

**FORM  
INSP**Rev  
X/15**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:

09/22/2016

Submitted Date:

09/22/2016

Document Number:

685301476**FIELD INSPECTION FORM**Loc ID 325488 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10000Name of Operator: BP AMERICA PRODUCTION COMPANYAddress: 380 AIRPORT RDCity: DURANGO State: CO Zip: 81303**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name     | Phone        | Email                       | Comment               |
|------------------|--------------|-----------------------------|-----------------------|
| Labowskie, Steve |              | steve.labowskie@state.co.us | COGCC                 |
| Inspections, All |              | SanJuanCOGCC@bp.com         | SW Inspection Reports |
| Beebe, Sabre     | 970-375-7530 | Sabre.Beebe@bp.com          | SW Inspection Reports |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name     | Insp Status |
|-------------|------|--------|-------------|------------|-----------|-------------------|-------------|
| 214877      | WELL | PR     | 01/25/1988  | GW         | 067-06481 | PINE RIVER 3-31 1 | PR          |

**General Comment:**

**Location**

|                    |        |       |  |
|--------------------|--------|-------|--|
| <b>Lease Road:</b> |        |       |  |
| Type               | Access |       |  |
| comment:           |        |       |  |
| Corrective Action  | L      | Date: |  |

Overall Good: ☐

|                      |                      |       |  |
|----------------------|----------------------|-------|--|
| <b>Signs/Marker:</b> |                      |       |  |
| Type                 | CONTAINERS           |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | TANK LABELS/PLACARDS |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | WELLHEAD             |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | DRILLING/RECOMP      |       |  |
| Comment:             | Workover             |       |  |
| Corrective Action:   |                      | Date: |  |

|                           |  |             |
|---------------------------|--|-------------|
| Emergency Contact Number: |  |             |
| Comment:                  |  |             |
| Corrective Action:        |  | Date: _____ |

|                           |   |       |
|---------------------------|---|-------|
| <b>Good Housekeeping:</b> |   |       |
| Type                      | OTHER   |       |
| Comment:                  | Equipment and supplies organized and orderly. |       |
| Corrective Action:        |   | Date: |

Overall Good: ☐

|  |      |        |  |
|--|------|--------|--|
| <b>Spills:</b>   |      |        |  |
| Type   | Area | Volume |  |
| In Containment:  | No   |        |  |
| Comment:   |      |        |  |
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |  |

|                           |          |       |                 |
|---------------------------|----------|-------|-----------------|
| <b>Equipment:</b>         |          |       | corrective date |
| Type: Ancillary equipment | # 1      |       |                 |
| Comment:                  | Wellhead |       |                 |
| Corrective Action:        |          | Date: |                 |

|                 |    |  |
|-----------------|----|--|
| <b>Venting:</b> |    |  |
| Yes/No          | NO |  |
| Comment:        |    |  |

|                    |  |       |  |
|--------------------|--|-------|--|
| Corrective Action: |  | Date: |  |
| <b>Flaring:</b>    |  |       |  |
| Type               |  |       |  |
| Comment:           |  |       |  |
| Corrective Action: |  | Date: |  |

| Inspected Facilities  |        |       |      |             |           |         |    |               |    |
|---|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:  | 214877 | Type: | WELL | API Number: | 067-06481 | Status: | PR | Insp. Status: | PR |
| Workover  |        |       |      |             |           |         |    |               |    |
| Comment: Key Energy Rig #677 on location for rods and well clean out. |        |       |      |             |           |         |    |               |    |
| Corrective Action:  |        |       |      |             |           |         |    |               |    |
| Date:   |        |       |      |             |           |         |    |               |    |

Reclamation - Storm Water - Pit

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs                          | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|--|--------------------------|---------|
| Gravel           | Pass            |                         |                       |  |                          |         |
| Berms            | Pass            | Compaction              | Pass                  | Material Handling And Spill Prevention | Pass                     |         |
| Compaction       | Pass            | Gravel                  | Pass                  |  |                          |         |

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT