

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		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">DE</td> <td style="width:25%;">ET</td> <td style="width:25%;">OE</td> <td style="width:25%;">ES</td> </tr> </table>	DE	ET	OE	ES
DE	ET	OE	ES				
			Inspection Date: <u>12/01/2015</u> Document Number: <u>674900894</u> Overall Inspection: <u>SATISFACTORY</u>				
FIELD INSPECTION FORM							
Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____		
	<u>269993</u>	<u>320880</u>	<u>Hughes, Jim</u>				

Operator Information:

OGCC Operator Number: <u>10559</u>
Name of Operator: <u>SOUTHLAND ROYALTY COMPANY LLC</u>
Address: <u>400 WEST 7TH STREET</u>
City: <u>FORT WORTH</u> State: <u>TX</u> Zip: <u>76102</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
Hampton, John	(505)-330-4377	jhampton@ctfieldsvcs.com	SW Insp Reports
Fischer, Alex		alex.fischer@state.co.us	
Semler, Willard	(505)-330-4302	wsemler@ctfieldsvcs.com	SW Insp Reports
Grigg, Robbie		rgrigg@morningpartners.com	SW Insp Reports

Compliance Summary:

QtrQtr: NWSE Sec: 7 Twp: 32N Range: 5W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
07/09/2008	200192217	ES	PR	ACTION REQUIRED			Yes
10/02/2006	200105894	PR	PR	SATISFACTORY		Pass	No
08/25/2005	200078126	PR	PR	SATISFACTORY		Pass	No
03/28/2004	200053182	CC	DG	SATISFACTORY		Pass	No
03/24/2004	200053181	CC	DG	SATISFACTORY		Pass	No

Inspector Comment:

On December 1, 2015 COGCC West Environmental Supervisor Alex Fischer and SW EPS Jim Hughes conducted an environmental field inspection of the Southland Royalty Co. LLC Quintana 32-5 #7-2. For the most recent field inspection report of this facility, please refer to document #200192217.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
269993	WELL	PR	02/07/2005	GW	007-06200	QUINTANA 32-5 7-2	EI	<input checked="" type="checkbox"/>

Equipment: Location Inventory

Inspector Name: Hughes, Jim

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

Lease Road:

Type	Satisfactory/Action Required	comment	Corrective Action	Date
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Free standing sign near well head.		
TANK LABELS/PLACARDS	ACTION REQUIRED	Operator information is not posted on 400 bbl. ASTs.	Install sign to comply with rule 210.	01/18/2016

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

Corrective Date: _____

Comment: _____

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
SEPARATOR	SATISFACTORY			
TANK BATTERY	SATISFACTORY			
PUMP JACK	SATISFACTORY	Chain link fence surrounding pump jack. Guard fencing present on pump jack.		

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	1	SATISFACTORY	Pump house		
Gas Meter Run	1	SATISFACTORY			
Ancillary equipment	1	SATISFACTORY	Telemetry		
Ancillary equipment	1	SATISFACTORY	Electrical supply		
Deadman # & Marked	4	SATISFACTORY			
Bird Protectors	3	SATISFACTORY			

Inspector Name: Hughes, Jim

Vertical Heated Separator	1	SATISFACTORY		
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Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	400 BBLS	STEEL AST	37.029251,-107.433209

S/A/V: **ACTION REQUIRED** Comment: **Operator information is not labeled on tanks.**

Corrective Action: **Comply with Rule 210.d.** Corrective Date: **01/18/2016**

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

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

Corrective Action _____ Corrective Date _____

Comment **Apparent small excavation near eastern tank load out valve. Depression is full of water.**

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 269993

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: 269993 Type: WELL API Number: 007-06200 Status: PR 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:

	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: _____

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? _____

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
Compaction	Fail	Compaction	Pass			

S/A/V: **ACTION REQUIRED** Corrective Date: **01/18/2016**

Comment: **Storm water run off has created erosional channels along southern edge of location.**

CA: **Install/maintain BMPs to control run off erosion.**

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
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Attached Documents

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

Document Num	Description	URL
674900895	Storm water erosional channels.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3744776
674900896	Depression near eastern tank load out valve.	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3744777