

Inspector Name: Welsh, Brian

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:
12/15/2014

Document Number:
668500696

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier: 227865 Facility ID: 314190 Loc ID: 8005 Inspector Name: Welsh, Brian On-Site Inspection: ☐ 2A Doc Num:

Operator Information:

OGCC Operator Number: 8005

Name of Operator: BERRY ENERGY INC*WALTER

Address: 1717 WASHINGTON AVE

City: GOLDEN State: CO Zip: 80401-

- ☐ 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
Whiting, Jim	(719) 688-0064/ (505) 215-2474	jimwhiting_99@yahoo.com	All Inspections
Dennis, Penny	303-279- 0190/66190	berryenergy@comcast.net	

Compliance Summary:

QtrQtr: SWNE Sec: 8 Twp: 22S Range: 45W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
11/07/2011	663900061	PR	PR	ACTION REQUIRED	F		No
10/05/2011	664000089	PR	PR	ACTION REQUIRED	F		No
04/04/2008	200130042	CO	SI	ACTION REQUIRED			Yes
03/12/2008	200128078	PR	PR	ACTION REQUIRED			Yes
12/05/2007	200123154	ID	PR	ACTION REQUIRED			Yes
03/10/2000	200005150	PR	PR	SATISFACTORY	I	Pass	No
06/04/1997	500156404	PR	PR			Fail	Yes

Inspector Comment:

REPAIR BERMS FOR PROPER CAPACITY AND REMOVE OR NEATLY STORE UNUSED EQUIPMENT AROUND UNIT

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
227865	WELL	PR	11/20/2008	GW	099-06191	STATE 4-8	PR	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Inspector Name: Welsh, Brian

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

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY	GRAVEL AND DIRT ROAD THROUGH PASTURE		

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	LEASE SIGN MOUNTED ON FENCE BY TANKS. MAKE SIGN MORE LEGIBLE		
OTHER	SATISFACTORY	LEASE SIGN MOUNTED ON METER SHED		
TANK LABELS/PLACARDS	SATISFACTORY	STICKERS ON TANKS. STICKERS PEELING OFF EAST TANK AND WILL NEED REPLACED		

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
STORAGE OF SUPL	ACTION REQUIRED	UNUSED EQUIPMENT AROUND UNIT	REMOVE OR NEATLY STORE UNUSED EQUIPMENT	02/15/2015
WEEDS	SATISFACTORY	VEGETATION IN FENCED AREA AROUND TANKS HAS BEEN GRAZED BY LIVESTOCK. INSTALL MORE EFFECTIVE BMP		

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	WIRE FENCE AROUND TANK BATTERY		

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Gas Meter Run	1	SATISFACTORY	METER RUN 3684' EAST OF LOCATION		
Pump Jack	1	SATISFACTORY	SENTRY 114		
Prime Mover	1	SATISFACTORY	KOHLER COMMANDGAS ENGINE		
Ancillary equipment	1	SATISFACTORY	GAS SCRUBBER		

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	STEEL AST	38.150740,-102.150740

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition: _____

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action: REPAIR BERMS TO CONTAIN PROPER CAPACITY. (2ND NOTICE) Corrective Date: 02/15/2015

Comment: VEGETATION ON BERMS AND INAQUATE CAPACITY

Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	2	300 BBLS	STEEL AST	38.150740,-102.150740

S/A/V: SATISFACTORY Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition: _____

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Inspector Name: Welsh, Brian

Corrective Action		Corrective Date	
Comment	SHARED BERMS		

Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 227865

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:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Facility

Inspector Name: Welsh, Brian

Facility ID: 227865 Type: WELL API Number: 099-06191 Status: PR Insp. Status: PR

Producing Well

Comment: PRODUCING. METER RUN FOR (STATE 4-8) 3684' EAST OF LOCATION @ 38.15074/-102.48007

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? _____ CM _____
CA _____ CA Date _____

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

1003c. Compacted areas have been cross ripped? _____

Inspector Name: Welsh, Brian

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? 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 Pass

Recontoured Pass

80% Revegetation Pass

1003 f. Weeds Noxious weeds? P

Comment: **UNUSED AREAS OF LOCATION ARE PASTURE. VEGETATION INSIDE FENCE AROUND TANKS HAS BEEN GRAZED BY LIVESTOCK.**

Overall Interim Reclamation In Process

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
Compaction		Compaction	Pass			
Gravel						

S/A/V: SATISFACTOR

Corrective Date: _____

Y

Comment: **GRAVEL PILES IN PLACE TO REPAIR EROSION ON LOCATION AFTER RECENT PRECIPITATION**

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
REPAIR BERMS FOR PROPER CAPACITY AND REMOVE OR NEATLY STORE UNUSED EQUIPMENT AROUND UNIT	welshb	12/15/2014

Attached Documents

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

Document Num	Description	URL
668500698	Berms need repair and maintenance	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3508188
668500699	Remove or neatly store unused equipment	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3508189

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.)