

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:
03/17/2016
Document Number:
685300159
Overall Inspection:
ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>215240</u>	<u>325693</u>	<u>St John, William (Cal)</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 10000
Name of Operator: BP AMERICA PRODUCTION COMPANY
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

- 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
Beebe, Sabre	970-375-7530	Sabre.Beebe@bp.com	SW Inspection Reports
Inspections, All		SanJuanCOGCC@bp.com	SW Inspection Reports
Labowskie, Steve		steve.labowskie@state.co.us	

Compliance Summary:

QtrQtr: NESE Sec: 19 Twp: 34N Range: 7W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
03/07/2011	200305103	PR	PR	SATISFACTORY			No
06/13/2006	200098828	PR	PR	SATISFACTORY		Pass	No
06/22/2004	200058050	PR	PR	SATISFACTORY		Pass	No
07/23/2002	200030489	ID	SI	SATISFACTORY		Pass	No
07/13/2000	200008681	PR	PR	SATISFACTORY		Pass	No
08/27/1999	500148707	PR	PR			Pass	No
03/04/1997	500148706	PR	PR			Pass	No
09/08/1995	500148705	PR	PR				No
09/06/1995	500148704	PR	PR				No

Inspector Comment:

Report contains corrective action. See Emergency Contact Number, Facilities, and Stormwater sections of report for additional comments.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215240	WELL	PR	12/07/1986	GW	067-06845	PAUL MARTIN A 1	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 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			
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: Last two numbers of the phone number on the gate sign entering the water injection facility area are missing. The sign next to it on the fencing has complete number. Missing numbers need to be replaced to avoid any possible confusion in and emergency.

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
LOCATION	SATISFACTORY	Post and wire		
OTHER	SATISFACTORY	Panel - Riser and valve set.		
TANK BATTERY	SATISFACTORY	Post and welded pole barrier		
SEPARATOR	SATISFACTORY	Panel		
OTHER	SATISFACTORY	Chain link with barb wire top - Injection Facility		
WELLHEAD	SATISFACTORY	Panel		
OTHER	SATISFACTORY	Panel - Telemetry Equipment		

Equipment:			
Type: Ancillary equipment	# 2	Satisfactory/Action Required:	SATISFACTORY
Comment	Water Cans		
Corrective Action		Date:	
Type: Vertical Heated Separator	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Bird Protectors	# 5	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Other	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Riser and valve set.		
Corrective Action		Date:	
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Wellhead		
Corrective Action		Date:	
Type: Other	# 2	Satisfactory/Action Required:	SATISFACTORY
Comment	Steel buildings. One for operationc (MCC). One for injection equipment.		
Corrective Action		Date:	
Type: Other	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Injection pump and equipment.		
Corrective Action		Date:	
Type: Other	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Electrical Service Equipment.		
Corrective Action		Date:	
Type: Flow Line	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action		Date:	
Type: Ancillary equipment	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment	Telemetry Equipment		
Corrective Action		Date:	

Facilities:				
<input type="checkbox"/> New Tank	Tank ID: _____			
Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<100 BBLS	PBV STEEL	,
S/AR	SATISFACTORY	Comment:		
Corrective Action:				Corrective Date:
Paint				
Condition	Adequate			

Inspector Name: St John, William (Cal)

Other (Content) _____
 Other (Capacity) 95 BBLs _____
 Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action **Install berm or other secondary containment device to comply with Rule 605.a.(4)** Corrective Date **04/20/2016**

Comment **There are no berms around buried produced water tank. See link at end of report for path to downloadable pictures.**

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	2	500 BBLs	STEEL AST	,

S/AR **SATISFACTORY** Comment: **Facilities are part of Injection Well.**

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 _____

Comment _____

Venting:

Yes/No **NO**

Comment _____

Flaring:

Type	Satisfactory/Action Required

Comment: _____

Corrective Action: _____ Correct Action Date: _____

Predrill

Location ID: 215240

Site Preparation:

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

S/AR: _____

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

Form 2A COAs:

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

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: 215240 Type: WELL API Number: 067-06845 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: _____

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. 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? _____
 CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized? Pass

1003c. Compacted areas have been cross ripped? Pass

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass
 Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? In
 Production areas have been stabilized? Pass Segregated soils have been replaced? Pass

RESTORATION AND REVEGETATION

Cropland
 Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland
 Top soil replaced Pass Recontoured Pass 80% Revegetation In

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			MHSP	Fail	
Gravel	Pass			SI	Fail	
Rip Rap	Fail					
Check Dams	Fail	Gravel	Pass			
Berms	Pass	Compaction	Pass			
Culverts	Pass	Culverts	Pass			
Waddles	Fail					

S/A/V: **ACTION REQUIRED** Corrective Date: **04/21/2016**

Comment: **Cut slope has 4 -10 inch rills. Waddles at bottom of slope are full. The fill slope has rills that have turned into wash outs 1 - 1 1/2 foot wide and up to 3 foot deep. Sediment is migrating off location into adjacent property. See link at end of report to path to downloadable pictures.**

CA: **Install or repair BMP's per Rule 1002.f. Refer to the 1002.f guidance document for further details.**

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
685300167	Fill slope rilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3813802
685300168	Fill slope rilling and failed wattle	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3813803
685300169	Sediment plume	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3813804

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685300170	Rip rap failed wattle rilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3813805
685300171	Failed wattle	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3813806
685300172	Fill slope rilling	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3813807