

**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:

08/04/2014

Document Number:

674600710

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	216577	311897	Maclaren, Joe	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 26625Name of Operator: ELM RIDGE EXPLORATION COMPANY LLCAddress: 12225 GREENVILLE AVE STE 950City: DALLAS State: TX Zip: 75243-

- ☐ 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
Archuleta, Amy		aarchuleta@elmridge.net	Administrative Manager
Lindeman, Terry	505-632-3476 Ext 210	tlindeman@elmridge.net	

Compliance Summary:QtrQtr: NWNE Sec: 7 Twp: 33N Range: 8W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/18/2010	200231653	PR	PR	SATISFACTORY Y			No
09/29/2009	200219058	PR	PD	SATISFACTORY Y			No
05/05/2009	200209796	PR	PR	ACTION REQUIRED			Yes
06/30/2005	200076865	PR	PR	SATISFACTORY Y		Pass	No
04/19/2005	200076301	BH	PR	ACTION REQUIRED		Fail	Yes
03/24/2003	200036537	CC	PR	SATISFACTORY Y		Pass	No
03/22/2003	200036533	CC	PR	SATISFACTORY Y		Pass	No
03/08/2003	200036532	CC	PR	SATISFACTORY Y		Pass	No
03/07/2003	200036531	CC	PR	SATISFACTORY Y		Pass	No
03/06/2003	200036530	CC	PR	SATISFACTORY Y		Pass	No
03/05/2003	200036529	CC	PR	SATISFACTORY Y		Pass	No
02/28/2003	200036528	CC	PR	SATISFACTORY Y		Pass	No
02/27/2003	200036527	CC	PR	SATISFACTORY Y		Pass	No

Inspector Name: Maclaren, Joe

08/22/2001	200020672	PR	PR	SATISFACTORY		Pass	No
07/16/2001	200019726	PR	PR	ACTION REQUIRED		Fail	Yes

Inspector Comment:

The production equipment/ tanks on this location have been recently painted.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
216577	WELL	PR	04/08/2011	GW	067-08183	FASSETT 1-A	PR	X
276638	WELL	PR	11/20/2005	GW	067-09025	IGW 104	PR	X
290037	WELL	PR	06/09/2009	GW	067-09347	IGW 120	PR	X

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): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

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
TANK BATTERY	SATISFACTORY	Post and Wire		

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	1	SATISFACTORY			
Ancillary equipment	4	SATISFACTORY	Gas Line Risers with Valves		
Other	1	SATISFACTORY	Flowing Wellhead (067-09025)		
Plunger Lift	2	SATISFACTORY			
Flow Line	3	SATISFACTORY			
Vertical Heated Separator	2	SATISFACTORY			

Inspector Name: Maclaren, Joe

Deadman # & Marked	2		Confirm all existing rig anchors are marked.		
Gas Meter Run	3	SATISFACTORY			
Bird Protectors	1		Confirm existence of bird protectors in separator vent stacks on Fassett #1A and IGW #104.		

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<50 BBLS	Open Top	37.122340,-107.754980

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

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action		Corrective Date	
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Comment	
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	400 BBLS	STEEL AST	37.122840,-107.754980

S/A/V:	SATISFACTORY	Comment:	Unarmored earthen berm around 400 bbl produced water tank is subject to stormwater erosion and reduction in capacity.
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action		Corrective Date	
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Comment	
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Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 216577

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: 216577 Type: WELL API Number: 067-08183 Status: PR Insp. Status: PR

Facility ID: 276638 Type: WELL API Number: 067-09025 Status: PR Insp. Status: PR

Facility ID: 290037 Type: WELL API Number: 067-09347 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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? 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? Pass

Inspector Name: Maclaren, Joe

Production areas have been stabilized? Pass

Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured Pass

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			
Waddles	Pass					
Compaction	Pass	Compaction	Pass			
		Culverts	Pass			

S/A/V: SATISFACTOR _____

Corrective Date: _____

Y _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT