

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:
04/07/2016
Document Number:
680300596
Overall Inspection:
ACTION REQUIRED

FIELD INSPECTION FORM

| | | | | | |
|---------------------|---------------|---------------|--------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | <u>227272</u> | <u>313927</u> | <u>SCHURE, KYM</u> | <input type="checkbox"/> | |

Operator Information:

OGCC Operator Number: 31257
Name of Operator: FRITZLER RESOURCES INC
Address: P O BOX 114
City: FORT MORGAN State: CO Zip: 80701

- 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 |
|----------------|----------------|------------------------|-----------------|
| Fritzler, Gene | (970) 867-9388 | gfritzler@bresnan.net | All Inspections |
| Burn, Diana | | diana.burn@state.co.us | |

Compliance Summary:

QtrQtr: NWNE Sec: 13 Twp: 1N Range: 56W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 07/27/2015 | 678200375 | PR | PR | ACTION REQUIRED | | | No |
| 09/17/2007 | 200119475 | PR | PR | SATISFACTORY | | | No |
| 12/14/2006 | 200101486 | PR | PR | ACTION REQUIRED | | Fail | Yes |
| 05/15/2003 | 200038880 | PR | PR | ACTION REQUIRED | | Fail | Yes |
| 02/21/1997 | 500155920 | PR | PR | | | Fail | Yes |

Inspector Comment:

Routine Site Inspection

Related Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|--|
| 227272 | WELL | PR | 07/18/2007 | OW | 087-08015 | MARWITZ 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 |
| TANK LABELS/PLACARDS | ACTION REQUIRED | Display contents | Install sign to comply with rule 210. | 05/12/2016 |
| WELLHEAD | ACTION REQUIRED | No sign at wellhead | Install sign to comply with rule 210. | 05/12/2016 |
| BATTERY | SATISFACTORY | | | |

Emergency Contact Number (S/AR): ACTION Corrective Date: 05/12/2016

Comment:

Corrective Action: Install sign at wellhead w/emergency contact information.

| Good Housekeeping: | | | | |
|---------------------------|------------------------------|---|---|------------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| UNUSED EQUIPMENT | ACTION REQUIRED | Comply with Rule 603 - Unused equipment | Remove tank sitting outside bermed area | 05/12/2016 |
| STORAGE OF SUPL | ACTION REQUIRED | "Comply with Rule 603" | Remove all stored supplies, equipment (rods and poly) laying next to pump jack | 05/12/2016 |

| Spills: | | | | |
|--|------|--------|-------------------|---------|
| Type | Area | Volume | Corrective action | CA Date |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |

| Fencing/: | | | | |
|------------------|------------------------------|---------|-------------------|---------|
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| PIT | SATISFACTORY | | | |

| Equipment: | | | | |
|---------------------------------|-----------|------------------------------|---------|-------|
| Type | Count | Satisfactory/Action Required | Comment | Date |
| Type: Vertical Heated Separator | # 1 | SATISFACTORY | | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Pump Jack | # 1 | SATISFACTORY | | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Bird Protectors | # 1 | SATISFACTORY | | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Prime Mover | # 1 | SATISFACTORY | | |
| Comment | NG Engine | | | |
| Corrective Action | | | | Date: |

| | | |
|----------------------------------|-----|--|
| Type: Ancillary equipment | # 1 | Satisfactory/Action Required: SATISFACTORY |
| Comment: Propane tank on trailer | | |
| Corrective Action: | | Date: |

Facilities: New Tank Tank ID: _____

| Contents | # | Capacity | Type | SE GPS |
|--------------------|--------------|------------------|---------------------------|-----------------------|
| CRUDE OIL | 2 | 300 BBLS | STEEL AST | 40.056850,-103.585320 |
| S/AR | SATISFACTORY | | Comment: Placard contents | |
| Corrective Action: | | Corrective Date: | | |

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 | Berms are well maintained | | | |

Venting:

| | |
|---------|--|
| Yes/No | |
| Comment | |

Flaring:

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

Predrill

Location ID: 227272

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: 227272 Type: WELL API Number: 087-08015 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? _____

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 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel | Pass | Other | Pass | | | |

S/A/V: SATISFACTOR Corrective Date: _____

Y

Comment: Continue BMP's for stormwater erosion control and management

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 |
|--------------|---------------------------------|---|
| 680300616 | Sign @ battery | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831551 |
| 680300617 | (2) 300bbl. crude tanks - berms | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831552 |
| 680300618 | Tank placarding | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831553 |
| 680300619 | Unused equipment | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831554 |
| 680300620 | Heated vertical separator | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831555 |
| 680300621 | PW pit - fence | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831556 |
| 680300622 | Pump jack - | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831557 |
| 680300623 | Unused equipment | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831558 |
| 680300624 | Pump jack shed | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3831559 |