

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:
07/22/2015

Document Number:
674900673

Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|--------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>267693</u> | <u>334385</u> | <u>Hughes, Jim</u> | <input type="checkbox"/> | |

Operator Information:

| | |
|-----------------------|--|
| OGCC Operator Number: | <u>5</u> |
| Name of Operator: | <u>COLORADO OIL & GAS CONSERVATION</u> |
| Address: | <u>1120 LINCOLN ST SUITE 801</u> |
| City: | <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</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 |
|------------------|-------|-----------------------------|---------|
| Labowskie, Steve | | steve.labowskie@state.co.us | |
| Fischer, Alex | | alex.fischer@state.co.us | |
| Roy, Catherine | | catherine.roy@state.co.us | |
| Maclaren, Joe | | joe.maclaren@state.co.us | |

Compliance Summary:

| QtrQtr: | <u>SESE</u> | Sec: | <u>17</u> | Twp: | <u>35N</u> | Range: | <u>6W</u> |
|------------|-------------|------------|-------------|-------------------------------|------------|----------------|-----------------|
| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
| 06/09/2015 | 674900606 | SI | EI | SATISFACTORY | | | No |

Inspector Comment:

On July 22, 2015 COGCC SW EPS Jim Hughes conducted a follow up environmental field inspection of the COGCC Beaver Creek MW 35 -6-17 #1 and #2. For the most recent field inspection report of this facility, please refer to document #674900606. An additional sign listing the operator, operator contact information, and the nearest intersection, has been installed on the metal building housing the telemetry and data logging equipment. The well head signs have been mounted to the protective cages surrounding the well heads. Pressure gauges on the well heads were consistent with readings taken during the last field inspection.

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 267693 | WELL | AC | 06/15/2015 | OBW | 067-08802 | MONITOR WELL 35-6-17-1 | EI | <input checked="" type="checkbox"/> |
| 267867 | WELL | AC | 06/15/2015 | OBW | 067-08814 | MONITOR WELL 35-6-17-2 | 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 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 | Well head signs have been mounted to the protective cages surrounding each well head. | | |

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

Comment: An additional sign has been installed on the metal shack listing the operator, operator contact information, and the nearest access point.

Corrective Action: _____

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

| Fencing/: | | | | |
|------------------|------------------------------|--|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD | SATISFACTORY | 4' by 4' by 4' angle iron and expanded metal protective cage surrounding each well head. | | |

| Equipment: | | | | | |
|---------------------|---|------------------------------|--|-------------------|---------|
| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| Other | 1 | SATISFACTORY | Metal building houses ancillary equipment. | | |
| Ancillary equipment | 1 | SATISFACTORY | Telemetry | | |
| Ancillary equipment | 1 | SATISFACTORY | In-Situ data logger. | | |

| Venting: | |
|-----------------|---------|
| Yes/No | Comment |
| | |

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

Predrill

Location ID: 267693

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: 267693 Type: WELL API Number: 067-08802 Status: AC Insp. Status: EI

Facility ID: 267867 Type: WELL API Number: 067-08814 Status: AC 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:

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? _____ 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 REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Inspector Name: Hughes, Jim

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: SATISFACTOR Corrective Date: _____

Y

Comment:

CA:

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

| Comment | User | Date |
|---|---------|------------|
| On July 22, 2015 COGCC SW EPS Jim Hughes conducted a follow up environmental field inspection of the COGCC Beaver Creek MW 35-6-17 #1 and #2. For the most recent field inspection report of this facility, please refer to document #674900606. An additional sign listing the operator, contact information, and the nearest intersection, has been installed on the metal building housing the telemetry and data logging equipment. The well head signs have been mounted to the protective cages surrounding the well heads. Pressure gauges on the well heads were consistent with readings taken during the last field inspection. | hughesj | 07/27/2015 |

Attached Documents

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

| Document Num | Description | URL |
|--------------|--|---|
| 674900674 | Additional signage installed on metal shack. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3650648 |
| 674900675 | Beaver Creek MW location photo. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3650649 |

| | | |
|-----------|---|---|
| 674900676 | Well head signs have been mounted to cages. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3650650 |
|-----------|---|---|