

**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:  
05/23/2016  
Document Number:  
673403199

**FIELD INSPECTION FORM**

|                     |               |               |                       |                          |             |
|---------------------|---------------|---------------|-----------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:       | On-Site Inspection       | 2A Doc Num: |
|                     | <u>222214</u> | <u>312761</u> | <u>Waldron, Emily</u> | <input type="checkbox"/> |             |

Overall Inspection:  
SATISFACTORY w/ CMT or AR

**Operator Information:**

OGCC Operator Number: 6720  
Name of Operator: BAYLESS PRODUCER LLC\* ROBERT L  
Address: 621 17TH ST STE 2300  
City: DENVER State: CO Zip: 80293

- 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         |
|-----------------|-------|-------------------------|-----------------|
| Trujillo, Helen |       | notices@rlbayless.com   | All inspections |
| Neidel, Kris    |       | kris.neidel@state.co.us |                 |

**Compliance Summary:**

QtrQtr: NWNW Sec: 15 Twp: 4N Range: 91W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 09/21/2015 | 673402460 | SI         | PR          | SATISFACTORY                  |          |                | No              |
| 11/22/2013 | 673400137 | PR         | PR          | SATISFACTORY                  | I        |                | No              |
| 05/16/2011 | 200313942 | PR         | PR          | <b>ACTION REQUIRED</b>        |          |                | Yes             |
| 06/09/2003 | 200045163 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 04/25/2000 | 200007266 | PR         | PR          | <b>ACTION REQUIRED</b>        |          | Fail           | Yes             |
| 03/28/1997 | 500154441 |            |             |                               |          |                |                 |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name   | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|-----------------|-------------|-------------------------------------|
| 222214      | WELL | PR     | 06/01/2015  | OW         | 081-05172 | GOV'T-POHLMAN 2 | 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**

| <b>Lease Road:</b> |                              |         |                   |      |
|--------------------|------------------------------|---------|-------------------|------|
| Type               | Satisfactory/Action Required | comment | Corrective Action | Date |
|                    |                              |         |                   |      |

| <b>Signs/Marker:</b> |                              |         |                   |         |
|----------------------|------------------------------|---------|-------------------|---------|
| Type                 | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| WELLHEAD             | SATISFACTORY                 |         |                   |         |

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: \_\_\_\_\_

Comment: 505-326-2659

Corrective Action: \_\_\_\_\_

| <b>Good Housekeeping:</b> |                              |         |                   |         |
|---------------------------|------------------------------|---------|-------------------|---------|
| Type                      | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|                           |                              |         |                   |         |

| <b>Spills:</b> |           |          |   |            |
|----------------|-----------|----------|---|------------|
| Type           | Area      | Volume   | Corrective action   | CA Date    |
|                | Pump Jack | <= 1 bbl | Operator should submit a eForm spill within 72 hours of discovery of spill. Please direct any questions regarding spill or spill reporting to COGCC Environmental staff Kris Neidel (kris.neidel@state.co.us or 970-871-1963). All haul manifest shall be submitted to Environmental for final disposition of soil. | 05/31/2016 |

Multiple Spills and Releases?

| <b>Fencing/:</b> |                              |   |                   |         |
|------------------|------------------------------|---|-------------------|---------|
| Type             | Satisfactory/Action Required | Comment   | Corrective Action | CA Date |
| PUMP JACK        | SATISFACTORY                 | Stained gravel around wellhead. Bucket at wellhead with oily fluid inside and no containment. |                   |         |

| <b>Equipment:</b>        |                                 |                               |              |       |
|--------------------------|---------------------------------|-------------------------------|--------------|-------|
| Type: Deadman # & Marked | #                               | Satisfactory/Action Required: | SATISFACTORY |       |
| Comment                  |                                 |                               |              |       |
| Corrective Action        |                                 |                               |              | Date: |
| Type: Pump Jack          | # 1                             | Satisfactory/Action Required: | SATISFACTORY |       |
| Comment                  | Stained gravel around wellhead. |                               |              |       |
| Corrective Action        |                                 |                               |              | Date: |

| <b>Venting:</b> |    |
|-----------------|----|
| Yes/No          | NO |
| Comment         |    |

| <b>Flaring:</b> |
|-----------------|
|                 |

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

**Predrill**

Location ID: 222214  
 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: 222214 Type: WELL API Number: 081-05172 Status: PR Insp. Status: PR

**Producing Well**

Comment: Pumping.

**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

Inspector Name: Waldron, Emily

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

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

Y

Comment: Bucket at wellhead with oily fluid inside and no containment.  
No apparent soil migration; erosion or soil movement.

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   |
|--------------|-------------------|---|
| 673403221    | Inspection Photos | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3866909">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3866909</a> |