

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:
10/23/2015

Document Number:
674701966

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>335597</u>	<u>335597</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>600 TRAVIS STREET #5100</u>
City:	<u>HOUSTON TX</u> Zip: <u>77002</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
Burns, Bryan		bburns@linnenergy.com	
Foster, Michael	281-840-4375	MFoster@linnenergy.com	Regulatory Compliance Specialist II
Johnson, Derek	970-285-2200	dsjohnson@linnenergy.com	
Burger, Craig		craig.burger@state.co.us	
Kellerby, Shaun		shaun.kellerby@state.co.us	
White, Brent		bwhite@linnenergy.com	Production Foreman

Compliance Summary:

QtrQtr:	<u>SWNW</u>	Sec:	<u>4</u>	Twp:	<u>6S</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)
04/17/2015	674701283			SATISFACTORY			No
03/25/2015	668100379			ACTION REQUIRED			No
03/13/2015	674701072			ACTION REQUIRED			No
12/30/2014	674700811			ACTION REQUIRED			No
01/14/2014	663902644			ACTION REQUIRED	I		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
285014	WELL	PR	09/24/2013	GW	045-12349	CHEVRON 5-3D	PR	<input checked="" type="checkbox"/>
285015	WELL	PR	07/25/2007	GW	045-12350	CHEVRON 5-1D	PR	<input checked="" type="checkbox"/>
285016	WELL	PR	01/12/2010	GW	045-12343	CHEVRON 5-2D	PR	<input checked="" type="checkbox"/>
285041	WELL	PR	07/25/2007	GW	045-12352	CHEVRON 5-4D	PR	<input checked="" type="checkbox"/>

440957	SPILL OR RELEASE	CL	02/26/2015	-	SPILL/RELEASE POINT	CL	<input type="checkbox"/>
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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			
TANK LABELS/PLACARDS	SATISFACTORY			
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

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

Comment: 970-285-2200

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
	WELLHEAD	<= 5 bbls	Clean up stain around 5-4D 05-045-12352	11/24/2015

Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	ACTION REQUIRED	Some wiring at northeast corner is needed.	Repair fence.	11/24/2015

Equipment:					
Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Horizontal Heated Separator	4	SATISFACTORY			
Bird Protectors	2	SATISFACTORY			
Ancillary equipment	1	SATISFACTORY	Chemical containment at wells.		
Plunger Lift	4	SATISFACTORY			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	100 BBLs	PBV STEEL	,

Inspector Name: LONGWORTH, MIKE

S/A/V:	ACTION REQUIRED	Comment:	Thief hatch has a bleed off line ran into tank. Hatch is unable to close. Wire netting is around hatch but not full covering opening.
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Corrective Action:	Close lid when not attended.	Corrective Date:	10/26/2015
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Paint

Condition	Adequate
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
Comment				

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	2	300 BBLs	STEEL AST	,
S/A/V:	SATISFACTORY		Comment:	Air id 045-15033-001 A.Q permit # 07GA0905

Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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
Comment				

Venting:

Yes/No	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 335597

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: 285014 Type: WELL API Number: 045-12349 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 285015 Type: WELL API Number: 045-12350 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

BradenHead

Comment: Bleed off line ran from well to partially buried condensate tank in tank battery. Braden not venting during inspection. Gauge on braden reading 230 psi.

CA:

CA Date:

Facility ID: 285016 Type: WELL API Number: 045-12343 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

BradenHead

Comment: Bleed off line ran from well to partially buried condensate tank in tank battery. Braden not venting during inspection. Gauge on braden reading 500 psi.

CA:

CA Date:

Facility ID: 285041 Type: WELL API Number: 045-12352 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

BradenHead

Comment: Bleed off line ran from well to partially buried condensate tank in tank battery. Braden is disconnected from bleed off line. Braden is closed and bull plugged.

CA:

CA Date:

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 _____

Inspector Name: LONGWORTH, MIKE

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
Slope Roughening	Pass					
Seeding						Continue seeding.
		Ditches	Pass			
				MHSP	Pass	
		Culverts	Pass			
Compaction	Pass					
Ditches	Pass					
Check Dams	Pass					
		Compaction	Pass			
		Check Dams	Pass			
Gravel	Pass					
Berms	Pass					
		Gravel	Pass			

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

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
674701967	Braden bleed off line / open tank hatch / stain at well	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3707421

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.)