

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:
05/28/2015

Document Number:
674701454

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335872</u>	<u>335872</u>	<u>LONGWORTH, MIKE</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>10516</u>
Name of Operator:	<u>LINN OPERATING INC</u>
Address:	<u>1999 BROADWAY SUITE 3700</u>
City:	<u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>

- 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
White, Brent		bwhite@linnenergy.com	Production Foreman
Burns, Bryan		bburns@linnenergy.com	
Ghani, Debbie	303-999-4016	dghani@linnenergy.com	Regulatory Compliance Supervisor
Johnson, Derek	970-285-2200	dsjohnson@linnenergy.com	

Compliance Summary:

QtrQtr:	<u>SWSE</u>	Sec:	<u>33</u>	Twp:	<u>5S</u>	Range:	<u>96W</u>
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Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/02/2015	674701202			ACTION REQUIRED			No
09/12/2013	663902177			SATISFACTORY	F		No

Inspector Comment:

*Follow up to 04/02/2015 inspection doc. * 674701202. Corrective actions have been made.*

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
292100	WELL	PR	08/22/2008	GW	045-14594	CHEVRON 33-1D	PR	<input checked="" type="checkbox"/>
292101	WELL	XX	09/10/2014	LO	045-14593	CHEVRON 33-2D	ND	<input checked="" type="checkbox"/>
292102	WELL	XX	09/10/2014	LO	045-14592	CHEVRON 33-3D	ND	<input checked="" type="checkbox"/>
292103	WELL	PR	08/01/2008	GW	045-14591	CHEVRON 33-9D	PR	<input checked="" type="checkbox"/>
292104	WELL	PR	08/01/2008	GW	045-14590	CHEVRON 33-10 D	PR	<input checked="" type="checkbox"/>
292105	WELL	PR	08/27/2008	GW	045-14589	CHEVRON 33-11D	PR	<input checked="" type="checkbox"/>
292106	WELL	XX	09/10/2014	LO	045-14588	CHEVRON 33-12D	ND	<input checked="" type="checkbox"/>
292107	WELL	XX	09/10/2014	LO	045-14587	CHEVRON 33-13D	ND	<input checked="" type="checkbox"/>

292108	WELL	PR	09/23/2008	GW	045-14586	CHEVRON 1-29D	PR	<input checked="" type="checkbox"/>
292109	WELL	PR	12/09/2009	GW	045-14585	CHEVRON 1-30 D	PR	<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

<u>Signs/Marker:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY	100 bbl tank has been labeled since last inspection.		

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: 970-285-2200

Corrective Action: _____

<u>Spills:</u>				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

<u>Fencing/:</u>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
LOCATION	SATISFACTORY			
WELLHEAD	SATISFACTORY			

<u>Equipment:</u>					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	6	SATISFACTORY			
Bird Protectors	7	SATISFACTORY			
Ancillary equipment	1	SATISFACTORY	Chemical containerat wells		
Plunger Lift	6	SATISFACTORY			

<u>Facilities:</u> <input type="checkbox"/> New Tank Tank ID: _____					
Contents	#	Capacity	Type	SE	GPS

CONDENSATE	1	100 BBLs	PBV STEEL	
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S/A/V: SATISFACTORY	Comment: No Air id on tank.
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Corrective Action:	Corrective Date:
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	Corrective Date
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Comment

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	3	300 BBLs	HEATED STEEL AST	,

S/A/V: SATISFACTORY	Comment: Airs Id # 045-1876-001 on west tank. No Air id on other 2-300 bbl tanks.
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Corrective Action:	Corrective Date:
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate

Corrective Action	Corrective Date
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Comment

Venting:	
Yes/No	Comment
NO	

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

Predrill

Location ID: 335872

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AV: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 292100 Type: WELL API Number: 045-14594 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 292101 Type: WELL API Number: 045-14593 Status: XX Insp. Status: ND

Facility ID: 292102 Type: WELL API Number: 045-14592 Status: XX Insp. Status: ND

Facility ID: 292103 Type: WELL API Number: 045-14591 Status: PR Insp. Status: PR

Producing Well

Comment: **Producing well**

Facility ID: 292104 Type: WELL API Number: 045-14590 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292105 Type: WELL API Number: 045-14589 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292106 Type: WELL API Number: 045-14588 Status: XX Insp. Status: ND

Facility ID: 292107 Type: WELL API Number: 045-14587 Status: XX Insp. Status: ND

Facility ID: 292108 Type: WELL API Number: 045-14586 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 292109 Type: WELL API Number: 045-14585 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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:

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? Pass CM _____
 CA _____ CA Date _____
 Waste Material Onsite? Pass CM _____
 CA _____ CA Date _____
 Unused or unneeded equipment onsite? Pass 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
Check Dams	Pass					
Berms	Pass					
Seeding	Pass					

S/A/V: SATISFACTOR Corrective Date: _____
 Y _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments		
Comment	User	Date
Follow up to 04/02/2015 inspection doc. * 674701202. Corrective actions have been made.	longworm	05/28/2015