

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:
05/13/2016
Document Number:
677800007
Overall Inspection:
SATISFACTORY w/ CMT or AR

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>216916</u>	<u>307124</u>	<u>BURN, DIANA</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>10379</u>
Name of Operator:	<u>HARBURG* RUDOLPH W</u>
Address:	<u>1020 MAPLETON AVE</u>
City:	<u>BOULDER</u> State: <u>CO</u> Zip: <u>80304</u>

- 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
Rudy Harburg	(303) 931-8099	rudy.harburg@gmail.com	

Compliance Summary:

QtrQtr: SWSE Sec: 25 Twp: 5N Range: 69W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/28/2016	674004029	PR	SI	SC			No
05/04/2015	674002236	PR	PR	ACTION REQUIRED			No
01/14/2010	200230354	PR	PR	SATISFACTORY			No
10/09/2008	200201357	PR	PR	ACTION REQUIRED			Yes
02/20/2008	200201422	PR	PR				
11/09/2007	200121619	PR	PR	ACTION REQUIRED			Yes
03/11/1996	500151123	PR	SI			Fail	Yes

Inspector Comment:

Gas is required to be metered and reported on the Monthly Report of Operations, Form 7. Gas analysis should be conducted annually and reported on the Form 7. This well's reporting should be corrected for gas production back to April 2008. Operator should also give location of generator fueled by this well. The current reporting for this well is listing formations other than the Niobrara - if the well has other completions, there should be a Form 5A, Completed Interval Report submitted with supporting documentation - otherwise, production reporting needs to be corrected to reflect Niobrara only production. Tank should be properly vented and painted. Concrete vault cover (1) does not fully cover opening - potential entry point for animals. All separation equipment on this well appears to be disconnected at time of inspection. (unused separator also on site) Leaks should be repaired and all spills/stains be remediated.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
216916	WELL	PR	01/01/2013	GW	069-06103	WESTWARD 2	PR

Equipment:

Location Inventory

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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			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY	battery sign incomplete for public road		

Emergency Contact Number (S/AR): _____ Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
UNUSED EQUIPMENT		additional separator onsite		

Spills:

Type	Area	Volume	Corrective action	CA Date
Crude Oil	Separator	<= 1 bbl	clean up/remediate all leaks in treater shed	08/22/2016

Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Equipment:

Type: Gas Meter Run	#	Satisfactory/Action Required:	
Comment	disconnected or non-functional		
Corrective Action		Date:	
Type: Vertical Heated Separator	#	Satisfactory/Action Required:	ACTION REQUIRED
Comment	disconnected		
Corrective Action	leaks should be repaired or separator replaced		Date: 8/22/2016

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS

CRUDE OIL	1	300 BBLS	STEEL AST	
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S/AR	Comment:
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Corrective Action:	tank should be painted - visible from public highway; tank should be properly vented - only vent is currently the thief hatch	Corrective Date:	12/22/2016
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Paint

Condition	Inadequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth				Adequate

Corrective Action		Corrective Date	
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Comment	berm capacity should be verified to assure capacity of 300 bbl + precipitation
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Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<50 BBLS	CONCRETE SUMP/VAULT	,

S/AR	Comment:	one cover does not provide full coverage of opening - potential animal access, condensate on produced water in vault
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Corrective Action:	cover should be repaired or opening screened to prevent animal access.	Corrective Date:	08/22/2016
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Paint

Condition	
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Corrective Action		Corrective Date	
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Comment	
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Venting:

Yes/No	
Comment	

Flaring:

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

Predrill

Location ID: 216916

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: 0 Type: _____ API Number: - Status: _____ Insp. Status: _____

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? _____

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

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: _____ Corrective Date: _____

Comment: _____

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
677800008	Westward #2 photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3912611