

**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:

09/26/2016

Submitted Date:

09/26/2016

Document Number:

685500960**FIELD INSPECTION FORM**

Loc ID Inspector Name: On-Site Inspection ☐
 319962 MONTOYA, JOHN 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10548Name of Operator: HRM RESOURCES II LLCAddress: 410 17TH STREET #1600City: DENVER State: CO Zip: 80202**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**9 Number of Comments2 Number of Corrective Actions☒ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Pape, Terry	303-893-6621	tpape@hrmres.com	All Inspections
OLSON, JUSTIN	030-910-4717	justin.olson@hrmres.com	engineering

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
202013	WELL	PR	03/21/1980	OW	001-07417	KIOWA-FRICK 1-12	PR

General Comment:

Location

Lease Road:			
Type	Main		
comment:			
Corrective Action	L	Date:	

Overall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: EMERGENCY CONTACT NUMBER OK

Corrective Action:

Date: _____

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Plunger Lift	#		
Comment:			
Corrective Action:		Date:	
Type: Deadman # & Marked	#		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:		Date:	
Type: Emission Control Device	#		
Comment:	SE CORNER N39.79827 W-104.26482		
Corrective Action:		Date:	

Type: Progressive Cavity	#		
Comment:	SE CORNER N39.79827 W-104.26582		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	100 BBLS	PBV PLASTIC		39.798320,-104.265810
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Insufficient	Base Insufficient	Inadequate
Comment:	BERMS WILL NOT HOLD CAPACITY OF WATER TANK			
Corrective Action:	berms rule 604© B			Date: 10/24/2016

Contents	#	Capacity	Type	Tanak ID	SE GPS
CRUDE OIL	2	300 BBLS	STEEL AST		39.798110,-104.266260
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)		
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Insufficient	Base Insufficient	Inadequate
Comment:	REPAIR BERMS			
Corrective Action:	berms rule 604© B			Date: 10/24/2016

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type	Ignitor/Combustor	
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Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	202013	Type:	WELL	API Number:	001-07417	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR								
Corrective Action:				Date:					

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND SEGREGATION _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____ Pass _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? _____ P _____

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? _____ Pass _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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 REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____ Date _____

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 _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

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			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
INTERMITTER CONTROLLER ON WELLHEAD	montoyaj	09/26/2016

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
685500961	BATTERY SIGN	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962477
685500962	CONTROL WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962478
685500963	CONTROL WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962479
685500964	REPAIR BERMS AND WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962480
685500965	REPAIR BERMS AND CONTROL WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962481
685500966	BERMS AND WEEDS NEED CONTROLLED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962482
685500967	BERMS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3962483