

**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:

09/30/2015

Document Number:

667700698

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 214959 | 325533 | LABOWSKIE, STEVE | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 16695Name of Operator: CHEVRON MIDCONTINENT LPAddress: 1400 SMITH STREET - ROOM 44195City: 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 |
|--------------|-------|------------------------|------------------------|
| Pohl, April | | april.pohl@chevron.com | San Juan Basin contact |

Compliance Summary:QtrQtr: NENE Sec: 36 Twp: 34.5N Range: 9W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 02/17/2015 | 667700560 | PR | PR | ACTION REQUIRED | I | | No |
| 10/01/2013 | 663401245 | PR | PR | SATISFACTORY | | | No |
| 05/03/2012 | 661700293 | PR | PR | SATISFACTORY | P | | No |
| 03/26/2011 | 200305099 | PR | PR | SATISFACTORY | | | No |
| 10/15/2009 | 200220247 | PR | PR | SATISFACTORY | | | No |
| 03/31/2009 | 200207646 | PR | PR | SATISFACTORY | | | No |
| 03/11/2009 | 200206460 | PR | PR | SATISFACTORY | | | No |
| 09/18/2008 | 200195571 | PR | PR | SATISFACTORY | | | No |
| 04/19/2006 | 200092863 | PR | PR | SATISFACTORY | | Pass | No |
| 11/16/2004 | 200066054 | PR | PR | SATISFACTORY | | Pass | No |
| 05/22/2002 | 200027817 | PR | PR | SATISFACTORY | | Pass | No |
| 02/12/2001 | 200015162 | PR | PR | SATISFACTORY | | Pass | No |
| 11/08/1999 | 200002879 | PR | PR | SATISFACTORY | | Pass | No |
| 12/03/1996 | 500148147 | PR | PR | | | Pass | No |
| 11/13/1995 | 500148146 | PR | PR | | | Pass | No |

Inspector Comment:

Corrective actions adequately performed. Vegetation on interim has improved and further improvemetns are encouraged, especially if landowner also improves weed management of surrounding area.

Related Facilities:

Inspector Name: LABOWSKIE, STEVE

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|-------------------------------------|
| 214959 | WELL | PR | 05/18/1994 | GW | 067-06564 | STATE-ROYCE 1-36 | 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 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 | | | |
| TANK LABELS/PLACARDS | SATISFACTORY | | | |
| CONTAINERS | SATISFACTORY | | | |

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

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-------|------------------------------|--|-------------------|---------|
| OTHER | SATISFACTORY | landowner debris pile is no longer at corner of location | | |

Spills:

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

☐ Multiple Spills and Releases?**Equipment:**

| Type | # | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|-------|---|------------------------------|--|-------------------|---------|
| Other | 1 | SATISFACTORY | lube oil tank with adequate spill prevention | | |

Facilities:☐ New Tank

Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|----------|---|----------|------|--------|
| OTHER | 0 | | | , |

S/A/V: _____ Comment: _____

Corrective Action: _____ Corrective Date: _____

Paint

Condition _____

Other (Content) _____

Inspector Name: LABOWSKIE, STEVE

Other (Capacity) _____

Other (Type) _____

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|------|----------|---------------------|---------------------|-------------|
| | | | | |

| | | | |
|-------------------|--|-----------------|--|
| Corrective Action | | Corrective Date | |
| Comment | | | |

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

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

Predrill

Location ID: 214959

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: 214959 Type: WELL API Number: 067-06564 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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: _____ | |
| <u>Water Well:</u> | | | |
| DWR Receipt Num: _____ | Owner Name: _____ | GPS : _____ | Lat _____ Long _____ |
| <u>Field Parameters:</u> | | | |
| | | | |
| 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? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Waste Material Onsite? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Unused or unneeded equipment onsite? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Pit, cellars, rat holes and other bores closed? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| Guy line anchors removed? _____ CM _____ | |
| CA _____ | CA Date _____ |
| Guy line anchors marked? <u>Pass</u> CM _____ | |
| CA _____ | CA Date _____ |
| 1003b. Area no longer in use? <u>Pass</u> Production areas stabilized ? <u>Pass</u> | |
| 1003c. Compacted areas have been cross ripped? _____ | |
| 1003d. Drilling pit closed? <u>Pass</u> 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? <u>In</u> | |
| Production areas have been stabilized? _____ | Segregated soils have been replaced? _____ |
| RESTORATION AND REVEGETATION | |
| <u>Cropland</u> | |
| Top soil replaced _____ | Recontoured _____ Perennial forage re-established _____ |
| <u>Non-Cropland</u> | |
| Top soil replaced <u>Pass</u> | Recontoured <u>Pass</u> 80% Revegetation <u>In</u> |
| 1003 f. Weeds Noxious weeds? _____ I _____ | |

Inspector Name: LABOWSKIE, STEVE

Comment: Weed control is improved, significant weeds have been removed although some still remain, area mulched with straw, interim area still has undesirable vegetation such as "vine weed" as does the surrounding landowner area.

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 ☐

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|-----------------------------------|
| Ditches | Pass | | | | | also used as landowner irrigation |
| Mulching | Pass | | | | | interim area |
| Waddles | Pass | | | | | |
| Compaction | Pass | | | | | |
| Sediment Traps | Pass | | | | | |
| Gravel | Pass | Compaction | Pass | MHSP | Pass | |

S/A/V: SATISFACTOR Corrective Date: _____

Y

Comment: corrective actions issued on 2/17 inspection for BMP maintenance have been successfully performed.

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT