

**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:

05/17/2016

Document Number:

679901536

Overall Inspection:

SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	212992	324827	Welsh, Brian	2A Doc Num:	

Operator Information:

OGCC Operator Number:	<u>8005</u>
Name of Operator:	<u>BERRY ENERGY INC*WALTER</u>
Address:	<u>1717 WASHINGTON AVE</u>
City:	<u>GOLDEN</u> State: <u>CO</u> Zip: <u>80401-</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
Whiting, Jim	(719) 688-0064/ (505) 215-2474	jimwhiting_99@yahoo.com	All Inspections
Quint, Craig		craig.quint@state.co.us	
Dennis, Penny	303-279- 0190/66190	berryenergy@comcast.net	

Compliance Summary:

QtrQtr: <u>SESW</u> Sec: <u>4</u> Twp: <u>19S</u> Range: <u>50W</u>							
Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/25/2015	668501603	IJ	IJ	SATISFACTORY			No
11/24/2014	668603227	IJ	AC	ACTION REQUIRED			No
05/15/2014	668602671	IJ	AC	ACTION REQUIRED	P		No
05/07/2014	668602624	IJ	AC	ACTION REQUIRED			No
04/30/2014	668602586	IJ	AC	ACTION REQUIRED			No
05/07/2013	668600743	IJ	SI	SATISFACTORY			No
06/21/2011	200313355	SR	PA	ACTION REQUIRED			Yes
06/21/2011	200313354	RT	AC	SATISFACTORY			No
04/12/2010	200242422	RT	AC	SATISFACTORY			No
03/11/2009	200206062	MI	AC	SATISFACTORY			No
04/30/2008	200189093	RT	AC	ACTION REQUIRED			Yes
04/14/2008	200130314	RT	AC	ACTION REQUIRED			Yes
01/04/2008	200125067	RT	AC	ACTION REQUIRED			Yes
04/12/2007	200109023	RT	AC	ACTION REQUIRED		Fail	Yes
08/08/2006	200094767	RT	AC	SATISFACTORY		Pass	No
07/15/2005	200078453	RT	SI	SATISFACTORY		Pass	No
05/03/2004	200054680	MT	SI	SATISFACTORY		Pass	No
11/08/2000	200012796	ID	SI	SATISFACTORY	I	Pass	No

Inspector Name: Welsh, Brian

01/12/1999	500145065	ID	TA			Fail	Yes
08/22/1997	500145064	ID	TA			Fail	Yes
10/22/1996	500145063	ID	TA			Pass	No
08/16/1996	500145062	MT	TA			Pass	No
08/15/1996	500145061	MT	TA			Pass	No
02/02/1996	500145060	ID	SI			Pass	Yes
11/16/1994	500145059		SI				Yes

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
115387	PIT		09/23/1999		-	HELFRICH 2	
212992	WELL	SI	02/02/2016	ERIW	061-06353	HELFRICH 1	AC

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	Two track along edge of farm ground to wellhead. Dirt road through pasture to tank battery		

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	Lease sign at tank battery		
WELLHEAD	SATISFACTORY	Lease sign by wellhead		
TANK LABELS/PLACARDS	SATISFACTORY	Stickers on tanks		

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
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK BATTERY	SATISFACTORY	Wire fence around tank battery		
WELLHEAD	SATISFACTORY	Metal panels around wellhead		

Equipment:				
Type:	#	Satisfactory/Action Required:		
Comment				
Corrective Action				Date:

Venting:	
Yes/No	NO
Comment	

Flaring:			
Type		Satisfactory/Action Required	
Comment:			
Corrective Action:		Correct Action Date:	

Predrill

Location ID: 212992

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: 212992 Type: WELL API Number: 061-06353 Status: SI Insp. Status: AC

Underground Injection Control

UIC Violation: _____

Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg -17" HG
(e.g. 30 psig or -30" Hg)

Previous Test Pressure _____

MPP _____

Inj Zone: MRRW

TC: Pressure or inches of Hg 0 PSIG

Previous Test Pressure _____

Last MIT: 05/15/2014

Brhd: Pressure or inches of Hg _____

Previous Test Pressure _____

AnnMTRReq: NO

Comment: **CASING HAD A LIGHT BLOW THAT DIED IMMEDIATELY, TBG IJ @ -17" HG**

Method of Injection: PUMP FEED

Test Type: _____

Tbg psi: _____

Csg psi: _____

BH psi: _____

Insp. Status: _____

Comment: _____

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:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

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? _____ 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	Pass	Compaction	Pass			

Inspector Name: Welsh, Brian

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
679901536	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3858158