

**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:

04/01/2015

Document Number:

678300175

Overall Inspection:

**ACTION REQUIRED****FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	206029	321096	GINTAUTAS, PETER	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 10330Name of Operator: INVESTMENT EQUIPMENT LLCAddress: 17509 COUNTY ROAD 14City: FT MORGAN State: CO Zip: 80701

- ☐ 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
Rebol, Dave		daverebol@hotmail.com	

**Compliance Summary:**QtrQtr: NWNW Sec: 12 Twp: 35S Range: 46W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/16/2014	668602877	SI	SI	SATISFACTORY	P		No
08/15/2013	668601220	SI	SI	SATISFACTORY			No
07/11/2013	668601062	SI	SI	ACTION REQUIRED			No
08/23/2012	668200135	SI	TA	ALLEGED VIOLATION			Yes
07/27/2011	200316359	RT	SI	ACTION REQUIRED			Yes
06/22/2010	200257335	RT	SI	ACTION REQUIRED			Yes
08/03/2009	200216215	RT	SI	ACTION REQUIRED			Yes
07/16/2008	200193298	MI	SI	SATISFACTORY			No
07/11/2007	200114827	RT	SI	SATISFACTORY		Pass	No
08/01/2006	200094746	RT	AC	SATISFACTORY		Pass	No
02/10/2005	200066928	RT	AC	SATISFACTORY		Pass	No
08/10/2004	200058066	RT	AC	SATISFACTORY		Pass	No
07/29/2003	200042219	MI	AC	SATISFACTORY		Pass	No
08/08/2002	200029690	RT	AC	SATISFACTORY		Pass	No
08/23/2001	200019484	RT	AC	SATISFACTORY		Pass	No
02/23/2001	200015397	PR	AC	SATISFACTORY	I	Pass	No
03/03/2000	200005079	RT	AC	SATISFACTORY	I	Pass	No
05/04/1999	500136385	PR	AC			Pass	No
06/11/1998	500136384	PR	AC			Pass	No
02/13/1997	500136383	PR	AC			Pass	No

**Inspector Comment:**

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
206029	WELL	SI	05/27/2014	OW	009-06445	TSRU 601W	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****Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			

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

Corrective Date: \_\_\_\_\_

Comment: multiple operators emergency contact information present as shown in attached photo

Corrective Action: ensure that only emergency contact information at well is for current operator

**Spills:**

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	steel pipe fence around wellhead		

**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	1	SATISFACTORY	wellhead covered with shed		

**Venting:**

Yes/No	Comment
NO	

**Flaring:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Predrill**

Location ID: 206029

**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: 206029 Type: WELL API Number: 009-06445 Status: SI Insp. Status: EI

**Idle Well**Purpose: ☐ Shut In ☒ Temporarily Abandoned Reminder: \_\_\_\_\_

S/A/V: SATISFACTORY CA Date: \_\_\_\_\_

CA: \_\_\_\_\_

Comment: no means of production present at well. last MIT in 2013.

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

Inspector Name: GINTAUTAS, PETER

Comment: <input style="width: 700px;" type="text"/>			
Corrective Action: _____		Date: _____	
Reportable: _____	GPS: Lat _____	Long _____	
Proximity to Surface Water: _____		Depth to Ground Water: _____	
<b><u>Water Well:</u></b>			
DWR Receipt Num: _____		Owner Name: _____	GPS : _____
Lat _____ Long _____			
<b><u>Field Parameters:</u></b>			
<input style="width: 300px;" type="text"/>			
Sample Location: <input style="width: 400px;" type="text"/>			
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: <input style="width: 750px;" type="text"/>	
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? _____
<b>RESTORATION AND REVEGETATION</b>	
<b><u>Cropland</u></b>	
Top soil replaced _____	Recontoured _____ Perennial forage re-established _____

Inspector Name: GINTAUTAS, PETER

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

Inspector Name: GINTAUTAS, PETER

Pit Type: Drilling Pit Lined: NO Pit ID: 114674 Lat: 37.016355 Long: -102.558779

**Lining:**

Liner Type: \_\_\_\_\_ Liner Condition: \_\_\_\_\_

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

**Fencing:**

Fencing Type: \_\_\_\_\_ Fencing Condition: \_\_\_\_\_

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

**Netting:**

Netting Type: \_\_\_\_\_ Netting Condition: \_\_\_\_\_

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

Anchor Trench Present: \_\_\_\_\_ Oil Accumulation: \_\_\_\_\_ 2+ feet Freeboard: \_\_\_\_\_

Pit (S/A/V): SATISFACTOR Comment: drilling reserve pit noted in 1985 inspection. 1990 inspection showed no pit present. pit closed

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

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
678300176	multiple incorrect emergency contact #s	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3584728">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3584728</a>

## **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.)