

**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:  
01/23/2015

Document Number:  
674700889

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335991</u>	<u>335991</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

**Operator Information:**

OGCC Operator Number:	<u>10516</u>
Name of Operator:	<u>LINN OPERATING INC</u>
Address:	<u>1999 BROADWAY SUITE 3700</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202</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
White, Brent		bwhite@linnenergy.com	Production Foreman
Burns, Bryan		bburns@linnenergy.com	
Ghani, Debbie	303-999-4016	dghani@linnenergy.com	Regulatory Compliance Supervisor
Johnson, Derek	970-285-2200	dsjohnson@linnenergy.com	

**Compliance Summary:**

QtrQtr:	<u>NESW</u>	Sec:	<u>15</u>	Twp:	<u>6S</u>	Range:	<u>96W</u>
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Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/10/2014	674700313			SATISFACTORY			No
06/18/2014	663903339			<b>ACTION REQUIRED</b>			No

**Inspector Comment:**

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
293403	WELL	PR	10/06/2010	GW	045-14963	SCHOOL HOUSE POINT OM 11B K15 696	PR	<input checked="" type="checkbox"/>
293412	WELL	XX	11/06/2013	LO	045-14972	SCHOOL HOUSE POINT OM11A K15 696	ND	<input checked="" type="checkbox"/>
293413	WELL	DA	06/14/2008	GW	045-14973	SCHOOL HOUSE POINT OM 11D K15 696	DA	<input checked="" type="checkbox"/>
293414	WELL	PR	07/02/2013	GW	045-14974	SCHOOL HOUSE POINT OM 10B K15 696	PR	<input checked="" type="checkbox"/>
293415	WELL	XX	11/06/2013	LO	045-14975	SCHOOL HOUSE POINT OM10A K15	ND	<input checked="" type="checkbox"/>
293416	WELL	XX	11/06/2013	LO	045-14976	SCHOOL HOUSE POINT OM07C K15 696	ND	<input checked="" type="checkbox"/>
293417	WELL	PR	10/06/2010	GW	045-14977	SCHOOL HOUSE POINT OM 14A K15 696	PR	<input checked="" type="checkbox"/>

293418	WELL	PR	10/06/2010	GW	045-14978	SCHOOL HOUSE POINT OM 11DR K15 696	PR	<input checked="" type="checkbox"/>
415486	PIT	AC	02/10/2010	-	-	OLD MOUNTAIN K-15	AC	<input type="checkbox"/>

**Equipment:** Location Inventory

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**

<b>Signs/Marker:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: \_\_\_\_\_

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

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

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

<b>Fencing/:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			

<b>Equipment:</b>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Plunger Lift	4	SATISFACTORY			
Horizontal Heated Separator	4	SATISFACTORY			
Ancillary equipment	1	SATISFACTORY	Chemical container		
Bird Protectors	4	SATISFACTORY			

<b>Facilities:</b> <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE GPS	
CONDENSATE	1	200 BBLS	PBV STEEL	,	
S/A/V:	SATISFACTORY		Comment: _____		

Corrective Action:	Corrective Date:
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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
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Comment
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**Facilities:**       New Tank      Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,

S/A/V:	SATISFACTORY	Comment:	_____
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Corrective Action:	Corrective Date:
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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
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Comment
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**Facilities:**       New Tank      Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLS	HEATED STEEL AST	,

S/A/V:	SATISFACTORY	Comment:	_____
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Corrective Action:	Corrective Date:
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Paint

Condition	_____
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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
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Comment
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<b>Venting:</b>				
Yes/No	Comment			
YES	Pneumatic glycol pump at separator operating with gas is venting.			
<b>Flaring:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Predrill**

Location ID: 335991

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/AV:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

Group	User	Comment	Date
Environmental	lujanc	Before backfilling the pit, statistically representative DISCRETE samples of walls/bottom of the pit will be collected and sampled for TPH and PAHs. Representative discrete confirmation samples will be collected from the landfarmed soil for TPH, PAHs and SAR, pH, Arsenic. Arsenic background samples from nearby native soil (upgradient and cross-gradient of the pad) will be collected to compare arsenic background concentrations with impacted soil arsenic concentrations. A form 04, Notice of Completion will be submitted when pit and landfarmed material are in compliance with Table 910-1 and arsenic concentrations are below or at the max background concentration + 10%.	10/02/2013

**S/AV:** \_\_\_\_\_ **Comment:** Land farming materials aorund edges of location.

**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: 293403 Type: WELL API Number: 045-14963 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 293412 Type: WELL API Number: 045-14972 Status: XX Insp. Status: ND

Facility ID: 293413 Type: WELL API Number: 045-14973 Status: DA Insp. Status: DA

Facility ID: 293414 Type: WELL API Number: 045-14974 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 293415 Type: WELL API Number: 045-14975 Status: XX Insp. Status: ND

Facility ID: 293416 Type: WELL API Number: 045-14976 Status: XX Insp. Status: ND

Facility ID: 293417 Type: WELL API Number: 045-14977 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 293418 Type: WELL API Number: 045-14978 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

**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: Land farming around location

- 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? \_\_\_\_\_ 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 \_\_\_\_\_

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

<b>Storm Water:</b>						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass			MHSP	Pass	
		Check Dams				
		Compaction	Pass			
Berms	Pass					
		Ditches				
		Culverts				
		Gravel	Pass			

S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_  
 Y \_\_\_\_\_  
 Comment: Limited inspection due to snow cover  
 CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT

Pit Type: \_\_\_\_\_ Lined: YES Pit ID: 432286 Lat: 39.515190 Long: -108.105698

**Lining:**  
 Liner Type: \_\_\_\_\_ Liner Condition: Adequate  
 Comment: Limited sight of liner condition due to snow cover.

**Fencing:**  
 Fencing Type: Other Fencing Condition: Inadequate  
 Comment: Plastic orange fencing. Tee post are spread out and fencing is sagging

**Netting:**  
 Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_  
 Comment: None

Anchor Trench Present: \_\_\_\_\_ Oil Accumulation: NO 2+ feet Freeboard: \_\_\_\_\_  
 Pit (S/A/V): ACTION Comment: Limited visual due to snow cover  
 Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_

Permit:	Facility ID	Permit Num	Expiration Date
	415486	1632597	