

**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:
03/18/2015Document Number:
674601550

Overall Inspection:

ALLEGED VIOLATION**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	223747	313425	Maclaren, Joe	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10430Name of Operator: MONUMENT GLOBAL RESOURCES INCAddress: 12160 N ABRAMS RD., SUITE 610City: DALLAS State: TX Zip: 75243

- ☐ 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
Koehler, Bob		bob.koehler@state.co.us	
Browning, Chuck		chuck.browning@state.co.us	
Ellsworth, Stuart		stuart.ellsworth@state.co.us	
Smith, Kerry	(970) 845-6335	ksmith@monumentglobal.com	CEO All Inspections
Labowskie, Steve		steve.labowskie@state.co.us	

Compliance Summary:QtrQtr: NENE Sec: 3 Twp: 34N Range: 20W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/20/2014	674600818	SI	SI	ALLEGED VIOLATION			Yes
11/07/2013	663401354	IJ	SI	ALLEGED VIOLATION	I		Yes
08/20/2013	663401117	IJ	SI	SATISFACTORY			No
08/31/2012	669400093	IJ	AC	SATISFACTORY			No
07/27/2011	200316865	MI	AC	SATISFACTORY			No
07/27/2011	200316668	MI	SI	SATISFACTORY			No
09/12/2010	200271180	RT	AC	SATISFACTORY			No
08/26/2009	200217264	RT	AC	SATISFACTORY			No
09/05/2008	200195354	MI	SI	SATISFACTORY			No
09/28/2007	200119638	RT	AC	SATISFACTORY			No
08/16/2005	200075428	RT	AC	SATISFACTORY		Pass	No
09/02/2003	200049682	MI	AC	SATISFACTORY		Pass	No
07/29/2003	200043013	RT	AC	ACTION REQUIRED		Fail	Yes
08/06/2001	200020156	MI	AC	SATISFACTORY		Pass	No
08/10/2000	200009663	RT	AC	SATISFACTORY		Pass	No
12/04/1998	500154899	PR	AC			Pass	No

Inspector Name: Maclaren, Joe

Inspector Comment:

Field inspection conducted to confirm current status of well (083-05147). Observations confirm well has not been plugged; Corrective actions required have not been performed; No MIT in well file; Operator has not submitted form 42 for scheduling of Mechanical Integrity Testing or an intent to properly plug and abandon this well. The Routine (annual) UIC test failed on 8/20/14 as indicated on field inspection doc #674600818. Photo's Uploaded.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
105651	PIT		09/23/1999		-	CACHE 8		<input type="checkbox"/>
105652	PIT		09/23/1999		-	CACHE 8		<input type="checkbox"/>
223747	WELL	SI	02/15/2014	ERIW	083-05147	CACHE UNIT 8	SI	<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 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

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Corrective Action Completed; Well sign installed per inspection doc #663401354 conducted on 11/07/2013.		

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
OTHER	SATISFACTORY	Corrective Action Completed; Flood debris removed from location per inspection doc #663401354 conducted on 11/07/2013.		

Spills:

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

☐ Multiple Spills and Releases?

Inspector Name: Maclaren, Joe

Venting:	
Yes/No	Comment

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

Predrill

Location ID: 223747

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: 223747 Type: WELL API Number: 083-05147 Status: SI Insp. Status: SI

Underground Injection Control

UIC Violation: Other _____

Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) _____ Inj Zone: ISMY

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 07/27/2011

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: UIC Routine (Annual) inspection performed on 08/20/2014 did not pass as indicated on inspection #674600818. Corrective actions required have not been performed; No MIT in well file; Operator has not submitted form 42 for scheduling of Mechanical Integrity Testing or an intent to properly plug and abandon this well.

Method of Injection: PUMP FEED _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

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: _____

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 _____

Inspector Name: Maclaren, Joe

Pit, cellars, rat holes and other bores closed? _____ CM _____

CA _____ CA Date _____

Guy line anchors removed? _____ CM _____

CA _____ CA Date _____

Guy line anchors marked? Pass CM _____

CA _____ CA Date _____

1003b. Area no longer in use? _____ 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? _____

Production areas have been stabilized? Pass 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? _____ I _____

Comment: _____

Overall Interim Reclamation In Process

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 ☐

Inspector Name: Maclaren, Joe

Storm Water:						
Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction	Pass			
S/A/V: _____ Corrective Date: _____						
Comment: _____						
CA: _____						
Pits: <input type="checkbox"/> 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
674601561	Well Sign	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3572190
674601562	Wellhead 083-05147	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3572191
674601563	Location Perspective	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3572192