

**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:
02/20/2015Document Number:
678300093

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	256507	321165	GINTAUTAS, PETER	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10383Name of Operator: SOVEREIGN OPERATING COMPANY LLCAddress: 475 17TH STREET #1200City: 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
Metzger, Tom	(303) 297-0347	tsmetz@aol.com	All Inspections
Crane, Rocky	(719) 529-0682	rockycrane@yahoo.com	All inspections Baca County

Compliance Summary:QtrQtr: NWSE Sec: 13 Twp: 31S Range: 44W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/15/2011	200304569	ID	TA	ACTION REQUIRED			Yes
12/01/2010	200285529	PR	SI	ACTION REQUIRED			Yes
03/20/2008	200128591	MT	SI	ACTION REQUIRED			Yes
01/23/2008	200125499	PR	SI	ACTION REQUIRED			Yes
12/13/2000	200012590	PR	PR	SATISFACTORY	I	Pass	No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
256507	WELL	TA	12/08/2011	GW	009-06600	THOMPSON-JEFFREY 1-13	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	grown over		

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	ACTION REQUIRED	no sign at well site	Install sign to comply with rule 210.	04/07/2015
TANK LABELS/PLACARDS	ACTION REQUIRED	no NFPA label or contents label on tank	Install sign to comply with rule 210.	04/07/2015

Emergency Contact Number (S/A/V): ACTION Corrective Date: 04/07/2015

Comment: no signs present at well

Corrective Action: install sign with emergency contact information

Spills:				
Type	Area	Volume	Corrective action	CA Date
Produced Water			develop and submit site investigation and remediation plan to address impacts to soils from spills/releases of produced water at tank as indicated by soil sampling conducted during inspection	04/07/2015

☐ Multiple Spills and Releases?

Facilities: <input type="checkbox"/> New Tank Tank ID: _____				
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	100 BBLS	FIBERGLASS AST	,
S/A/V:	ACTION REQUIRED	Comment:		
Corrective Action:	install and maintain netting on open top tank			Corrective Date: 04/07/2015

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Insufficient	Base Insufficient	Inadequate
Corrective Action	install and maintain adequate berms around tank when brought into production			Corrective Date 04/07/2015
Comment	no berms			

Venting:		
Yes/No	Comment	
NO		

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

Predrill

Location ID: 256507

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: 256507 Type: WELL API Number: 009-06600 Status: TA Insp. Status: EI

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Inspector Name: GINTAUTAS, PETER

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: _____ Other _____

Sample Sample Type: SOIL COMPOSITE

Time: 02/20/2015 10:50 (MM/dd/yyyy hh:mm) GPS: Lat 37.344840 Long -102.320140

BTEX: _____ TPH: _____ Anion: _____ Captions: _____ General Chemistry: _____

Dissolved Methane: _____ Composition: _____ Stable Isotopes: _____ 8260: _____

8270: _____ RCRA Metals: _____ 910-Metals: _____ PAH: _____

Other: Background sample northwest of tank

Comment: SAR, pH and EC

Sample Sample Type: SOIL COMPOSITE

Time: 02/20/2015 10:43 (MM/dd/yyyy hh:mm) GPS: Lat 37.446800 Long -102.319820

BTEX: _____ TPH: _____ Anion: _____ Captions: _____ General Chemistry: _____

Dissolved Methane: _____ Composition: _____ Stable Isotopes: _____ 8260: _____

8270: _____ RCRA Metals: _____ 910-Metals: _____ PAH: _____

Other: SAR, pH and EC

Comment: 8 point composite around tank, SAR and EC are above thresholds in Table 910-1 of rules indicating likelihood of spills/releases of produced water from tank.

Lab:

Lab Name _____

ALS _____

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 REVEGETATIONCropland

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

Inspector Name: GINTAUTAS, PETER

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

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
678300094	sampling sites and results	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564623
678300095	well -no sign or emergency contact and tank no berms and no labels	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564624
678300096	tank with no net or labels	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564625

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.)