

**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 <input type="checkbox"/>
	213034	324838	Welsh, Brian	2A Doc Num: _____

Operator Information:

OGCC Operator Number: _____	8005
Name of Operator: _____	BERRY ENERGY INC*WALTER
Address: _____	1717 WASHINGTON AVE
City: _____	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: <u>SWNE</u>		Sec: <u>35</u>		Twp: <u>19S</u>		Range: <u>44W</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	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

Inspector Name: Welsh, Brian

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
213034	WELL	IJ	05/05/1984	DSPW	061-06395	FRAZEE-BOLYARD 2-35-SWD	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	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:	<u>213034</u>	Type:	<u>WELL</u>	API Number:	<u>061-06395</u>	Status:	<u>IJ</u>	Insp. Status:	<u>AC</u>
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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: LYNS

TC: Pressure or inches of Hg 0 PSIG

Previous Test Pressure _____ Last MIT: 04/04/2013

Brhd: Pressure or inches of Hg _____

Previous Test Pressure _____ AnnMTRReq: NO

Comment: CASING HAD A LIGHT BLOW THAT DIED IMMEDIATELY, TBG IJ @ -13.5" HG

Method 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 _____

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

Attached Documents

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

Document Num	Description	URL
679901630	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3888193