

**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
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Inspection Date:

02/20/2015

Document Number:

678300087

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	205624	320973	GINTAUTAS, PETER	2A Doc Num:	

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
Crane, Rocky	(719) 529-0682	rockycrane@yahoo.com	All inspections Baca County
Metzger, Tom	(303) 297-0347	tsmetz@aol.com	All Inspections

Compliance Summary:QtrQtr: SENW Sec: 21 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)
10/20/2014	668500398	SI	SI	SATISFACTORY	P		No
08/20/2013	668601271	SI	SI	SATISFACTORY	P		No
04/18/2011	200308686	PR	PR	ACTION REQUIRED			Yes
09/09/2010	200272628	PR	SI	ACTION REQUIRED			Yes
05/05/2010	200248436	PR	PR	ACTION REQUIRED			Yes
04/22/2009	200209007	PR	PR	ACTION REQUIRED			Yes
06/13/2008	200191031	PR	PR	ACTION REQUIRED			No
07/10/2007	200114806	PR	PR	ACTION REQUIRED		Fail	Yes
12/13/2000	200012598	PR	PR	SATISFACTORY	I	Pass	No
02/23/2000	200004432	PR	PR	SATISFACTORY	I	Pass	No
03/03/1999	500135569	PR	PR			Pass	No
02/04/1998	500135568	PR	PR			Pass	No
12/26/1996	500135567	PR	PR				Yes
03/09/1995	500135566	PR	PR			Pass	Yes

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
205624	WELL	SI	04/04/2013	GW	009-06035	LOFLIN-FEDERAL 1-21	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	overgrown		

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WEEDS	ACTION REQUIRED	weeds accumulating around equipment	remove weeds from around equipment	04/07/2015
UNUSED EQUIPMENT	ACTION REQUIRED	unused separator	remove unused equipment from location	04/07/2015

Spills:

Type	Area	Volume	Corrective action	CA Date
Produced Water	Tank		Soil sample indicates EC and SAR are in excess of threshold in Table 910-1 of rules. Develop and submit site investigation and remediation plan to address this matter	04/07/2015

☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK BATTERY	SATISFACTORY			
PUMP JACK	SATISFACTORY			

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Pump Jack	1	SATISFACTORY			

Facilities:☐ New Tank

Tank ID: _____

Inspector Name: GINTAUTAS, PETER

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	FIBERGLASS AST	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

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

Corrective Action	make repairs to berm if well to be brought into production and tank used	Corrective Date	04/07/2015
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Comment	tank not in use at time of inspection
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
OTHER	1			,

S/A/V:	SATISFACTORY		Comment: unused treater tower	
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Corrective Action:	unused treater tower	Corrective Date:	
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Paint

Condition	Inadequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Venting:		
Yes/No	Comment	
NO		

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

Predrill

Location ID: 205624

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: 205624 Type: WELL API Number: 009-06035 Status: SI 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:

	Lat	Long
DWR Receipt Num: _____	Owner Name: _____	GPS : _____
Field Parameters:		
Sample Location: _____		
Sample Sample Type: <u>SOIL COMPOSITE</u>		
Time: <u>02/20/2015 09:54</u> (MM/dd/yyyy hh:mm)	GPS: Lat <u>37.331350</u>	Long <u>-102.389340</u>
BTEX: _____	TPH: _____	Anion: _____
Captions: _____		General Chemistry: _____
Dissolved Methane: _____	Composition: _____	Stable Isotopes: _____
8260: _____	RCRA Metals: _____	910-Metals: _____
Other: <u>pH, SAR and EC</u>	PAH: _____	
Comment:	results exceed Table 910-1 thresholds for SAR and EC indicating area to south of tank probably received releases/spills of produced water when well was in production.	
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? _____	

Inspector Name: GINTAUTAS, PETER

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

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/webblink/>) and search by document number:

Document Num	Description	URL
678300089	soil sampling location and EC and SAR results	http://ogccwebblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564579

678300090	weeds and berms	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564580
678300091	area sampled	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564581
678300092	unused separator	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3564582

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.)