

**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:

10/12/2016

Submitted Date:

10/12/2016

Document Number:

681901535**FIELD INSPECTION FORM**

Loc ID _____ Inspector Name: _____ On-Site Inspection ☐
322909 _____ HELGELAND, GARY _____ 2A Doc Num: _____

Operator Information:OGCC Operator Number: 10633Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLCAddress: 370 17TH STREET #2170City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:12 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
,		Cogcc.inspections@crestone pr.com	ALL INSPECTIONS

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
244457	WELL	PR	06/12/1985	OW	123-12252	ROSS F UNIT 1	PR

General Comment:

LocationOverall Good: ☐**Signs/Marker:**

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

Emergency Contact Number:

Comment:		Date: _____
Corrective Action:		

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Fencing/:**

Type	WELLHEAD		
Comment:	Barbed wire topped chain link SATISFACTORY		
Corrective Action:		Date:	

Equipment:

			corrective date
Type: Horizontal Heated Separator	# 1		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Type: Emission Control Device	# 1		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Type: Plunger Lift	# 3		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Type: Bird Protectors	# 2		

Comment:	SATISFACTORY		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS	
CRUDE OIL	1	300 BBLS	STEEL AST		40.128328,-105.052192	
Comment:						
Corrective Action:						Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficent	Base Sufficent	Adequate	
Comment:					
Corrective Action:					Date:

Contents	#	Capacity	Type	Tanak ID	SE GPS	
PRODUCED WATER	1	OTHER	PBV FIBERGLASS		,	
Comment:						
Corrective Action:						Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	150 BBL	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment:					
Corrective Action:					Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities									
Facility ID:	244457	Type:	WELL	API Number:	123-12252	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR								
Corrective Action:						Date:			
BradenHead									
Comment:	Bradenhead is plumed to surface.								
Corrective Action:						Date:			

Environmental	
Spill/Remediation:	
Comment:	
Corrective Action:	Date:
Emission Control Burner (ECB): YES	
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: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND
SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

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? Pass

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? _____ 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? _____**RESTORATION AND REVEGETATION**CroplandTop soil replaced Pass Recontoured Pass Perennial forage re-established InNon-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 In Process**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