

**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:

10/26/2016

Submitted Date:

11/01/2016

Document Number:

673714251**FIELD INSPECTION FORM**
 Loc ID 317256 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num:
Operator Information:OGCC Operator Number: 69760Name of Operator: PETRON DEVELOPMENT COMPANYAddress: 1899 W LITTLETON BLVDCity: LITTLETON State: CO Zip: 80120**Status Summary:**

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

Findings:10 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Walker, Jimmy	(303) 794-5300	jim@petron.net	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
237494	WELL	PR	03/05/1993	OW	121-09997	STENNETT 4-15	PR

General Comment:

LocationOverall Good: ☒

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

Emergency Contact Number:

Comment: 970-768-5659

Corrective Action:

Date: _____

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Bird Protectors	# 1		
Comment:	smoke stack		
Corrective Action:		Date:	
Type: Progressive Cavity	# 1		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 8		
Comment:	3 chemical containers, RTU, electric panel, REA pole (3 phase) at well; shed with triplex pump and chemical container at produced water tanks		
Corrective Action:		Date:	
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tanak ID	SE GPS
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CRUDE OIL	1	400 BBLS	HEATED STEEL AST			
Comment:						
Corrective Action:					Date:	
<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Comment:		same berms for all tanks				
Corrective Action:					Date:	
Contents	#	Capacity	Type	Tanak ID	SE GPS	
PRODUCED WATER	2	400 BBLS	FIBERGLASS AST		40.140370,-102.850490	
Comment:						
Corrective Action:					Date:	
<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Earth	Adequate	Walls Sufficient	Base Sufficient	Adequate		
Comment:						
Corrective Action:					Date:	
Contents	#	Capacity	Type	Tanak ID	SE GPS	
CRUDE OIL	2	300 BBLS	HEATED STEEL AST			
Comment:		smoke stack with bird protector				
Corrective Action:					Date:	
<u>Paint</u>						
Condition	Adequate					
Other (Content)						
Other (Capacity)						
Other (Type)						
<u>Berms</u>						
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance		
Comment:		same berms for all tanks				

Corrective Action:		Date:	
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Venting:

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 237494

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:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Inspected Facilities									
Facility ID:	237494	Type:	WELL	API Number:	121-09997	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	PR. Sep 2016 reported to COGCC database.								
Corrective Action:				Date:					

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

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

Land Use: _____

Comment: dryland**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? Pass

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 ? _____

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: _____

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
Berms	Pass					at tank battery
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass	Material Handling And Spill Prevention	Pass	

Comment: Corrective Action: Date: **Pits:** ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: NOPit ID: Lat: Long: Reference Point: Other: Length: 700Width: 100**Lining:**Liner Type: Liner Condition: Comment: Corrective Action: Date: c**Fencing:**Fencing Type: NoneFencing Condition: Comment: Corrective Action: Date: **Netting:**Netting Type: Netting Condition: Comment: Corrective Action: Date: Anchor Trench Present: Oil Accumulation: NO2+ feet Freeboard: Comment: Corrective Action: Date: Type: Produced WaterLined: NOPit ID: Lat: Long: Reference Point: Other: Length: 300Width: 150**Lining:**Liner Type: Liner Condition: Comment: Corrective Action: Date: c**Fencing:**Fencing Type: NoneFencing Condition: Comment: Corrective Action: Date: **Netting:**

Netting Type:		Netting Condition:		
Corrective Action	Comment:			Date:
Anchor Trench Present:		Oil Accumulation: <u>NO</u>	2+ feet Freeboard:	
Corrective Action	Comment:			Date:
Type: <u>Produced Water</u>	Lined: <u>NO</u>	Pit ID:	Lat:	Long:
Reference Point: <u>SE</u>	Other: _____	Length: <u>700</u>	Width: <u>150</u>	
<u>Lining:</u>				
Liner Type:		Liner Condition:		
Corrective Action	Comment:			Date: <u>c</u>
<u>Fencing:</u>				
Fencing Type: <u>None</u>		Fencing Condition:		
Corrective Action	Comment:			Date:
<u>Netting:</u>				
Netting Type:		Netting Condition:		
Corrective Action	Comment:			Date:
Anchor Trench Present:		Oil Accumulation: <u>NO</u>	2+ feet Freeboard:	
Corrective Action	Comment:			Date:
Type: <u>Produced Water</u>	Lined: <u>NO</u>	Pit ID:	Lat:	Long:
Reference Point: <u>SE</u>	Other: _____	Length: <u>400</u>	Width: <u>150</u>	
<u>Lining:</u>				
Liner Type:		Liner Condition:		
Corrective Action	Comment:			Date: <u>c</u>
<u>Fencing:</u>				
Fencing Type: <u>None</u>		Fencing Condition:		
Corrective Action	Comment:			Date:
<u>Netting:</u>				
Netting Type:		Netting Condition:		
Corrective Action	Comment:			Date:

Inspector Name: Sherman, Susan

Anchor Trench Present:	Oil Accumulation: <u>NO</u>	2+ feet Freeboard:
Comment:		
Corrective Action		
		Date:

Attached Documents

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

Document Num	Description	URL
673714251	INSPECTION APPROVED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3996072