON Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use: RANGELAND

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-CroplandTop soil replaced Pass Recontoured Pass 80% Revegetation In

1003 f. Weeds Noxious weeds? _____ I _____

Comment: _____

Overall Interim Reclamation Pass**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: RANGELAND _____

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 ☐

Inspector Name: Rickard, Jeffrey

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass					
S/A/V: SATISFACTOR Y _____ Corrective Date: _____						
Comment: _____						
CA: _____						
Pits: <input type="checkbox"/> NO SURFACE INDICATION OF PIT						