

**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:
01/29/2015Document Number:
674900264

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 216153 | 326276 | Hughes, Jim | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 16695Name of Operator: CHEVRON MIDCONTINENT LPAddress: 1400 SMITH STREET - ROOM 44195City: HOUSTON State: TX Zip: 77002

- ☐ 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 |
|------------------|-------|-----------------------------|---------|
| Roy, Catherine | | catherine.roy@state.co.us | |
| Fischer, Alex | | alex.fischer@state.co.us | |
| Labowskie, Steve | | steve.labowskie@state.co.us | |
| Pohl, April | | april.pohl@chevron.com | |

Compliance Summary:QtrQtr: SWSE Sec: 3 Twp: 34N Range: 9W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 09/09/2014 | 669500386 | PR | PR | ACTION REQUIRED | I | | No |
| 10/01/2013 | 663401246 | PR | PR | SATISFACTORY | I | | No |
| 11/08/2012 | 669400241 | PR | PR | SATISFACTORY | I | | No |
| 02/11/2011 | 200296002 | ES | PR | SATISFACTORY | | | No |
| 10/15/2009 | 200220239 | PR | PR | SATISFACTORY | | | No |
| 10/16/2008 | 200196898 | PR | PR | SATISFACTORY | | | No |
| 09/19/2006 | 200102764 | PR | PR | SATISFACTORY | | Pass | No |
| 07/14/2005 | 200077070 | PR | PR | SATISFACTORY | | Pass | No |
| 06/19/2003 | 200041289 | PR | PR | SATISFACTORY | | Pass | No |
| 01/03/2002 | 200025049 | PR | PR | SATISFACTORY | | Pass | No |
| 12/15/2000 | 200013056 | PR | PR | SATISFACTORY | | Pass | No |
| 09/24/1999 | 500150114 | PR | PR | | | Pass | No |
| 10/06/1997 | 500150113 | PR | PR | | | Pass | No |
| 11/25/1996 | 500150112 | PR | PR | | | Fail | Yes |
| 11/15/1994 | 500150111 | | PR | | | Pass | No |

Inspector Comment:

On January 29, 2015 COGCC SW EPS Jim Hughes conducted an environmental field inspection of the Chevron Crader #3-2. For the most recent field inspection report of this facility, please refer to document #669500386. Overall inspection status remains the same as the previous document until all required corrective actions have been addressed.

Inspector Name: Hughes, Jim

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 216153 | WELL | PR | 02/04/2000 | GW | 067-07759 | CRADER 3-2 | EI | <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

Lease Road:

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|--------|------------------------------|---------|-------------------|------|
| Access | SATISFACTORY | | | |

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------------------|------------------------------|--|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| WELLHEAD | SATISFACTORY | Free standing sign at location entrance. | | |

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

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

☐ Multiple Spills and Releases?

Fencing/:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|----------|------------------------------|---------|-------------------|---------|
| LOCATION | SATISFACTORY | | | |

Equipment:

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|---------------------|---|------------------------------|------------------------------|-------------------|---------|
| Bird Protectors | 1 | SATISFACTORY | | | |
| Ancillary equipment | 3 | SATISFACTORY | Electrical supply equipment. | | |
| Deadman # & Marked | 3 | SATISFACTORY | Unable to locate SE anchor. | | |
| Prime Mover | 1 | SATISFACTORY | Hydraulic oil leak. | | |
| Other | 1 | SATISFACTORY | Linear rod pump | | |

Inspector Name: Hughes, Jim

| | | | | | |
|---------------------------|---|--------------|--|--|--|
| Gas Meter Run | 1 | SATISFACTORY | | | |
| Vertical Heated Separator | 1 | SATISFACTORY | | | |

Facilities: ☐ New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------------|---|-----------|-----------|-----------------------|
| PRODUCED WATER | 1 | <100 BBLS | PBV STEEL | 37.232463,-107.838818 |

| | | | |
|--------|--|----------|--|
| S/A/V: | | Comment: | |
|--------|--|----------|--|

| | | | |
|--------------------|--|------------------|--|
| Corrective Action: | | Corrective Date: | |
|--------------------|--|------------------|--|

Paint

| | |
|-----------|----------|
| Condition | Adequate |
|-----------|----------|

Other (Content) _____

Other (Capacity) 95 bbl. _____

Other (Type) _____

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Earth | Adequate | Walls Sufficient | Base Sufficient | Adequate |

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
|-------------------|--|-----------------|--|

| | |
|---------|--|
| Comment | |
|---------|--|

| | |
|------------------------|---------|
| <u>Venting:</u> | |
| Yes/No | Comment |
| | |

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

Inspector Name: Hughes, Jim

Predrill

Location ID: 216153

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: 216153 Type: WELL API Number: 067-07759 Status: PR Insp. Status: EI

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:

Inspector Name: Hughes, Jim

| | | | | |
|---|-------------|-------|-----|------|
| 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? _____ 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 _____

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---|
| Rip Rap | Fail | | | | | |
| Berms | Fail | | | MHSP | Pass | Secondary containment for chemical injection. |
| Gravel | Pass | | | | | |
| Compaction | Pass | | | MHSP | Pass | Spill prevention at load out valve. |

S/A/V: **ACTION REQUIRED**Corrective Date: **02/27/2015**

Comment: Southwestern corner of location has developed a run off erosional channel. Remnants of rip rap run down on eastern side of location needs to be repaired. See document #669500386 for additional stormwater related issues.

CA: Install BMPs to control stormwater erosion.

Pits: ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|--|---|
| 674900265 | Stormwater run off on SW corner of location. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3540879 |
| 674900266 | Stormwater outfall on E side of location. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3540880 |

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.)