

**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:

03/23/2016

Document Number:

685300222

Overall Inspection:

ACTION REQUIRED**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 215346 | 325762 | St John, William (Cal) | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10000Name of Operator: BP AMERICA PRODUCTION COMPANYAddress: 380 AIRPORT RDCity: 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: SENW Sec: 12 Twp: 34N Range: 9W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 12/22/2011 | 661700074 | PR | PR | SATISFACTORY | | | No |
| 11/08/2006 | 200103049 | PR | PR | SATISFACTORY | | Pass | No |
| 07/19/2005 | 200077105 | PR | PR | SATISFACTORY | | Pass | No |
| 06/24/2003 | 200041309 | PR | PR | SATISFACTORY | | Pass | No |
| 01/08/2002 | 200025547 | PR | PR | SATISFACTORY | | Pass | No |
| 01/05/2001 | 200015027 | PR | PR | SATISFACTORY | | Pass | No |
| 10/06/1999 | 500148872 | PR | PR | | | Pass | No |
| 10/10/1997 | 500148871 | PR | PR | | | Pass | No |
| 09/20/1996 | 500148870 | PR | PR | | | Pass | No |
| 05/02/1995 | 500148869 | PR | PR | | | | No |
| 11/16/1994 | 500148868 | PR | PR | | | Pass | No |

Inspector Comment:

This report contains corrective actions. See Signs/Marker and Good House Keeping sections for additional comments. See link at end of report for path to downloadable pictures.

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|-------------------------------------|
| 215346 | WELL | PR | 01/23/1989 | GW | 067-06951 | ALICE LORENZ 1 | PR | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

Inspector Name: St John, William (Cal)

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| 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 |
|----------------------|------------------------------|--|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY | NFPA lable on lube oil tank is peeling and will need to be replaced. | | |
| WELLHEAD | SATISFACTORY | Sign has broken off base and was laying face down on the ground at location entrance. Stood sign up against the location fencing but will need to be repaired. | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------------------|------------------------------|--|---|------------|
| UNUSED EQUIPMENT | ACTION REQUIRED | Counter balance weights from old pump jack at edge of location do not appear to be in use, a section of sucker rod assembly and old 8' piece of bent pipe have been left on location along fence line. There are other assorted items need to be cleaned up. | If not intended for reuse remove unused equipment and materials to comply with Rule 603.f using the Rule 603.f guidance document for further details. | 07/05/2016 |

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. | | |
| PUMP JACK | SATISFACTORY | Steel mesh. | | |

| | | | | |
|---------------------------------|---|-------------------------------|--------------|-------|
| Equipment: | | | | |
| Type: Ancillary equipment | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | Water Can | | | |
| Corrective Action | | | | Date: |
| Type: Gas Meter Run | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Bird Protectors | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Deadman # & Marked | # 5 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Flow Line | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Pump Jack | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Ancillary equipment | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | Lube oil tank on secondary containment. | | | |
| Corrective Action | | | | Date: |
| Type: Ancillary equipment | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | Telemetry Equipment | | | |
| Corrective Action | | | | Date: |
| Type: Ancillary equipment | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | Wellhead | | | |
| Corrective Action | | | | Date: |
| Type: Vertical Heated Separator | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |

| Venting: | |
|-----------------|----|
| Yes/No | NO |

Comment

Flaring:

| | | | |
|--------------------|------------------------------|----------------------|--|
| Type | Satisfactory/Action Required | | |
| Comment: | | | |
| Corrective Action: | | Correct Action Date: | |

Predrill

Location ID: 215346

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: 215346 Type: WELL API Number: 067-06951 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? Pass

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

Inspector Name: St John, William (Cal)

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? I

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 | MHSP | Pass | |
| | | Culverts | Pass | | | |
| Gravel | 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 |
|--------------|---------------------|---|
| 685300225 | Pumpjack Weights | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3817118 |
| 685300226 | Lube tank Label | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3817119 |
| 685300227 | Sucker Rod Assembly | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3817120 |

| | | |
|-----------|-----------|---|
| 685300228 | Bent Pipe | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3817121 |
| 685300229 | Cribbing | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3817122 |