

**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
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Inspection Date:
10/21/2014Document Number:
666800197Overall Inspection:
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	263512	335379	Murray, Richard	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10071Name of Operator: BARRETT CORPORATION* BILLAddress: 1099 18TH ST STE 2300City: 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
Kellerby, Shaun		shaun.kellerby@state.us.co	
Axelson, Aaron	(970) 230-0926	aaxelson@billbarrettcorp.com	Production Foreman

Compliance Summary:QtrQtr: NWSW Sec: 20 Twp: 6S Range: 92W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
01/11/2012	663800067	PR	PR	SATISFACTORY			No
01/27/2011	200293711	PR	PR	SATISFACTORY			No
10/06/2005	200083902	CO	PR	SATISFACTORY		Pass	No
12/09/2004	200066081	CC	WO	SATISFACTORY		Pass	No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
263512	WELL	PR	04/05/2005	GW	045-08133	BRYNILDSON 13C-20-692	PR	<input checked="" type="checkbox"/>
276580	WELL	PR	03/13/2009	GW	045-10488	BRYNILDSON 13B-20-692	PR	<input checked="" type="checkbox"/>
276581	WELL	PR	05/31/2005	GW	045-10487	BRYNILDSON 12A-20-692	PR	<input checked="" type="checkbox"/>
276741	WELL	PR	03/01/2009	GW	045-10513	BRYNILDSON 13D-20-692	PR	<input checked="" type="checkbox"/>
297757	WELL	PR	03/16/2009	GW	045-16952	BRYNILDSON 12C-20-692	PR	<input checked="" type="checkbox"/>
297758	WELL	PR	03/06/2009	GW	045-16953	BRYNILDSON 22A-20-692	PR	<input checked="" type="checkbox"/>
297759	WELL	PR	03/01/2009	GW	045-16954	BRYNILDSON 22B-20-692	PR	<input checked="" type="checkbox"/>
297760	WELL	PR	03/01/2009	GW	045-16955	BRYNILDSON 22C-20-692	PR	<input checked="" type="checkbox"/>

Inspector Name: Murray, Richard

297761	WELL	PR	03/11/2009	GW	045-16956	BRYNILDSON 23B-20-692	PR	<input checked="" type="checkbox"/>
297762	WELL	PR	03/05/2009	GW	045-16957	BRYNILDSON 23C-20-692	PR	<input checked="" type="checkbox"/>
297763	WELL	PR	02/25/2009	GW	045-16958	BRYNILDSON 23D-20-692	PR	<input checked="" type="checkbox"/>
297764	WELL	PR	03/10/2009	GW	045-16959	BRYNILDSON 12B-20-692	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
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT	ACTION REQUIRED	2 Chemical units by wellhead	Remove unused equipment	11/21/2014

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
IGNITOR/COMBUSTOR	SATISFACTORY	Wire mesh		
WELLHEAD	SATISFACTORY	Steel panel		
SEPARATOR	SATISFACTORY	Wire mesh		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	12	SATISFACTORY			
Ancillary equipment	2	SATISFACTORY	Chemical unit		
Emission Control Device	1	SATISFACTORY			
Plunger Lift	12	SATISFACTORY			
Bird Protectors	10	SATISFACTORY			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	500 BBLS	STEEL AST	,	
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

Corrective Action		Corrective Date	
Comment			

Facilities:		<input type="checkbox"/> New Tank	Tank ID: _____		
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	3	500 BBLS	HEATED STEEL AST	,	
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			

Inspector Name: Murray, Richard

Venting:	
Yes/No	Comment
YES	Bradenhead valves open

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

Predrill

Location ID: 263512

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: 263512 Type: WELL API Number: 045-08133 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Inspector Name: Murray, Richard

Facility ID:	276580	Type:	WELL	API Number:	045-10488	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	276581	Type:	WELL	API Number:	045-10487	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	276741	Type:	WELL	API Number:	045-10513	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297757	Type:	WELL	API Number:	045-16952	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297758	Type:	WELL	API Number:	045-16953	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297759	Type:	WELL	API Number:	045-16954	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297760	Type:	WELL	API Number:	045-16955	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297761	Type:	WELL	API Number:	045-16956	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297762	Type:	WELL	API Number:	045-16957	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297763	Type:	WELL	API Number:	045-16958	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
Facility ID:	297764	Type:	WELL	API Number:	045-16959	Status:	PR	Insp. Status:	PR
<div>Producing Well</div> <div>Comment: Plunger lift</div>									
<div>Environmental</div>									
Spills/Releases:									

Inspector Name: Murray, Richard

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): 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: _____	
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	
<u>Cropland</u>	

Inspector Name: Murray, Richard

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

S/A/V: _____

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT