

**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:

10/14/2016

Submitted Date:

10/14/2016

Document Number:

685301597

FIELD INSPECTION FORM

Loc ID 326580 Inspector Name: St John, William (Cal) On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

OGCC Operator Number: 10000
Name of Operator: BP AMERICA PRODUCTION COMPANY
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

Findings:

- 8 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

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

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
258261	WELL	PR	02/01/2001	GW	067-08344	MCMAHAN 2	PR

General Comment:

(This area is intentionally left blank for general comments.)

Location

Lease Road:			
Type	Access		
comment:			
Corrective Action			Date:

Overall Good:

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

Emergency Contact Number:

Comment:			
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:
Type	SEPARATOR		
Comment:	Panel - Includes Gas Meter Run		
Corrective Action:			Date:
Type	TANK BATTERY		
Comment:	Panel		
Corrective Action:			Date:

Equipment:			corrective date
Type: Compressor	# 1		
Comment:			
Corrective Action:			Date:
Type: Flow Line	# 1		
Comment:			
Corrective Action:			Date:

Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment:	Wellhead		
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment:	Telemetry Equipment		
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:			Date:
Type: Vertical Heated Separator	# 1		
Comment:			
Corrective Action:			Date:

Tanks and Berms:

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

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	21 BBLS	
Other (Type)		

Berms

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

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		
		Date:

Flaring:

Type	
Comment:	

Corrective Action:

Date:

Inspected Facilities

Facility ID: 258261 Type: WELL API Number: 067-08344 Status: PR Insp. Status: PR

Producing Well

Comment: PR

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
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	
Gravel	Pass	Compaction	Pass			
		Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT