

**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:  
08/14/2015Document Number:  
674701721Overall Inspection:  
SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	415485	335677	LONGWORTH, MIKE	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 10516Name of Operator: LINN OPERATING INCAddress: 600 TRAVIS STREET #5100City: HOUSTON State: TX Zip: 77002

- ☐ 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
Lujan, Carlos		carlos.lujan@state.co.us	
Fischer, Alex		alex.fischer@state.co.us	
Johnson, Derek	970-285-2200	dsjohnson@linnenergy.com	
Foster, Michael	281-840-4375	MFoster@linnenergy.com	Regulatory Compliance Specialist II
Burns, Bryan		bburns@linnenergy.com	
Spencer, Stan		stan.spencer@state.co.us	
White, Brent		bwhite@linnenergy.com	Production Foreman

**Compliance Summary:**

QtrQtr: _____		Sec: _____		Twp: _____		Range: _____	
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/23/2015	674701312			SATISFACTORY			No
02/05/2015	674700961	AC	AC	ACTION REQUIRED			No
02/05/2015	674700962			ACTION REQUIRED			No
01/23/2015	674700891	AC	AC	ACTION REQUIRED			No

**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
287039	WELL	PR	07/16/2008	GW	045-12854	GRANLEE OM 18C B10 969	PR	<input checked="" type="checkbox"/>
287040	WELL	PR	12/01/2011	GW	045-12853	GRANLEE OM 01DR B10 696	PR	<input checked="" type="checkbox"/>
287041	WELL	PR	06/17/2008	GW	045-12852	GRANLEE OM 08A B10 696	PR	<input checked="" type="checkbox"/>
287042	WELL	PR	11/29/2011	GW	045-12851	GRANLEE OM 01C B10 696	PR	<input checked="" type="checkbox"/>

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287043	WELL	XX	07/13/2007	LO	045-12850	GRANLEE OM 02A B10 696	PA	<input type="checkbox"/>
287044	WELL	DA	09/07/2011	DA	045-12849	GRANLEE OM 01D B10 696	DA	<input type="checkbox"/>
287045	WELL	PR	06/17/2008	GW	045-12848	GRANLEE OM 01A B10 696	PR	<input checked="" type="checkbox"/>
287046	WELL	PR	09/10/2008	GW	045-12847	GRANLEE OM 02C B10 696	PR	<input checked="" type="checkbox"/>
288384	WELL	PR	06/23/2008	GW	045-13250	GRANLEE OM 02D B10 696	PR	<input checked="" type="checkbox"/>
415485	PIT	AC	02/10/2010		-	OLD MOUNTAIN B-10	AC	<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
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			
CONTAINERS	SATISFACTORY			

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

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

Comment: **970-285-2200**

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

**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			

**Equipment:**

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	2	SATISFACTORY	<b>Chemical containers at wells</b>		
Bird Protectors	9	SATISFACTORY			
Plunger Lift	7	SATISFACTORY			

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Horizontal Heated Separator	7	SATISFACTORY			
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<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
METHANOL	1	<50 BBLS	STEEL AST	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) 500 gallons \_\_\_\_\_

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	at separaators
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<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	200 BBLS	PBV STEEL	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

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	
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<b>Facilities:</b>		<input type="checkbox"/> New Tank	Tank ID: _____	
Contents	#	Capacity	Type	SE GPS
CONDENSATE	4	300 BBLS	HEATED STEEL AST	,
S/A/V:	SATISFACTORY		Comment:	
Corrective Action:				Corrective Date:

Paint

Condition	Adequate
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Other (Content) \_\_\_\_\_

Other (Capacity) \_\_\_\_\_

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Other (Type) _____				
<b>Berms</b>				
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate
Corrective Action				Corrective Date
Comment				

<b>Venting:</b>		
Yes/No	Comment	
NO		

<b>Flaring:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Predrill**

Location ID: 415485

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/A/V:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

Group	User	Comment	Date
Environmen tal	Iujanc	Before backfilling the pit, statistically representative DISCRETE samples of walls/bottom of the pit will be collected and sampled for TPH and PAHs. Representative discrete confirmation samples will be collected from the landfarmed soil for TPH, PAHs and SAR, pH, Arsenic. Arsenic background samples from nearby native soil (upgradient and cross-gradient of the pad) will be collected to compare arsenic background concentrations with impacted soil arsenic concentrations. A form 04, Notice of Completion will be submitted when pit and landfarmed material are in compliance with Table 910-1 and arsenic concentrations are below or at the max background concentration + 10%.	10/02/2013
Environmen tal	Iujanc	1) Netting can be removed during the winter (as requested) as long as the pit is frozen during the winter. If part of the pit does not freeze due to pumping or discharge of produced water into the pit, then that section of the pit must be netted and isolated so that no access to the water is possible for birds and other wildlife. ***** 2) It is the responsibility of the operator to protect wildlife from having access to (unfrozen) water of the pit. Nets shall be reinstalled if condensate or oil is observed on the pit. Nets shall be installed if pits are accessible to wildlife. ***** 3) Netting needs to be reinstalled over fluid pits upon thawing of the pits' contents. Nets will be reinstalled before Sage Grouse nesting season begins on March 1st.	12/08/2014

**S/A/V:** SATISFACTORY **Comment:** Crew cleaning pit liner so liner can be removed and pit closed.

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**S/A/V:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

<b>CA:</b> _____	<b>Date:</b> _____
<b>Stormwater:</b> _____	
<b>Comment:</b> _____	
<b>Staking:</b> _____	
<b>On Site Inspection (305):</b>	
<u>Surface Owner Contact Information:</u>	
Name: _____	Address: _____
Phone Number: _____	Cell Phone: _____
<u>Operator Rep. Contact Information:</u>	
Landman Name: _____	Phone Number: _____
Date Onsite Request Received: _____	Date of Rule 306 Consultation: _____
Request LGD Attendance: _____	
<u>LGD Contact Information:</u>	
Name: _____	Phone Number: _____
Agreed to Attend: _____	
<u>Summary of Landowner Issues:</u>	
<u>Summary of Operator Response to Landowner Issues:</u>	
<u>Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:</u>	

**Facility**

Facility ID: 287039	Type: WELL	API Number: 045-12854	Status: PR	Insp. Status: PR
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**Producing Well**

Comment:	Producing well
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Facility ID: 287040	Type: WELL	API Number: 045-12853	Status: PR	Insp. Status: PR
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**Producing Well**

Comment:	Producing well
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Facility ID: 287041	Type: WELL	API Number: 045-12852	Status: PR	Insp. Status: PR
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**Producing Well**

Comment:	Producing well
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Facility ID: 287042	Type: WELL	API Number: 045-12851	Status: PR	Insp. Status: PR
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**Producing Well**

Comment:	Producing well
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Facility ID: 287045	Type: WELL	API Number: 045-12848	Status: PR	Insp. Status: PR
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**Producing Well**

Comment:	Producing well
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Facility ID: 287046	Type: WELL	API Number: 045-12847	Status: PR	Insp. Status: PR
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**Producing Well**

Comment:	Producing well
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Facility ID: 288384 Type: WELL API Number: 045-13250 Status: PR Insp. Status: PR

**Producing Well**

Comment: Producing well

Facility ID: 415485 Type: PIT API Number: - Status: AC Insp. Status: AC

**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: Track hoe turning land farm material.

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 \_\_\_\_\_

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- 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
		Culverts	Pass			
Compaction	Pass					
		Ditches	Pass			
		Gravel	Pass			
Gravel	Pass					
				MHSP	Pass	
Berms	Pass					

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		Compaction	Pass			
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S/A/V: SATISFACTOR      Corrective Date: \_\_\_\_\_  
Y \_\_\_\_\_

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

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

**Pits:** ☐ NO SURFACE INDICATION OF PIT

Pit Type: _____	Lined: _____	Pit ID: 415485	Lat: 39.542270	Long: -108.091100
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**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): \_\_\_\_\_ Comment: Crew cleaning pit liner so liner can be removed and pit closed.

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

Permit:	Facility ID	Permit Num	Expiration Date
	415485	1632591	
	415485	1632591	