

**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:
10/28/2016
Submitted Date:
11/01/2016
Document Number:
673714274

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: _____ On-Site Inspection
320747 _____ Sherman, Susan _____ 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: 10362
Name of Operator: S & D LLC
Address: 7119 SILVER MOON LANE
City: FORT COLLINS State: CO Zip: 80525

Findings:

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

Contact Information:

Contact Name	Phone	Email	Comment
Kissler, David	(303) 618-6949	watkinsgrainllc@netecin.net	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
204779	WELL	PR	05/09/1984	GW	005-06864	KISSLER DAN 2-10	PR

General Comment:

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

Location

Overall Good:

Signs/Marker:

Type	BATTERY		
Comment:			
Corrective Action:		Date:	
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:	steel panels		
Corrective Action:		Date:	

Equipment:

Type			corrective date
Type: Deadman # & Marked	# 1		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 1		
Comment:	solar panel, motor valve		
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	solar panel, radio telemetry		
Corrective Action:		Date:	
Type: Bird Protectors	# 1		

Comment: on separator		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
PRODUCED WATER	1	100 BBLS	FIBERGLASS AST		,
Comment: tank anchored					
Corrective Action:					Date:

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment: same berms as crude oil tank				
Corrective Action:				Date:

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

Paint

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

Berms

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

Venting:

Yes/No		
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Location Construction

Location ID: 204779

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____ CDP: _____

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:

Comment: No COAs.

Corrective Action: _____ **Date:** _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____ **Date:** _____

Comment: _____

Corrective Action: _____ **Date:** _____

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:

Inspected Facilities

Facility ID: 204779 Type: WELL API Number: 005-06864 Status: PR Insp. Status: PR

Producing Well

Comment: PR. Apr 2016 reported to COGCC database.

Corrective Action:

Date:

Flowline

#1	Type: Well Site	of Lines
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Flowline Description

Flowline Type: Well Site Size: Material:
 Variance: Age: Contents:

Integrity Summary

Failures: Spills: Repairs Made:
 Coatings: H2S: Cathodic Protection:

Pressure Testing

Witnessed: Test Result: Charted:

COGCC Rules(check all that apply)

1101. Installation and Reclamation 1102. Operations, Maintenance, and Repair 1103. Abandonment

Comment: 26 psi

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 _____

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? _____

Comment

Corrective Action

Date _____

Unused or unneeded equipment onsite? _____

Comment

Corrective Action

Date _____

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

Comment

Corrective Action

Date _____

Guy line anchors marked? _____

Comment

Corrective Action

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 _____

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
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
673714309	S&D LLC, Kissler Dan 2-10	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3989398