

**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:

08/25/2016

Document Number:

673803629

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	333296	333296	Gomez, Jason	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10110Name of Operator: GREAT WESTERN OPERATING COMPANY LLCAddress: 1801 BROADWAY #500City: DENVER State: CO Zip: 80202

- ☐ 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
Donato, Scot	303-549-7739	sdonato@gwogco.com	EHS

Compliance Summary:QtrQtr: SENW Sec: 27 Twp: 6N Range: 67W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
298384	WELL	PR	02/17/2010	GW	123-29046	GREAT WESTERN 27-52	PR	<input checked="" type="checkbox"/>
298385	WELL	PR	02/07/2010	GW	123-29047	GREAT WESTERN 27-12	PR	<input checked="" type="checkbox"/>
298386	WELL	PR	12/15/2014	GW	123-29048	GREAT WESTERN 27-21	PR	<input checked="" type="checkbox"/>
298387	WELL	PR	02/05/2010	GW	123-29049	GREAT WESTERN 27-11	PR	<input checked="" type="checkbox"/>
298388	WELL	PR	02/10/2010	GW	123-29050	GREAT WESTERN 27-22	PR	<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 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

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY			
WELLHEAD	SATISFACTORY			
WELLHEAD	SATISFACTORY			
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

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
WELLHEAD	SATISFACTORY	6' chain link		
WELLHEAD	SATISFACTORY	6' chain link		
WELLHEAD	SATISFACTORY	6' chain link		
WELLHEAD	SATISFACTORY	6' chain link		
WELLHEAD	SATISFACTORY	6' chain link		

Equipment:					
Type: Horizontal Heated Separator	# 2		Satisfactory/Action Required:	SATISFACTORY	
Comment					
Corrective Action					Date:
Type: Plunger Lift	# 4		Satisfactory/Action Required:	SATISFACTORY	
Comment					
Corrective Action					Date:
Type: Bird Protectors	# 4		Satisfactory/Action Required:	SATISFACTORY	
Comment					
Corrective Action					Date:
Type: Gas Meter Run	# 2		Satisfactory/Action Required:	SATISFACTORY	
Comment					
Corrective Action					Date:
Type: Plunger Lift	# 1		Satisfactory/Action Required:	ACTION REQUIRED	
Comment	Leak on master valve approx 4'x3' stained soil				

Inspector Name: Gomez, Jason

Corrective Action	Repair leak and remove or remediate stained soil/"Securely fasten all valves, pipes, and fittings to ensure good mechanical condition per Rule 605.d."		Date: 9/30/2016
Type: Emission Control Device	# 2	Satisfactory/Action Required: SATISFACTORY	
Comment			
Corrective Action			Date:

Tanks and Berms:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	OTHER	PBV FIBERGLASS	40.458040,-104.881520

S/AR	SATISFACTORY	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment	
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Tanks and Berms:

☐ New Tank

Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	3	300 BBLS	STEEL AST	40.458040,-104.881520

S/AR	SATISFACTORY	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Corrective Action		Corrective Date	
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Comment	
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Venting:

Yes/No	NO
Comment	

Flaring:

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

Predrill

Location ID: 333296

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: 298384 Type: WELL API Number: 123-29046 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: PLUMBED TO SURFACE

CA: _____

CA Date: _____

Inspector Name: Gomez, Jason

Facility ID: 298385 Type: WELL API Number: 123-29047 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: PLUMBED TO SURFACE

CA:

CA Date:

Facility ID: 298386 Type: WELL API Number: 123-29048 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: PLUMBED TO SURFACE

CA:

CA Date:

Facility ID: 298387 Type: WELL API Number: 123-29049 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: PLUMBED TO SURFACE

CA:

CA Date:

Facility ID: 298388 Type: WELL API Number: 123-29050 Status: PR Insp. Status: PR

Producing Well

Comment: PR

BradenHead

Comment: PLUMBED TO SURFACE

CA:

CA Date:

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:

Inspector Name: Gomez, Jason

Sample Location: _____

Emission Control Burner (ECB): Y _____

Comment: _____

Pilot: ON _____ Wildlife Protection Devices (fired vessels): YES _____

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? Pass _____ Production areas stabilized? Pass _____

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? Pass _____ Segregated soils have been replaced? Pass _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced Pass _____ Recontoured Pass _____ 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: _____

Inspector Name: Gomez, Jason

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					

S/A/V: SATISFACTORY

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
673803629	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3939215
673803630	STAINED SOIL	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3939201