

**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:

06/22/2016

Document Number:

679901630

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	213034	324838	Welsh, Brian	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 8005Name of Operator: BERRY ENERGY INC\*WALTERAddress: 1717 WASHINGTON AVECity: GOLDEN State: CO Zip: 80401-

- ☐ 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: SWNE Sec: 35 Twp: 19S Range: 44W

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	668501604	IJ	IJ	SATISFACTORY			No
05/02/2014	668602614	IJ	AC	SATISFACTORY	P		No
04/04/2013	668600601	IJ	AC	SATISFACTORY			No
05/06/2011	200310055	RT	AC	SATISFACTORY			No
04/12/2010	200242420	RT	AC	SATISFACTORY			No
06/17/2009	200213266	RT	AC	SATISFACTORY			No
05/14/2008	200189927	MI	AC	SATISFACTORY			No
05/10/2007	200110560	RT	AC	SATISFACTORY		Pass	No
07/20/2006	200094581	RT	AC	SATISFACTORY		Pass	No
07/26/2005	200074847	RT	AC	SATISFACTORY		Pass	No
07/30/2004	200058106	RT	AC	ACTION REQUIRED		Fail	Yes
05/28/2003	200039867	MI	SI	SATISFACTORY		Pass	No
07/25/2002	200029478	RT	AC	SATISFACTORY		Pass	No
08/21/2001	200019517	MI	AC	ACTION REQUIRED		Fail	Yes
08/28/2000	200009374	RT	AC	SATISFACTORY	I	Pass	No
03/09/2000	200005108	PR	AC	SATISFACTORY	I	Pass	No
01/19/1999	500145149	PR	AC			Pass	No
01/18/1996	500145148	PR	AC			Pass	Yes

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11/10/1994	500145147		AC				
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**Inspector Comment:**

Routine UIC Inspection

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
150112	UIC DISPOSAL	AC	12/20/1984		-	FRAZEE-BOLYARD 2-35	AC	<input type="checkbox"/>
213034	WELL	IJ	05/05/1984	DSPW	061-06395	FRAZEE-BOLYARD 2-35-SWD	AC	<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 Motors: _____	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	Trail through farm ground		

**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Lease sign by wellhead		

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

**Equipment:**

Type:	#	Satisfactory/Action Required:

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Comment	
Corrective Action	Date:

**Venting:**

Yes/No	NO
Comment	

**Flaring:**

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

**Predrill**

Location ID: 213034

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:	213034	Type:	WELL	API Number:	061-06395	Status:	IJ	Insp. Status:	AC
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**Underground Injection Control**

UIC Violation: \_\_\_\_\_

Maximum Injection Pressure: \_\_\_\_\_

**UIC Routine**Inj./Tube: Pressure or inches of Hg -13.5" HG  
(e.g. 30 psig or -30" Hg)Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
Inj Zone: LYNSTC: Pressure or inches of Hg 0 PSIGPrevious Test Pressure \_\_\_\_\_ Last MIT: 04/04/2013

Brhd: Pressure or inches of Hg \_\_\_\_\_

Previous Test Pressure \_\_\_\_\_ AnnMTReq: NOComment: CASING HAD A LIGHT BLOW THAT DIED IMMEDIATELY, TBG IJ @ -13.5" HGMethod of Injection: GRAVITY 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 \_\_\_\_\_

Inspector Name: Welsh, Brian

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	Other	Pass			

Inspector Name: Welsh, Brian

S/A/V: SATISFACTOR

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

Y \_\_\_\_\_

Comment: Location and access are farmed over

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

Pits: ☒ NO SURFACE INDICATION OF PIT