

Inspector Name: Sherman, Susan

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:

07/05/2016

Document Number:

673713452

Overall Inspection:

SATISFACTORY w/ CMT
or AR

FIELD INSPECTION FORM

Location Identifier Facility ID Loc ID Inspector Name: On-Site Inspection ☐
200628 319643 Sherman, Susan 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 200077

Name of Operator: CHARLES P DUNNING LLC

Address: PO BOX 1365

City: FORT MORGAN State: CO Zip: 80701

☐ 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
DUNNING, CHUCK	303-408-2575	CHUCK.DUNNING@ME.CO M	ALL INSPECTIONS
Arauz, Steven		steven.arauza@state.co.us	COGCC EPS
Montoya, John		john.montoya@state.co.us	COGCC Field Inspector

Compliance Summary:

QtrQtr: SWSW Sec: 34 Twp: 3S Range: 58W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/07/2016	681700115	PR	EI	AR			No
03/12/2015	673900776	PR	PR	ACTION REQUIRED			No
02/17/2015	671103589	PR	PR	ACTION REQUIRED			No
07/31/2008	200194233	PR	TA	SATISFACTORY			No
11/24/2007	200122705	PR	PR	SATISFACTORY			No
10/10/2007	200120298	ES	TA	SATISFACTORY	P		No
10/09/2007	200120293	PR	PR	ACTION REQUIRED			Yes
06/01/2006	200091410	PR	SI	ACTION REQUIRED		Fail	Yes
06/24/2005	200075317	ES	SI	ACTION REQUIRED		Fail	Yes
06/13/2005	200075109	PR	SI	ACTION REQUIRED		Fail	Yes
06/26/2003	200040690	PR	SI	SATISFACTORY		Pass	No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
200628	WELL	PR	06/25/2012	OW	001-06031	JOLLY-PLATTS 1	PR	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

Inspector Name: Sherman, Susan

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

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
BATTERY	SATISFACTORY			
CONTAINERS	SATISFACTORY			
WELLHEAD	SATISFACTORY	on engine shed		

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: 303-408-2575

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
DEBRIS		Pile of broken up asphalt at gate to tank battery (see attached photo)		

Spills:

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

☐ Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
PUMP JACK	SATISFACTORY	steel panels		
LOCATION	SATISFACTORY	barbed wire/cattle guards		

Equipment:

Type: Bird Protectors	# 4	Satisfactory/Action Required:	SATISFACTORY
Comment	ECD and VHTs		
Corrective Action	Date: _____		
Type: Deadman # & Marked	# 4	Satisfactory/Action Required:	SATISFACTORY

Comment			
Corrective Action		Date:	
Type: Pump Jack	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment		shed, day tank needs label and secondary containment	
Corrective Action		Date:	
Type: Ancillary equipment	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment		gas scrubber at well shed, propane tank west of VHTs, chemical container at wellhead	
Corrective Action		Date:	
Type: Vertical Heater Treater	# 3	Satisfactory/Action Required:	SATISFACTORY
Comment		3 sheds, two with pilots on, one without pilot on, one VHT in metal berms-GPS 39.74057, -103.86684, two VHTs in metal berms-GPS 39.74068, -103.86684	
Corrective Action		Date:	
Type: Emission Control Device	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment		on concrete pad, GPS 39.74067, -103.86683, pilot on, solar panel	
Corrective Action		Date:	
Type: Prime Mover	# 1	Satisfactory/Action Required:	SATISFACTORY
Comment		gas engine	
Corrective Action		Date:	

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	PBV FIBERGLASS	39.740650,-103.867200

S/AR SATISFACTORY

Comment:

Corrective Action:

Corrective Date:

Paint

Condition

Other (Content)

Other (Capacity) 140 BBLs

Other (Type)

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient		Adequate

Corrective Action

Corrective Date

Comment

metal berms on three sides, east side is pit wall, liner under tank was not determined at time of inspection

Facilities:☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	6	300 BBLs	STEEL AST	39.740570,-103.866550

S/AR SATISFACTORY

Comment: 1 enardo valve

Corrective Action:

Corrective Date:

Paint

Inspector Name: Sherman, Susan

Condition	Adequate				
Other (Content)					
Other (Capacity)					
Other (Type)					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient		Adequate	
Corrective Action				Corrective Date	
Comment	Liner under tanks could not be determined at time of inspection.				

Venting:	
Yes/No	YES
Comment	ECD

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

Predrill

Location ID: 200628

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: 200628

Type: WELL

API Number: 001-06031

Status: PR

Insp. Status: PR

Producing Well

Comment: Apr 2016 reported to COGCC database.

Idle WellPurpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: _____

S/A/V: SATISFACTORY

CA Date: _____

CA: _____

Comment: _____

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Inspector Name: Sherman, Susan

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: dryland

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? Pass

CM _____

CA _____ CA Date _____

Guy line anchors marked? Pass

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 _____

Inspector Name: Sherman, Susan

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
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass	MHSP	Pass	

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

Pit Type: Produced Water Lined: NO Pit ID: Lat: 39.263520 Long: -103.693040

Lining:

Liner Type: Liner Condition:

Comment:

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment:

Netting:

Netting Type: Netting Condition:

Comment:

Anchor Trench Present: Oil Accumulation: YES 2+ feet Freeboard:

Pit (S/A/V): ACTION Comment: Eastern most pit, ~85'x75'. Oil drops in microbial material on SE corner of pit. Contacted operator the afternoon of 7/5/2016. He will get the oil off within 24 hours. Only 1 pit permitted for this location, #114037, permits for other 3 pits are in process per COGCC EPS. Pit #438432 was closed on 8/4/2014 and was for the skim pit.

Corrective Action: Remove free oil from pit within 24 hours of contact with inspector. Date: 07/07/2016

Pit Type: Produced Water Lined: NO Pit ID: Lat: 39.740800 Long: -103.867270

Lining:

Liner Type: Liner Condition:

Comment:

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment:

Netting:

Netting Type: Netting Condition:

Comment:

Anchor Trench Present: Oil Accumulation: NO 2+ feet Freeboard:

Pit (S/A/V): SATISFACTOR Comment: North central pit, ~100'x100'. Close to only 2' freeboard on old berm, new berm was constructed to raise freeboard (see attached photo).

Corrective Action: Date:

Pit Type: Produced Water Lined: NO Pit ID: Lat: 39.405500 Long: -103.868060

Lining:

Liner Type: Liner Condition:

Comment:

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment:

Netting:

Netting Type: Netting Condition:

Comment:

Anchor Trench Present: Oil Accumulation: NO 2+ feet Freeboard:

Pit (S/A/V): Comment: Western most pit, ~120'x200'. New earth work on pit, not much water in pit (see attached photos). Two culverts at bottom of pit (see attached photo). Drainage going north on NW corner of location near pit (see attached photo).

Corrective Action: Date:

Inspector Name: Sherman, Susan

Pit Type: Produced Water Lined: NO Pit ID: _____ Lat: 39.740520 Long: -103.867680

Lining:

Liner Type: _____ Liner Condition: _____

Comment: _____

Fencing:

Fencing Type: Livestock Fencing Condition: Adequate

Comment: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment: Middle, southern pit, ~100'x100'.

Anchor Trench Present: _____ Oil Accumulation: NO 2+ feet Freeboard: _____

Pit (S/A/V): SATISFACTOR Comment: _____

Corrective Action: _____ Date: _____

COGCC Comments

Comment	User	Date
Previous inspection from 4/7/2016, FIR #681700115: Operator required to submit Form 42 for disposal of oily waste, Form 15 Pit Report and Form 27 Sensitive Area Determination by 5/14/2016.	ShermaSe	07/05/2016

Attached Documents

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

Document Num	Description	URL
673713458	Dunning Jolly-Platts 1	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3894765