

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:
08/06/2014

Document Number:
674101173

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>434250</u>	<u>434251</u>	<u>Rickard, Jeffrey</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10071

Name of Operator: BARRETT CORPORATION* BILL

Address: 1099 18TH ST STE 2300

City: 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
Hirtler, Christina		CHirtler@billbarrettcorp.com	All Inspections
Fallang, Tracey		tfallang@billbarrettcorp.com	All Inspections
Zavadil, Duane		dzavadil@billbarrettcorp.com	All Inspections

Compliance Summary:

QtrQtr: NWSW Sec: 35 Twp: 5N Range: 62W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
434250	WELL	DG	11/01/2013	OW	123-38055	Anschutz State 5-62-35-6457BH	PR	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>2</u>	Separators: <u>4</u>	Electric Motors: <u>4</u>
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: <u>4</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: <u>4</u>	Water Pipeline: _____
Gas Compressors: <u>1</u>	VOC Combustor: <u>2</u>	Oil Tanks: <u>8</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
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Inspector Name: Rickard, Jeffrey

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
Horizontal Heated Separator	1	SATISFACTORY			
Flare	1	SATISFACTORY			
Gas Meter Run	1	SATISFACTORY			
Pump Jack	1	SATISFACTORY			
Vertical Separator	1	SATISFACTORY			
Prime Mover	1	SATISFACTORY	Electric		
Emission Control Device	1	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	400 BBLS	STEEL AST	40.353790,-104.299060

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	3	400 BBLS	STEEL AST	40.353790,-104.299060
S/AV:	SATISFACTORY		Comment: _____	
Corrective Action:			Corrective Date:	
Paint				
Condition	Adequate			
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: 434250				
Site Preparation:				
Lease Road Adeq.:	_____	Pads:	_____	Soil Stockpile: _____
S/AV: _____				
Corrective Action:	_____	Date:	_____	CDP Num.: _____
Form 2A COAs:				
S/AV: _____	Comment: _____			
CA: _____	_____			Date: _____
Wildlife BMPs:				

BMP Type	Comment
Drilling/Completion Operations	<p data-bbox="360 130 568 157">NOTIFICATIONS</p> <ul data-bbox="360 163 1404 191" style="list-style-type: none"><li data-bbox="360 163 1404 191">• Proper notifications required by COGCC regulations or policy memos will be adhered to <p data-bbox="360 254 925 281">TRENCHES/PITS/TEMPORARY FRAC TANKS</p> <ul data-bbox="360 310 1502 632" style="list-style-type: none"><li data-bbox="360 310 966 338">• Unlined pits will not be constructed on fill material.<li data-bbox="360 344 1502 455">• 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.<li data-bbox="360 462 1445 548">• 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.<li data-bbox="360 554 1502 632">• 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.

Storm Water/Erosion Control

GENERAL

- 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

MATERIAL HANDLING, ACTIVITIES, PRACTICES AND STORM WATER DIVERSION

- 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

EROSION CONTROL

- 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

SELF INSPECTION, MAINTENANCE, AND HOUSEKEEPING

- 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

SPILL RESPONSE

- Spill response procedures as per the BBC field SPCC Plan

VEHICLE & LOCATION PROCEDURES

- 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

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: _____

Inspector Name: Rickard, Jeffrey

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: 434250 Type: WELL API Number: 123-38055 Status: DG Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: Braden head exposed at surface.

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? 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? Pass CM _____

CA _____ CA Date _____

Guy line anchors marked? _____ CM _____

CA _____ CA Date _____

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

1003c. Compacted areas have been cross ripped? In

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? In

Production areas have been stabilized? In Segregated soils have been replaced? In

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced In Recontoured In 80% Revegetation In

1003 f. Weeds Noxious weeds? I

Comment: _____

Overall Interim Reclamation In Process

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 _____

Inspector Name: Rickard, Jeffrey

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					

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT