

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:
08/02/2016
Document Number:
680101013
Overall Inspection:
ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>229999</u>	<u>314974</u>	<u>Colby, Lou</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>62340</u>
Name of Operator:	<u>NATIONAL FUEL CORPORATION</u>
Address:	<u>8400 EAST PRENTICE AVE #735</u>
City:	<u>GREENWOOD</u> State: <u>CO</u> Zip: <u>80111-</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
Ramos, Martha		martha.ramos@state.co.us	
Busch, Andy		abusch@national-fuel.com	

Compliance Summary:

QtrQtr: SWNW Sec: 33 Twp: 4S Range: 102W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
04/14/2016	674300685	PA	PA	SATISFACTORY			No
11/05/2001	200023550	ID	TA	SATISFACTORY		Pass	No
07/19/1999	500157148	PR	TA				
11/22/1994	500157147	PR	PR			Pass	No

Inspector Comment:

This is a Final Reclamation Inspection prompted by Bond Release Request for PA Well API#103-07658, a Fee/Fee Location, Spud10/17/1974, Plugged and Abandoned 8/21/2009.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
109524	PIT		09/23/1999		-	KIRBY-EIDSON 1-A	<input type="checkbox"/>
119439	PIT	AC	02/05/2016		-	Hunter Canyon Federal #8 119439	<input type="checkbox"/>
119467	PIT	CL	09/23/1999		-	KIRBY 1-A	<input type="checkbox"/>
229999	WELL	PA	08/21/2009	DA	103-07658	KIRBY-EIDSON 1-A	<input checked="" type="checkbox"/>

Equipment:

Location Inventory

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Inspector Name: Colby, Lou

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

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

Comment: _____

Corrective Action: _____

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

Venting:	
Yes/No	_____
Comment	_____

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

Predrill

Location ID: 229999

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: 229999 Type: WELL API Number: 103-07658 Status: PA Insp. Status: RI

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:

Inspector Name: Colby, Lou

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: **Range Land**

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed **Fail** No disturbance /Location never built _____

Access Roads Regraded Pass Contoured Pass Culverts removed Pass

Gravel removed Pass

Location and associated production facilities reclaimed **Fail** Locations, facilities, roads, recontoured Pass

Compaction alleviation Pass Dust and erosion control Pass

Non cropland: Revegetated 80% Pass Cropland: perennial forage _____

Weeds present Pass Subsidence Pass

Comment: **Associated Facilities risers, flowlines, concrete debris have not been cutoff, buried, or removed from Location. Refer to photos attached for Detail.**

Corrective Action: **Remove Debris from Location, Reclaim Associated Facilities (cut off, bury, remove as appropriate). Identify to Inspector if specific Facilities are servicing other Active Locations.** Date **09/12/2016**

Overall Final Reclamation **Fail** 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
680101013	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3925939
680101014	Inspection Photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3925938