

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



DE	ET	OE	ES
----	----	----	----

Inspection Date:
09/10/2014

Document Number:
673706147

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>437368</u>	<u>437367</u>	<u>Sherman, Susan</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>26580</u>
Name of Operator:	<u>BURLINGTON RESOURCES OIL & GAS LP</u>
Address:	<u>PO BOX 4289</u>
City:	<u>FARMINGTON</u> State: <u>NM</u> Zip: <u>87499</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
Gahr, Dean	(303) 268-3723	Dean.P.Gahr@conocophillips.com	All DJ Basin Inspections
Strickler, Robert		Robert.D.Strickler@conocophillips.com	All DJ Basin Inspections
Carlile, Justin	(281) 206-5770	justin.carlile@conocophillips.com	

Compliance Summary:

QtrQtr: NENE Sec: 10 Twp: 4S Range: 65W

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
437368	WELL	DG	09/06/2014		005-07224	Sky Ranch 4-65 9-10 1H	DG <input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>1</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: <u>1</u>	Separators: <u>1</u>	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: <u>1</u>	Pump Jacks: <u>1</u>
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: <u>1</u>	VOC Combustor: <u>1</u>	Oil Tanks: <u>3</u>	Dehydrator Units: <u>1</u>
Multi-Well Pits: _____	Pigging Station: <u>1</u>	Flare: <u>1</u>	Fuel Tanks: _____

Location

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
DRILLING/RECOMP	SATISFACTORY			

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

Corrective Date: _____

Comment: _____
 Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Venting:	
Yes/No	Comment

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

Predrill

Location ID: 437368

Site Preparation:
 Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
Final Review	deranleg	Operator will implement best management practices that address the timing and planning of mobilization, hauling, construction, drilling, and completion operations to minimize conflicts with school buses.	05/27/2014

S/A/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

BMP Type	Comment
General Housekeeping	Lighting. All permanent lighting of oil and gas well sites shall be directed downward and internally. Temporary lighting shall conform to the Commission's Rules and Regulations.
Noise mitigation	Noise. Operator shall provide and post 24-hour, 7 days per week contact information to deal with all noise complaints arising from Operator's oil and gas facilities.
Planning	Water Supply and Quality. In an effort to reduce truck traffic, where feasible, the Operator will identify a water source lawfully available for industrial use, including oil and gas development, close to the facility location, to be utilized by Operator and its suppliers. Operator will comply with the Colorado Department of Public Health and Environment requirements concerning water quality. Where feasible, temporary surface water lines are encouraged and will be utilized. Operator may be permitted to utilize County Road Right-of-Way, and County drainage culverts, where practical, for the laying and operation of temporary water lines on the surface. If necessary, operator will bury temporary water lines at existing driveway and gravel road crossings, or utilize existing culverts, if available. No available water sources within one half mile: If there are no available water sources located within a 1/2 mile radius of a new oil and gas facility, the Operator will test the nearest downgradient available water source that is within a one-mile of the oil and gas facility.
General Housekeeping	Painting of Oil and Gas Facilities. Except for such facilities that must be painted a certain color for safety reasons, Operator agrees to paint all new (post-MOU) production facilities with uniform, non-contrasting, non-reflective color tones and with colors matched to, but slightly darker, than surrounding landscapes.

Inspector Name: Sherman, Susan

Material Handling and Spill Prevention Spill and Release Management. Any spill or release that is reportable to the Commission shall be simultaneously reported to the County.

Storm Water/Erosion Control Berms shall be inspected by Operator on a weekly basis for evidence of discharge. Berms shall be inspected within 48 hours of a precipitation event.

S/AV: _____ 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: 437368 Type: WELL API Number: 005-07224 Status: DG Insp. Status: DG

Well Drilling

Rig: Rig Name: HP Flex 280 Pusher/Rig Manager: Richard Perez

Permit Posted: SATISFACTORY Access Sign: SATISFACTORY

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydril Type: YES

Pressure Test BOP: Pass Test Pressure PSI: 5000 Safety Plan: YES

Drill Fluids

Management:

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____

Multi-Well: NO Disposal Location: CSI/Waste Management

Comment:

BOP charts attached. Water from Select. Water line being worked on. Hose goes north, under I70 to Adams Cty. Jets flying over location.

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: Sherman, Susan

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: DRY LAND

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 REVEGETATION

Cropland

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

Inspector Name: Sherman, Susan

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: DRY LAND _____

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				
Rip Rap	Pass						
Blankets	Pass	Blankets	Pass	MHSP	Pass		
Seeding	Pass	Seeding	Pass				
Compaction	Fail	Compaction	Pass	VT	Pass		
Waddles	Pass	Waddles	Pass				
Retention Ponds	Pass						
Mulching	Pass	Mulching	Pass				
Culverts	Pass	Culverts	Pass				
Check Dams	Pass	Check Dams	Pass	SR	Pass		
Ditches	Pass	Ditches	Pass				
Berms	Pass			CM	Pass		

S/A/V: **ACTION REQUIRED** Corrective Date: **10/10/2014**

Comment: **Erosion rills on west slope and slopes on east side of trailers. Broken straw bale on SE corner. Top soil pile vegetated. Wildlife fence on west side of location**

CA: **Fix erosion spots on location.**

Pits: NO SURFACE INDICATION OF PIT

Pit Type: Blowdown Lined: NO Pit ID: _____ Lat: 39.724320 Long: -104.642140

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: _____ Fencing Condition: _____

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: _____

Anchor Trench Present: _____ Oil Accumulation: _____ 2+ feet Freeboard: _____

Pit (S/A/V): _____ Comment:

Corrective Action: Date: _____

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
673706164	COP Sky Ranch 4 65 9 10 BOP	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433050
673706240	COP Sky Ranch 4 65 9 10 well sign	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433051
673706241	COP Sky Ranch 4 65 9 10 coconut blankets	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433052
673706242	COP Sky Ranch 4 65 9 10 direction sign	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433053
673706243	COP Sky Ranch 4 65 9 10 rig	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433054
673706244	COP Sky Ranch 4 65 9 10 mulch/vegetation	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433055
673706245	COP Sky Ranch 4 65 9 10 blowdown pit	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433057
673706246	COP Sky Ranch 4 65 9 10 erosion W side	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433058
673706247	COP Sky Ranch 4 65 9 10 straw bale broken	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3433059

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)