

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



Inspection Date:
03/10/2016
Document Number:
673712874

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>236368</u>	<u>317103</u>	<u>Sherman, Susan</u>	<input type="checkbox"/>	

Overall Inspection:
SATISFACTORY w/ CMT or AR

Operator Information:

OGCC Operator Number: 10548
Name of Operator: HRM RESOURCES II LLC
Address: 410 17TH STREET #1100
City: DENVER State: CO Zip: 80202

- 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
Pape, Terry	(970) 768-5700	tpape@hrmres.com	
Hutson, L. Roger	(303) 893-6621	lrhutson@hrmres.com	
Prohaska, April	(303) 996-8697	aprohaska@hrmres.com	

Compliance Summary:

QtrQtr: NWSW Sec: 20 Twp: 2N Range: 51W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/01/2015	673710549	PR	PR	ACTION REQUIRED			No
02/12/2015	673709703	PR	PR	ACTION REQUIRED			No
02/13/2008	200126975	PR	PR	SATISFACTORY			No
04/04/2007	200109123	PR	PR	SATISFACTORY		Pass	No
09/25/2003	200044364	PR	PR	SATISFACTORY		Pass	Yes

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
117619	PIT		09/23/1999		-	PIEPER NICHOLS 1	<input type="checkbox"/>
236368	WELL	PR	02/18/1974	OW	121-08858	PIEPER NICHOLS 1	PR <input checked="" type="checkbox"/>
262867	PIT	AC	02/26/2002		-	PIEPER	AC <input type="checkbox"/>
262868	PIT	AC	02/26/2002		-	PIEPER	AC <input type="checkbox"/>
262869	PIT	AC	02/26/2002		-	PIEPER	AC <input type="checkbox"/>

Equipment:

Location Inventory

Empty box for equipment or location inventory details.

Inspector Name: Sherman, Susan

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

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: _____
 Comment: _____
 Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Spills:

Type	Area	Volume	Corrective action	CA Date

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Pump Jack # 1 Satisfactory/Action Required: _____
 Comment: **Gear box leak, not on ground**
 Corrective Action: _____ Date: _____

Venting:

Yes/No	
Comment	

Flaring:

Type	Satisfactory/Action Required

Comment: _____

Corrective Action: _____	Correct Action Date: _____
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Predrill

Location ID: 236368

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AR: SATISFACTORY **Comment:** No COAs.

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

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: 236368 Type: WELL API Number: 121-08858 Status: PR Insp. Status: PR

Producing Well

Comment: PR. Dec 2015 reported to COGCC database.

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: pasture, windmill east of tank battery

1003a. Waste and Debris removed? Pass
CM _____
CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass
CM _____
CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass
CM _____
CA _____ CA Date _____

Guy line anchors marked? Pass
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 _____

Inspector Name: Sherman, Susan

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	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

Permit:	Facility ID	Permit Num	Expiration Date
	262868	1120167	
	262867	1120166	
	262869	1120168	
	262869	1120168	

COGCC Comments

Comment	User	Date
Corrective actions from inspection #673710549 completed, however some free oil/algae is back on top of pit. Pumper notified on 3/10/2016 and will remove it ASAP.	ShermaSe	03/11/2016

Attached Documents

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

Document Num	Description	URL
673712890	HRM Pieper Nichols 1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3803086