

**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:  
09/09/2016  
Document Number:  
668004776  
Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                    |                          |             |
|---------------------|---------------|---------------|--------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:    | On-Site Inspection       | 2A Doc Num: |
|                     | <u>210065</u> | <u>322250</u> | <u>DURAN, JOHN</u> | <input type="checkbox"/> |             |

**Operator Information:**

OGCC Operator Number: 44390  
Name of Operator: JAVERNICK OIL  
Address: 3040 E MAIN  
City: CANON CITY State: CO Zip: 81212

- 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         |
|------------------|-----------------------------------|------------------------|-----------------|
| Mehennett, Tom   | (719) 275-3040/<br>(505) 330-1328 | tbm3040@gmail.com      | All Inspections |
| Javernick, James | 719-275-3040/719-671-3787         | javernick1@gmail.com   | All Inspections |
| Costa, Ryan      |                                   | ryan.costa@state.co.us |                 |

**Compliance Summary:**

QtrQtr: SENW Sec: 29 Twp: 19S Range: 69W

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 08/23/2016 | 668004728 | SI         | SI          | SC                            |          |                | No              |
| 08/18/2016 | 668004725 | SI         | SI          | SC                            |          |                | No              |
| 08/17/2016 | 668004716 | SI         | SI          | SC                            |          |                | No              |
| 01/29/2016 | 668004126 | SI         | SI          | AR                            |          |                | No              |
| 03/19/2013 | 668200435 | PR         | SI          | SATISFACTORY                  | Pass     |                | No              |
| 01/06/2011 | 200292015 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 10/28/2010 | 200282742 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 05/11/2010 | 200248717 | PR         | SI          | SATISFACTORY                  |          |                | No              |
| 03/18/2010 | 200238454 | PR         | PR          | <b>ACTION REQUIRED</b>        |          |                | Yes             |
| 08/26/2009 | 200218410 | PR         | PR          | SATISFACTORY                  |          |                | No              |
| 09/15/2006 | 200097474 | PR         | PR          | SATISFACTORY                  |          | Pass           | No              |
| 10/21/1998 | 500141852 | PR         | PR          |                               |          | Fail           | Yes             |
| 11/11/1996 | 500141851 | PR         | SI          |                               |          | Pass           | No              |
| 06/25/1996 | 500141850 | ID         | TA          |                               |          | Fail           | Yes             |
| 02/25/1994 | 500141849 |            | PR          |                               |          |                |                 |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name            | Insp Status |                                     |
|-------------|------|--------|-------------|------------|-----------|--------------------------|-------------|-------------------------------------|
| 210065      | WELL | SI     | 01/26/2015  | OW         | 043-40001 | CHEROKEE & PITTSBURG 464 | PA          | <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 |
|----------------------|------------------------------|---------|-------------------|---------|
| TANK LABELS/PLACARDS | SATISFACTORY                 |         |                   |         |
| WELLHEAD             | 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? |      |        |                   |         |

**Equipment:**

|                           |                   |                                            |
|---------------------------|-------------------|--------------------------------------------|
| Type: Ancillary equipment | # 0               | Satisfactory/Action Required: SATISFACTORY |
| Comment                   | Wellhead is gone. |                                            |
| Corrective Action         | Date:             |                                            |

**Tanks and Berms:**

New Tank Tank ID: \_\_\_\_\_

| Contents           | #            | Capacity | Type                                    | SE GPS           |
|--------------------|--------------|----------|-----------------------------------------|------------------|
| CRUDE OIL          | 2            | 100 BBLs | STEEL AST                               | ,                |
| S/AR               | SATISFACTORY |          | Comment: Tanks are 95% empty(residual). |                  |
| Corrective Action: |              |          |                                         | Corrective Date: |

Paint

|                  |          |
|------------------|----------|
| Condition        | Adequate |
| Other (Content)  | _____    |
| Other (Capacity) | _____    |
| Other (Type)     | _____    |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|------|----------|---------------------|---------------------|-------------|
|      |          |                     |                     |             |

Inspector Name: DURAN, JOHN

|                   |          |                 |                |          |                 |
|-------------------|----------|-----------------|----------------|----------|-----------------|
| Earth             | Adequate | Walls Sufficent | Base Sufficent | Adequate |                 |
| Corrective Action |          |                 |                |          | Corrective Date |
| Comment           |          |                 |                |          |                 |

**Venting:**

|         |  |
|---------|--|
| Yes/No  |  |
| Comment |  |

**Flaring:**

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

**Predrill**

Location ID: 210065

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**

**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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |         |

S/A/V: SATISFACTORY Corrective Date: \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

| Comment                                                             | User   | Date       |
|---------------------------------------------------------------------|--------|------------|
| CSG was cut 4 ft below surface and plate welded on top on (9/8/16). | duranj | 09/13/2016 |