

**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:

07/29/2014

Document Number:

674600684

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	216500	312052	Maclaren, Joe	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 19160Name of Operator: CONOCO PHILLIPS COMPANYAddress: P O BOX 2197City: HOUSTON State: TX Zip: 77252-

- ☐ 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
McDaniel, Heather		heather.d.mcdaniel@conocophillips.com	SW Insp Reports
Journey, Denise	(505) 326-9556	Denise.Journey@conocophillips.com	SW Insp Reports
Busse, Dollie		dollie.l.busse@conocophillips.com	SW Insp Reports

Compliance Summary:

QtrQtr:	NWSE	Sec:	36	Twp:	34N	Range:	10W
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/09/2011	200300499	PR	PR	SATISFACTOR Y			No
01/09/2010	200233154	PR	PR	SATISFACTOR Y			No
05/05/2006	200093096	PR	PR	SATISFACTOR Y		Pass	No
12/20/2004	200066215	PR	PR	SATISFACTOR Y		Pass	No
05/22/2002	200027809	PR	PR	SATISFACTOR Y		Pass	No
02/09/2001	200015156	PR	PR	SATISFACTOR Y		Pass	No
11/05/1999	200002871	PR	PR	SATISFACTOR Y		Pass	No
06/23/1998	500150720	PR	PR			Pass	No

Inspector Comment:

The overall inspection status is Action Required based on several issues noted in the housekeeping section of this report. Pictures Uploaded.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
216500	WELL	PR	01/01/2003	GW	067-08106	ANIMAS 34-10 36-1	PR

Inspector Name: Maclaren, Joe

297003	WELL	PR	02/01/2011	GW	067-09593	ANIMAS 34-10 36-1A	PR	<input checked="" type="checkbox"/>
297004	WELL	PR	02/01/2011	GW	067-09594	ANIMAS 34-10 36-2A	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 Motors: _____	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
TANK LABELS/PLACARDS	ACTION REQUIRED	Lube oil drum on Animas 36#1A requires NFPA label.	Install sign to comply with rule 210.	09/15/2014

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
OTHER	ACTION REQUIRED	Stained gravel (4' x 4' area) observed next to lube oil drum near pumping unit.	Properly remediate/ remove stained gravel/ soils.	09/15/2014
WEEDS	ACTION REQUIRED	Weeds in center of graveled well pad and sides of location in need of control.	Remove/ spray weeds as part of overall weed control program as soon as practical or by date shown.	09/15/2014
STORAGE OF SUPL		Un-used concrete foundation located near telemetry equipment on NE corner well pad.	Remove from location if no longer needed.	

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
OTHER	SATISFACTORY	Pipe barriers around all equipment.		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	1	SATISFACTORY	Telemetry Equipment		
Flow Line	3	SATISFACTORY			
Deadman # & Marked	9	ACTION REQUIRED	Located 9 marked rig anchors.	Locate and confirm all existing rig anchors are marked.	09/15/2014
Bird Protectors	1	SATISFACTORY			
Pig Station	1	SATISFACTORY	East end of location		
Gas Meter Run	3	SATISFACTORY			

Venting:		
Yes/No	Comment	
NO		

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

Predrill

Location ID: 216500

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: 216500 Type: WELL API Number: 067-08106 Status: PR Insp. Status: PR

Facility ID: 297003 Type: WELL API Number: 067-09593 Status: PR Insp. Status: PR

Facility ID: 297004 Type: WELL API Number: 067-09594 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Environmental**Spills/Releases:**

Inspector Name: Maclaren, Joe

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 _____
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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? Pass CM _____
CA _____ CA Date _____
Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
Guy line anchors marked? In CM _____
CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland

Inspector Name: Maclaren, Joe

Top soil replaced _____

Recontoured Pass

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____ P _____

Comment: _____

Overall Interim Reclamation Pass

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
Gravel	Pass	Gravel	Pass			
		Culverts	Pass			
Compaction	Pass	Compaction	Pass	MHSP	Pass	

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: _____

CA: _____

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
674600690	Weeds on graveled well pad	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3396916
674600691	Stained gravel near lube oil drum	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3396917