

**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:

05/26/2016

Document Number:

673403217

Overall Inspection:

**ACTION REQUIRED****FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	223186	312987	Waldron, Emily	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 33825Name of Operator: GEOTECH PRODUCTION INCAddress: 7844 S ESPANA WAYCity: AURORA State: CO Zip: 80016-

- ☒ 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
henderson, ralph	(303) 690-0921	hap7844@aol.com	

**Compliance Summary:**QtrQtr: SWNW Sec: 8 Twp: 8N Range: 90W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/02/2015	673401998	PR	PR	<b>ACTION REQUIRED</b>			No
05/02/2013	669300543	PR	PR	<b>ALLEGED VIOLATION</b>	F		Yes
10/08/2001	200023076	PR	PR	<b>ACTION REQUIRED</b>		<b>Fail</b>	Yes
01/13/2000	200005540	PR	PR	SATISFACTORY		Pass	No

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

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
223186	WELL	SI	04/16/2015	GW	081-06548	SPETTER 5-8	SI	<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
Access	<b>ACTION REQUIRED</b>	Lease road is overgrown, rutted and difficult to locate.	Maintain and repair access roads per Rule 604.c.(2)S.	06/27/2016

<b>Signs/Marker:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
BATTERY	<b>ACTION REQUIRED</b>	No battery sign on location.	Install sign to comply with rule 210.	<b>05/07/2015</b>
TANK LABELS/PLACARDS	<b>ACTION REQUIRED</b>	No labels on tank.	Install sign to comply with rule 210.	<b>05/07/2015</b>

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: \_\_\_\_\_

Comment: 303-888-7373

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

<b>Good Housekeeping:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TRASH	<b>ACTION REQUIRED</b>	Pipe risers, fueling hose.	Comply with Rule 603.f using the Rule 603.f guidance document for further details.	06/08/2016
WEEDS	<b>ACTION REQUIRED</b>	Annual and noxious weeds present on location. Noxious weeds (canadian thistle) beginning to migrate off location through erosion disturbance on western perimeter.	Comply with Rule 603.f using the Rule 603.f guidance document for further details.	05/07/2015
UNUSED EQUIPMENT	<b>ACTION REQUIRED</b>	Abandoned pipe risers on west side of location.	Contact the Engineering Integrity department to discuss flowline testing requirements per Rule 1103. Refer to the 1101 and 1102 guidance document for further details.	06/08/2016

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

<b>Fencing/:</b>				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

<b>Equipment:</b>						
Type: Gas Meter Run	# 1	Satisfactory/Action Required:		SATISFACTORY		
Comment						
Corrective Action					Date:	
Type: Bird Protectors	#	Satisfactory/Action Required:		ACTION REQUIRED		

Inspector Name: Waldron, Emily

Comment	No bird protectors apparent.		
Corrective Action	Install wildlife screen per Rule 605.b.(7).		Date: 6/27/2016
Type: Horizontal Heater Treater	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment			
Corrective Action			Date:
Type: Deadman # & Marked	# 4	Satisfactory/Action Required:	ACTION REQUIRED
Comment	Not all deadmen marked.		
Corrective Action	Mark guy line anchors per Rule 604.c.(2)Q.		Date: 6/15/2016

**Facilities:**

☐ New Tank

Tank ID: \_\_\_\_\_

Contents	#	Capacity	Type	SE GPS
	1		STEEL AST	40.669190,-107.522680

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
	Inadequate			Inadequate

Corrective Action	Repair or install berms or other secondary containment devices per Rule 605.a.(4).	Corrective Date	05/07/2015
Comment	No berm present around tank.		

**Venting:**

Yes/No	NO
Comment	

**Flaring:**

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

**Predrill**

Location ID: 223186

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: 223186 Type: WELL API Number: 081-06548 Status: SI Insp. Status: SI

**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: PRODUCTION RECORDS

S/A/V: ACTION

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

CA: Contact COGCC Area Engineer.

Comment: No production reported since December 2014.

**Environmental****Spills/Releases:**

Type of Spill: \_\_\_\_\_ Description: \_\_\_\_\_ Estimated Spill Volume: \_\_\_\_\_

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

Date: \_\_\_\_\_

Inspector Name: Waldron, Emily

Corrective Action: _____		
Reportable: _____	GPS: Lat _____	Long _____
Proximity to Surface Water: _____		Depth to Ground Water: _____
<b><u>Water Well:</u></b>		
DWR Receipt Num: _____	Owner Name: _____	GPS : _____
<b><u>Field Parameters:</u></b>		
Sample Location: _____		
Emission Control Burner (ECB): _____		
Comment: _____		
Pilot: _____	Wildlife Protection Devices (fired vessels): _____	
<b><u>Reclamation - Storm Water - Pit</u></b>		
<b><u>Interim Reclamation:</u></b>		
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		
<u>Cropland</u>		
Top soil replaced _____	Recontoured _____	Perennial forage re-established _____
<u>Non-Cropland</u>		

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: **ACTION REQUIRED**

Corrective Date: **05/07/2015**

Comment: **Erosion occurring along western perimeter.**

CA: **Install or repair required BMPs per Rule 1002.f. Refer to the 1002.f guidance document for further details.**

Pits: ☐ NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
<b>Follow up to inspection from 4/2/2015 document number 673401998. No corrective actions have been met.</b>	waldrone	05/27/2016

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
673403222	Inspection Photos	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3866910">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3866910</a>