

**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:  
12/18/2014

Document Number:  
668500716

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                     |                          |             |
|---------------------|---------------|---------------|---------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:     | On-Site Inspection       | 2A Doc Num: |
|                     | <u>213351</u> | <u>324873</u> | <u>Welsh, Brian</u> | <input type="checkbox"/> |             |

**Operator Information:**

|                       |   |
|-----------------------|---|
| OGCC Operator Number: | <u>81480</u>  |
| Name of Operator:     | <u>THOMAS L SPRING LLC</u>                          |
| Address:              | <u>7400 E ORCHARD RD STE 2000</u>                   |
| City:                 | <u>GREENWOOD</u> State: <u>CO</u> Zip: <u>80111</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 |
|--------------|---------------------------|------------------|---------|
| Springs, Tom | 303-771-1889<br>off/68710 | T1spring@aol.com |         |

**Compliance Summary:**

QtrQtr: SESE Sec: 29 Twp: 20S Range: 48W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 03/09/2012 | 663900746 | SI         | PR          | SATISFACTORY                  | P        |                | No              |
| 11/15/2010 | 200285016 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 06/01/2009 | 200211639 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 11/02/2007 | 200121495 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 04/16/2007 | 200109397 | PR         | PR          | <b>ACTION REQUIRED</b>        |          | <b>Fail</b>    | Yes             |
| 03/16/2000 | 200005235 | PR         | PR          | SATISFACTORY                  | I        | Pass           | No              |
| 04/08/1997 | 500145691 | ID         | SI          |                               |          | Pass           | No              |
| 12/07/1995 | 500145690 | PR         | PR          |                               |          | Pass           | Yes             |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name      | Insp Status                            |
|-------------|------|--------|-------------|------------|-----------|--------------------|--|
| 102511      | PIT  |        | 09/23/1999  |            | -         | WARNE TEMPLIN 1-29 | <input type="checkbox"/>               |
| 213351      | WELL | PR     | 12/19/2013  | GW         | 061-06713 | WARNE TEMPLIN 1-29 | 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                 | TWO TRACK THROUGH PASTURE |                   |      |

**Signs/Marker:**

| Type                 | Satisfactory/Action Required | Comment                         | Corrective Action                     | CA Date    |
|----------------------|------------------------------|---------------------------------|---------------------------------------|------------|
| TANK LABELS/PLACARDS | SATISFACTORY                 | METAL SIGN BY TANK              |                                       |            |
| OTHER                | ACTION REQUIRED              | NO LEASE SIGN AT METER SHED     | Install sign to comply with rule 210. | 02/18/2015 |
| WELLHEAD             | SATISFACTORY                 | LEASE SIGN MOUNTED ON SEPARATOR |                                       |            |

Emergency Contact Number (S/AV): SATISFACTORY

Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Spills:**

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
|------|------|--------|-------------------|---------|

Multiple Spills and Releases?

**Equipment:**

| Type                        | # | Satisfactory/Action Required | Comment   | Corrective Action | CA Date |
|-----------------------------|---|------------------------------|---|-------------------|---------|
| Horizontal Heated Separator | 1 | SATISFACTORY                 |   |                   |         |
| Gas Meter Run               | 1 | SATISFACTORY                 | METER RUN 4500' SW BYCOMPRESSOR STATION ON NORTHSIDE OF ROAD A.50 |                   |         |
| Plunger Lift                | 1 | SATISFACTORY                 |   |                   |         |

**Facilities:**

New Tank

Tank ID: \_\_\_\_\_

| Contents       | # | Capacity | Type     | SE GPS                |
|----------------|---|----------|----------|-----------------------|
| PRODUCED WATER | 1 | <50 BBLS | Open Top | 38.284810,-102.807240 |

S/AV: SATISFACTORY      Comment: 40BBL FIBERGLASS OPEN TOP WATER TANK W/ADEQUATE WILDLIFE SCREENING

Corrective Action: \_\_\_\_\_

Corrective Date: \_\_\_\_\_

Paint

Inspector Name: Welsh, Brian

|                   |          |                     |                     |                 |  |
|-------------------|----------|---------------------|---------------------|-----------------|--|
| Condition         |          |                     |                     |                 |  |
| Other (Content)   | _____    |                     |                     |                 |  |
| Other (Capacity)  | _____    |                     |                     |                 |  |
| Other (Type)      | _____    |                     |                     |                 |  |
| <b>Berms</b>      |          |                     |                     |                 |  |
| Type              | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance     |  |
|                   |          |                     |                     |                 |  |
| Corrective Action |          |                     |                     | Corrective Date |  |
| Comment           |          |                     |                     |                 |  |

|                 |         |
|-----------------|---------|
| <b>Venting:</b> |         |
| Yes/No          | Comment |
| NO              |         |

|                 |                              |         |                   |         |
|-----------------|------------------------------|---------|-------------------|---------|
| <b>Flaring:</b> |                              |         |                   |         |
| Type            | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|                 |                              |         |                   |         |

**Predrill**

Location ID: 213351

**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:**

**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: 213351 Type: WELL API Number: 061-06713 Status: PR Insp. Status: PR

**Producing Well**

Comment: PRODUCING

**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): \_\_\_\_\_

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? \_\_\_\_\_

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? Pass

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

**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 \_\_\_\_\_

Inspector Name: Welsh, Brian

Comment: **UNUSED AREAS OF LOCATION ARE PASTURE**

Overall Interim Reclamation **Pass**

**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            | Pass            | Compaction              | Pass                  |               |                          |         |

S/A/V: **SATISFACTOR** Corrective Date: \_\_\_\_\_

Y

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT