

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:
667200233

Overall Inspection:

VIOLATION

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>219142</u>	<u>312157</u>	<u>SCHURE, KYM</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>10380</u>
Name of Operator:	<u>BENCHMARK ENERGY LLC</u>
Address:	<u>PO BOX 8747</u>
City:	<u>PRATT</u> State: <u>KS</u> Zip: <u>67124</u>

- 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
AXELSON, JOHN		john.axelson@state.co.us	
QUINT, CRAIG		craig.quint@state.co.us	
Ferrell, LaDawn	(620) 672-3800	lferrell@profsecservices.com	All Inspections
Nash, Jerry	(316) 218-8184	jerry@benchmarkenergy.us	All Inspections

Compliance Summary:

QtrQtr: NENW Sec: 12 Twp: 8N Range: 54W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/08/2013	664001189	TA	TA	SATISFACTOR Y			No
07/09/2012	663300289	TA	TA	ACTION REQUIRED	I		No
06/16/2011	200312780	MI	AC	SATISFACTOR Y			No
05/17/2010	200250541	RT	AC	SATISFACTOR Y			No
08/04/2009	200215918	RT	AC	SATISFACTOR Y			No
04/22/2008	200130653	RT	AC	SATISFACTOR Y			No
06/20/2007	200115803	RT	AC	SATISFACTOR Y		Pass	No
06/16/2006	200091651	MI	SI	SATISFACTOR Y		Pass	No
06/08/2006	200091663	MI	AC	SATISFACTOR Y		Fail	Yes
07/05/2005	200074140	RT	SI	SATISFACTOR Y		Pass	No
06/15/2004	200055909	RT		SATISFACTOR Y		Pass	No
04/02/2003	200037007	RT	SI	SATISFACTOR Y		Pass	No

Inspector Name: SCHURE, KYM

07/18/2002	200028845	RT	SI	SATISFACTOR Y	P	Pass	No
07/26/2001	200018310	MI	SI	SATISFACTOR Y		Pass	No
08/04/2000	200008427	RT	SI	SATISFACTOR Y		Pass	No

Inspector Comment:

Well requires UIC/ROUTINE Inspection, must be performed prior to August 8, 2014 with Operator personnel on-site for setting gauges and opening/closing valves due to condition of fittings/pipe. Within (5) days of receipt of this Inspection Report submit to COGCC a detailed written plan and schedule of completion to resolve all "Action Required" items listed on this Inspection Report for COGCC review and approval. "Alleged Violation" items are required attention immediately and corrective actions are set on date of inspection. Submit Sundry notice Form 4 to COGCC with as built well location as described in COGCC AS-BUILT Location Policy and Rule 215.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
219142	WELL	TA	04/26/2013	ERIW	075-05971	NW GRAYLIN D-SAND UNIT 5-W	TA	<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
WELLHEAD	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
Produced Water	WELLHEAD	> 5 bbls	Remove/remediate salt/vegetation kill from wellhead and adjacent field	07/23/2014

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Pipe fence		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Deadman # & Marked	2	ACTION REQUIRED	Remove old/unusable deadman	Remove old unused deadman from location	08/11/2014
Other	0	SATISFACTORY			
Deadman # & Marked	4	ACTION REQUIRED	Mark all deadman, (4)' highly visible.	Mark all deadman	08/11/2014

Venting:	
Yes/No	Comment

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

Predrill

Location ID: 219142

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: 219142 Type: WELL API Number: 075-05971 Status: TA Insp. Status: TA

Complaint

Comment: Surface Owner, Mr. Russell Adele contacted COGCC regarding concerns/complaint with Operator practices and damage to surface resulting from P/W spill/release.

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/A/V: VIOLATION CA Date: 07/23/2014

CA: See full report for details.

Comment: _____

Environmental

Spills/Releases:

Type of Spill: WATER Description: Vegetation kill Estimated Spill Volume: 5

Comment: [Redacted]

Corrective Action: Remove/remediate affected soils from P/W spill/release Date: 07/23/2014

Reportable: YES 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: [Redacted]

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: [Redacted]

- 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: SCHURE, KYM

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
Other						

S/A/V: SATISFACTOR _____ Corrective Date: _____
Y _____

Comment: **NO BMP's in use. NO surface erosion from stormwater runoff observed.**

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
667200274	Signage @ wellhead	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400967
667200278	P/W vegetation kill @wellhead	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400968
667200279	P/W vegetation kill pathway	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400969

667200280	P/W vegetation kill pathway	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400970
667200281	P/W vegetation kill pathway	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400971
667200282	Unused equipment - Unmarked deadman	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400972
667200284	Unused equipment	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3400973