

**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:

10/28/2016

Document Number:

681901646**FIELD INSPECTION FORM**
 Loc ID 321516 Inspector Name: HELGELAND, GARY On-Site Inspection ☐ 2A Doc Num: _____
Operator Information:OGCC Operator Number: 10383Name of Operator: SOVEREIGN OPERATING COMPANY LLCAddress: 475 17TH STREET #1200City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Crane, Rocky	(719) 529-0682	rockycrane@yahoo.com	All inspections Baca County

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
430018	WELL	XX	08/20/2014	LO	014-20716	WEBBER 13-3	XX
430287	WELL	XX	09/19/2014	LO	014-20734	WEBBER 14-3	XX
430288	WELL	XX	09/19/2014	LO	014-20735	WEBBER 23-3	XX
430289	WELL	XX	09/19/2014	LO	014-20736	WEBBER 3C	XX

General Comment:[WELL HAS NOT BEEN STAKED FOR DRILLING. EXTRACTION WELL AND PRODUCTION FACILITY AT THIS LOCATION.](#)

Inspected Facilities

Facility ID: 430018 Type: WELL API Number: 014-20716 Status: XX Insp. Status: XX

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: WELL HAS NOT BEEN STAKED FOR DRILLING. EXTRACTION WELL AND PRODUCTION FACILITY AT THIS LOCATION.

Corrective Action: _____ Date: _____

Facility ID: 430287 Type: WELL API Number: 014-20734 Status: XX Insp. Status: XX

Producing Well

Comment: _____
 Corrective Action: _____ Date: _____

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
 Multi-Well: _____ Disposal Location: _____

Comment: WELL HAS NOT BEEN STAKED FOR DRILLING. EXTRACTION WELL AND PRODUCTION FACILITY AT THIS LOCATION.

Corrective Action: _____ Date: _____

Facility ID: 430288 Type: WELL API Number: 014-20735 Status: XX Insp. Status: XX

Producing Well

Comment: _____
 Corrective Action: _____ Date: _____

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
 Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
 Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

**Drill Fluids
Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
Multi-Well: _____ Disposal Location: _____

Comment: WELL HAS NOT BEEN STAKED FOR DRILLING. EXTRACTION WELL AND
PRODUCTION FACILITY AT THIS LOCATION.

Corrective Action: _____ Date: _____

Facility ID: 430289 Type: WELL API Number: 014-20736 Status: XX Insp. Status: XX

Producing Well

Comment: _____

Corrective Action: _____ Date: _____

Well Drilling

Rig: Rig Name: _____ Pusher/Rig Manager: _____
Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: _____ Blind Ram: _____ Hydril Type: _____
Pressure Test BOP: _____ Test Pressure PSI: _____ Safety Plan: _____

**Drill Fluids
Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: _____ Semi-Closed Loop: _____
Multi-Well: _____ Disposal Location: _____

Comment: WELL HAS NOT BEEN STAKED FOR DRILLING. EXTRACTION WELL AND
PRODUCTION FACILITY AT THIS LOCATION.

Corrective Action: _____ Date: _____

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

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

Land Use: DRY LAND

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 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: DRY LAND _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____ Pass _____

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 ☐

Attached Documents

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

Document Num	Description	URL
681901646	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3987904