

**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:

05/22/2016

Document Number:

685300507

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

|                     |             |        |                        |                          |             |
|---------------------|-------------|--------|------------------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name:        | On-Site Inspection       | 2A Doc Num: |
|                     | 214681      | 325385 | 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 | COGCC                 |

**Compliance Summary:**QtrQtr: SWNW Sec: 20 Twp: 34N Range: 6W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 05/17/2006 | 200093277 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 06/04/2004 | 200057879 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 05/06/2003 | 200040984 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 10/17/2001 | 200022919 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 06/27/2000 | 200007608 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 05/11/1999 | 500147672 | BH         | PR          |                               |          | Pass           | No              |
| 02/21/1997 | 500147674 | PR         | PR          |                               |          | Pass           | No              |
| 09/07/1995 | 500147671 | SR         | PA          |                               | P        | Pass           | No              |
| 08/11/1995 | 500147673 | PR         | PR          |                               |          |                | No              |

**Inspector Comment:****Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|-------------------------------------|
| 214681      | WELL | PR     | 09/28/2015  | GW         | 067-06285 | SMITH 01-20 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                 |         |                   |         |
| WELLHEAD             | 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 |
|--------------|------------------------------|----------------------------------|-------------------|---------|
| OTHER        | SATISFACTORY                 | Concrete Barriers - Porpane Tank |                   |         |
| TANK BATTERY | SATISFACTORY                 | Panel                            |                   |         |
| PUMP JACK    | SATISFACTORY                 | Safety Rails                     |                   |         |

**Equipment:**

|                           |          |  |
|---------------------------|----------|--|
| Type: Ancillary equipment | # 1      | Satisfactory/Action Required: SATISFACTORY |
| Comment                   | Wellhead |  |
| Corrective Action         |          | Date:                                      |
| Type: Pump Jack           | # 1      | Satisfactory/Action Required: SATISFACTORY |
| Comment                   |          |  |
| Corrective Action         |          | Date:                                      |
| Type: Bird Protectors     | # 3      | Satisfactory/Action Required: SATISFACTORY |

|                                   |     |                                    |              |
|-----------------------------------|-----|------------------------------------|--------------|
| Comment                           |     |                                    |              |
| Corrective Action                 |     | Date:                              |              |
| Type: Gas Meter Run               | # 1 | Satisfactory/Action Required:      | SATISFACTORY |
| Comment                           |     |                                    |              |
| 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                           |     | Lube Tank on Secondary Containment |              |
| Corrective Action                 |     | Date:                              |              |
| Type: Flow Line                   | # 1 | Satisfactory/Action Required:      | SATISFACTORY |
| Comment                           |     |                                    |              |
| Corrective Action                 |     | Date:                              |              |
| Type: Horizontal Heated Separator | # 1 | Satisfactory/Action Required:      | SATISFACTORY |
| Comment                           |     |                                    |              |
| Corrective Action                 |     | Date:                              |              |
| Type: Prime Mover                 | # 1 | Satisfactory/Action Required:      | SATISFACTORY |
| Comment                           |     | Natural Gas Motor                  |              |
| Corrective Action                 |     | Date:                              |              |
| Type: Other                       | # 1 | Satisfactory/Action Required:      | SATISFACTORY |
| Comment                           |     | Propane Tank                       |              |
| Corrective Action                 |     | Date:                              |              |

**Facilities:** ☐ New Tank Tank ID: \_\_\_\_\_

| Contents       | # | Capacity | Type             | SE GPS                |
|----------------|---|----------|------------------|-----------------------|
| PRODUCED WATER | 2 | 300 BBLS | HEATED STEEL AST | 37.179670,-107.529080 |

|                    |              |                  |  |
|--------------------|--------------|------------------|--|
| S/AR               | SATISFACTORY | Comment:         |  |
| 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           | Few weeds starting to sprout inside and outside berm. |                 |  |

Venting:

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

**Flaring:**

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

**Predrill**

Location ID: 214681

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: 214681 | Type: WELL | API Number: 067-06285 | 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

Inspector Name: St John, William (Cal)

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? \_\_\_\_\_ P \_\_\_\_\_

Comment: \_\_\_\_\_

Overall Interim Reclamation In Process

**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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Berms            | Pass            | Compaction              | Pass                  | MHSP          | Pass                     |         |
| Compaction       | Pass            | Culverts                | Pass                  |               |                          |         |
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |         |

S/A/V: SATISFACTOR Y \_\_\_\_\_ Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:** ☒ NO SURFACE INDICATION OF PIT